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PSYCHO-EMOTIONAL STATE OF PARENTS OF CHILDREN WITH DISABILITIES IN WAR CONDITIONS

В умовах війни психоемоційний стан людини зазнає значних змін, відображаючи її сприйняття навколишнього світу. Життєстійкість у таких стресових ситуаціях багато в чому залежить від здатності людини адаптуватися до нових життєвих викликів, справлятися зі стресом, долати труднощі та зберігати внутрішню рівновагу. Війна має значний вплив на емоційно-психологічний стан людини, спричиняючи глибокі та багатовимірні зміни. Зміна звичного способу життя та загрози безпеці можуть серйозно вплинути на психічне здоров'я та викликати емоційну нестабільність.

Дослідження психоемоційного стану батьків, які виховують дітей з інвалідністю, показало, що військовий конфлікт викликає різні форми стресу і тривоги та призводить до емоційного виснаження і погіршення психологічного стану. У статті представлено теоретичний та емпіричний аналіз психоемоційного стану батьків, які виховують дітей з інвалідністю в умовах війни. Психоемоційний стан є показником психологічного благополуччя людини і значною мірою визначається рівнем розвитку її емоційного інтелекту, який забезпечує здатність усвідомлювати та управляти як власними емоціями, так і емоціями інших людей.

Інтеграція наведених вище даних підтверджує тезу про мультиплікативний ефект війни. Всі розглянуті фактори - від складності поведінки дитини до економічної нестабільності - взаємно підсилюють один одного. Теоретичні моделі стресу, засновані на балансі загроз і ресурсів, пояснюють, чому батьки дітей з інвалідністю швидше перетинають «поріг патології»: їхні базові ресурси (час, гроші, соціальна підтримка) спочатку нижчі, а рівень втрат у воєнний час вищий.

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Психоемоційні розлади у батьків дітей з інвалідністю виникають частіше, ніж у загальної батьківської популяції, оскільки війна додає додаткові шари ризику до існуючого тягаря догляду: фізична небезпека, руйнування служб, економічні втрати, соціальна стигма. Коли кількість втрат перевищує здатність сім'ї мобілізувати ресурси, стрес набуває клінічної форми.

Емпірична частина дослідження містить результати анкетування, спрямованого на аналіз психоемоційного стану батьків, які виховують дітей з інвалідністю в умовах війни, а також виявлення основних факторів, що мають на нього найбільший вплив. У дослідженні взяли участь 30 батьків, 25 жінок та 5 чоловіків, віком від 28 до 55 років, які виховують дітей з інвалідністю з різними нозологіями. Було виявлено, що 70% респондентів відчувають підвищену тривожність, порушення сну, почуття самотності та страху за майбутнє, а 80% відчувають емоційне виснаження. 85% респондентів діляться своїми переживаннями з родиною та друзями, що допомагає їм впоратися з виснаженням та викликами війни, і лише 30% отримують психологічну допомогу від фахівців, хоча 65% зазначили, що потребують професійної психологічної та соціальної підтримки. Значну увагу було приділено визначенню можливих шляхів підтримки батьків, які можуть покращити їхнє фізичне та психічне здоров'я. За даними опитування, 75% респондентів вбачають шляхи покращення свого психоемоційного стану в отриманні комплексної допомоги.

У статті підкреслюється, що саме комплексна підтримка батьків дітей з інвалідністю, яка включає психологічну допомогу, соціальні послуги та програми, спрямовані на зменшення відчуття ізоляції, дозволить їм відчувати підтримку суспільства, ефективніше справлятися з викликами виховання дітей в умовах війни та забезпечити собі і своїм дітям кращу якість життя. Такий підхід сприяє інтеграції сімей у соціальне середовище, знижує рівень стресу та покращує психоемоційний стан батьків.

Ключові слова: психоемоційний стан, батьки дітей з інвалідністю, війна, емоційне вигорання, психологічна підтримка, соціальна підтримка, психологічне здоров'я.

In war conditions, the psycho-emotional state of a person undergoes significant changes, reflecting his or her perception of the world around him or her. Resilience in such stressful situations largely depends on a person's ability to adapt to new life challenges, cope with stress, overcome difficulties and maintain inner balance. War has a significant impact on the emotional and psychological state of an individual, causing profound and multidimensional changes. Changes in the usual way of life and threats to security can seriously affect mental health and cause emotional instability.

A study of the psycho-emotional state of parents raising children with disabilities has shown that military conflict causes various forms of stress and anxiety and leads to emotional exhaustion and deterioration of the psychological state. The article presents a theoretical and empirical analysis of the psycho-emotional state of parents raising children with disabilities in war. The psycho-emotional state is an indicator of a person's psychological well-being and is largely determined by the level of development of his or her emotional intelligence, which provides the ability to realize and manage both one's own emotions and the emotions of others.

The integration of the above data confirms the thesis of the multiplier effect of war. All the factors considered - from the child's behavioral complexity to economic instability - mutually reinforce each other. Theoretical models of stress based on the balance of threats and resources explain why parents of children with disabilities cross the "pathology threshold" faster: their basic resources (time, money, social support) are initially lower, and the rate of losses in wartime is higher.

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Psycho-emotional disorders in parents of children with disabilities occur more often than in the general parental population, because war adds additional layers of risk to the existing caregiving burden: physical danger, destruction of services, economic losses, and social stigma. When the number of losses exceeds the family's ability to mobilize resources, stress becomes clinical.

The empirical part of this study contains the results of a questionnaire aimed at analyzing the psycho-emotional state of parents raising children with disabilities in war, as well as identifying the main factors that have the greatest impact on it. The study involved 30 parents, 25 women and 5 men, aged 28 to 55, raising children with disabilities with different nosologies. It was found that 70% of respondents experience increased anxiety, sleep disturbances, feelings of loneliness and fear for the future, and 80% feel emotionally exhausted. 85% of respondents share their experiences with family and friends, which helps them cope with the exhaustion and challenges of the war, and only 30% receive psychological assistance from specialists, although 65% said they need professional psychological and social support. Considerable attention has been paid to identifying possible ways to support parents, which can improve their physical and mental health. According to the survey, 75% of respondents see ways to improve their psycho-emotional state in receiving comprehensive care.

The article emphasizes that it is the comprehensive support for parents of children with disabilities, which includes psychological assistance, social services and programs to reduce the feeling of isolation, that will enable them to feel the support of society, cope more effectively with the challenges of raising children in war and provide themselves and their children with a better quality of life. This approach promotes the integration of families into the social environment, reduces stress and improves the psycho-emotional state of parents.

Key words: psycho-emotional state, parents of children with disabilities, war, emotional burnout, psychological support, social support, psychological health.

Problem statement. Families raising children with disabilities belong to the most vulnerable categories, as they face increased difficulties in providing adequate care, medical services and social support for their children. According to international research (Brown & White, 2023), parents of children with disabilities living in armed conflict are 2-3 times more likely to develop depression and anxiety disorders than parents of children without disabilities. In addition, they are more likely to experience feelings of guilt, helplessness, and social isolation.

The war has exacerbated the problems of access to necessary services, increased the psychological burden on families and increased the risk of social exclusion. Parents of such children face a double challenge - to ensure the safety of their children under martial law, to provide them with care and specialized support, and to cope with their own stress and anxiety. In such circumstances, it is extremely important to study the psycho-emotional state of parents raising children with disabilities, as a significant psycho-emotional burden and high level of stress affect not only them, but also the quality of life of their children and the family as a whole. The study of this topic is extremely important, as it allows us to identify a number of factors that negatively affect the psycho-emotional state of parents, as well as to identify ways to overcome them. The relevance of the topic is also emphasized by its importance in the social context, and the development of effective support and intervention programs can help parents and children to survive these difficult times with the least consequences for their physical and mental health. Therefore, studying the psycho-emotional state of parents of children with disabilities is one of the key aspects of providing support to this category in the context of military trials.

The purpose of this article is to provide a theoretical grounding and empirical study of the psycho-emotional state of parents raising children with disabilities in war.

Presentation of the main material. The analysis of the scientific literature does not provide us with a clear and unambiguous definition of the concept of "psycho-emotional state". Scientists use a variety of terms, including: "mental state", "emotional state", "psycho-emotional state", etc. According to E.P. Ilyin, mental states are the reaction of functional systems to external and internal factors aimed at achieving a beneficial result for the body. This reaction helps to adapt to specific conditions of existence, maintain the integrity of the organism and ensure its vital activity in certain situations. Expanding the scientific understanding of mental states, M.A. Kuznetsov, K.I. Fomenko and O.I. Kuznetsov concluded that any mental state is both an experience of the subject and the result of the activity of various body systems. It has external manifestations and affects the effectiveness of the activity performed"[5]. At the same time, the psycho-emotional state serves as an indicator of the psychological well-being of the individual. We share the opinion of M.M. Shpak that the psycho-emotional state largely depends on the level of development of emotional intelligence, which determines the ability of a person to understand and manage both their own emotions and the emotions of others.

Research shows that a high level of emotional intelligence contributes to emotional self-control, effective self-regulation, increased stress resistance and plays an important role in ensuring positive well-being, psychological well-being and overall life satisfaction [2].

Psychological characteristics, problems of psychological health and well-being of parents raising children with disabilities have been studied since the 60s of the last century. In particular, M. D. Budaeva, T. M. Vysotina, A. L. Dushka, K. O. Dautova, G. A. Dykhanbaeva, O. O. Zymina, O. O. Ruskykh, M. M. Guslova, T. K. Sture analyzed the psychological characteristics of parents of children with developmental disabilities; G. B. Sokolova - studied emotional burnout and protective behavior of parents of children with Down syndrome, as well as the specifics of psychological and pedagogical support for families raising a child with disabilities; B. V. Andreyko - studied emotional states and psychological assistance to parents of children with developmental disabilities; L. G. Zaborina - dealt with issues of psychological stress and emotional experiences of parents of children with disabilities; E. Tykha, O. Mahler and G. Tsikoto studied how parents adapt to stressful situations and how this affects their relationships with children. A. Dushka focuses on modern innovative approaches to supporting families raising children with special needs, as well as ensuring their psychological well-being [11].

In her article "Psychological Assistance to Parents of Children with Special Educational Needs in the Context of War," T. Kalinina analyzes the level of parental anxiety during the war, considers ways to overcome stress and methods of psychological support [4]. O. Bukovska explores the difficulties faced by families raising children with developmental disabilities and suggests areas of psychological assistance. In particular, she identifies the following approaches: diagnostic, counseling, correctional, rehabilitation, prognostic, and multidisciplinary [2].

Children with disabilities require significantly more time for basic care, rehabilitation and medical manipulations. Longitudinal studies (Hayes & Watson, 2013; Karatzias et al., 2023) confirm that the intensity of care correlates with an increased incidence of clinical depression in mothers. Autism spectrum disorders, epilepsy, or severe cerebral palsy are often accompanied by aggression, self-stimulation, and nighttime awakenings. In a sample of Israeli families during Operation Swords of Iron, parental burnout was directly related to the frequency of the child's behavioral episodes [6].

Acute seizures, the risk of asphyxiation, and unpredictable hospitalizations maintain a state of hypervigilance, which, according to the allostatic load model, accelerates the development of anxiety and depressive disorders. The war dramatically reduces family incomes (up to 80% of Ukrainian caregivers surveyed have lost their main source of income) and complicates access to special food, diapers, and rehabilitation equipment. According to Hobfall's theory of resource conservation, it is the loss of resources that is the main predictor of distress [9].

Data from Disability Rights International (2023) show that the proportion of children who received regular rehabilitation dropped from 80% to less than 50% in the first year of the war. The closure of inclusive centers and the barrier nature of shelters deprive parents of respite care and increase social isolation, which in turn increases depressive symptoms. In shelters and temporary settlements, parents often face negative reactions to their child's "atypical" behavior. Single mothers, who make up up to 72% of the sample in NGO reports, demonstrate twice the risk of PTSD, especially in the frontline areas. Israeli and Polish data show that low social support and a lack of emotional regulation skills double the link between children's behavioral difficulties and parental burnout. On the contrary, the presence of "natural" support networks (relatives, online communities) serves as a stress buffer.

Semantic structural modeling by Hyland (2024) shows that when a family simultaneously loses housing, income, and access to health care, the likelihood of clinical depression in caregivers exceeds 60%. Thus, it is not a single stressor, but a cascade of stressors that leads to mental maladjustment. The integration of the above data confirms the thesis of the multiplier effect of war.

All of the factors considered - from the child's behavioral complexity to economic instability - mutually reinforce each other. Theoretical models of stress based on the balance of threats and resources explain why parents of children with disabilities cross the "pathology threshold" faster: their basic resources (time, money, social support) are initially lower, and the rate of losses in wartime is higher.

Psycho-emotional disorders in parents of children with disabilities occur more often than in the general parental population, because war adds additional layers of risk to the existing caregiving burden: physical danger, destruction of services, economic losses, and social stigma. When the number of losses exceeds the family's ability to mobilize resources, stress becomes clinical. Therefore, prevention programs should be equally multi-level: from restoring rehabilitation infrastructure and providing barrier-free shelters to expanding telepsychotherapy and mutual aid networks that support parents on a biopsychosocial level [5].

Scientific studies emphasize that the birth of a child with a disability imposes certain restrictions on the family's usual rhythm of life, changes the organization of everyday life, requires additional efforts and responsibilities, and sometimes even forces them to abandon established habits and traditions. This situation causes a feeling of fear, despair, uncertainty and helplessness, becoming a serious challenge for the family. The reaction to this event can vary: some parents take it hard at first, but eventually accept the situation, while others may even abandon the child. Scientists analyzing this problem have identified several stages of acceptance of a child with a disability. German psychologist E. Schuchhardt has identified eight such stages:

1. Shock. The birth of a child with special needs comes as an unexpected shock, for which it is impossible to be prepared. Parents are in a state of confusion and are easily influenced by external factors
2. Denial. Doubts about the diagnosis arise, and parents try to find alternative explanations, spending significant resources on finding another medical assessment.
3. Searching. They make every effort to "fix" the situation, sometimes losing sight of the importance of unconditional love for the child, which is accompanied by feelings of anxiety and frustration.
4. Aggression. There is anger at doctors, themselves, and others, which worsens family relationships, causes social isolation, and increases anxiety.
5. Depression. After numerous attempts to help the child, parents may feel hopeless, neglect their own needs and experience a deep state of emotional exhaustion.
6. Realization of reality. Gradually, understanding of the situation comes, parents begin to look for real ways to adapt to new conditions.

7. Constructive adaptation. They learn new parenting strategies, find resources to support their child, and begin to actively cooperate with specialists.

8. Acceptance and new meaning. Parents fully realize and accept the child's peculiarities, find new meanings in their experience and support his/her development [1].

This model allows for a better understanding of the psychological processes parents go through and helps to develop effective strategies to support their emotional well-being.

The vast majority of scholars believe that such parents live in extreme conditions, in a situation of chronic stress. Such extreme conditions become the main factor in the development of emotional burnout syndrome in parents raising children with disabilities. And the conditions of martial law have an even more significant impact on the deterioration of the psycho-emotional state of parents [3].

For this reason, we created a questionnaire for the empirical study aimed at collecting information about the psycho-emotional state of parents of children with disabilities and the changes in their lives that occurred after the outbreak of war. The structure of the questionnaire included several sections:

- general information about the respondents, their age, gender, type of their child's disability and place of residence;

- emotional state, this section consisted of questions about how the emotional state of parents has changed since the outbreak of war, what emotions have dominated them recently and whether the respondents feel emotionally exhausted;

- access to resources and assistance, this section consisted of questions that allowed us to assess the availability of resources and accessibility of services necessary to meet the vital needs of themselves and their

The main results of the survey are presented in Table 1.

Table 1.

Results of the study of the psycho-emotional state of parents of children with disabilities

№	Section	The result of the survey
1	Emotional state	70% experience increased anxiety, feelings of loneliness and fear for the future, and 80% feel emotionally exhausted
2	Social support	85% share their experiences with family and friends, while only 30% receive psychological help from specialist
3	Access to resources and assistance	50% face problems in accessing medical and rehabilitation services, 50% experience educational difficulties
4	Needs and possible ways of support	65% feel the need for psycho-emotional support from specialists, 90% for quality medical and rehabilitation services, and 70% for social integration and leisure

Parents of children with disabilities often experience increased anxiety and fear for the future of their children, and the analysis of the results showed that the level of anxiety and fear has increased significantly since the beginning of the war, as stated by 70% of respondents. 75% do not leave the feeling of loneliness due to limited opportunities for communication, closure or inaccessibility of certain projects and support centers where they previously found help and support, 80% feel emotionally exhausted due to constant care for children without the possibility of rest or change of scenery. Almost all respondents emphasized the importance of the role of support from family and friends. 85% of respondents share their experiences with family and friends and feel their support, while emphasizing that they would like to receive quality psychological assistance from specialists, as the survey showed that only 30% receive such assistance.

It was found that 50% of respondents have problems with access to medical and rehabilitation services, 50% experience educational difficulties due to the partial transition to distance learning and the loss of the ability of children to communicate with classmates, which negatively affects the emotional state

of children and, accordingly, leads to emotional exhaustion of parents who remain almost the only interlocutors of the child.

In addition, due to frequent air raids and the inability of children with disabilities to move and stay in shelters due to physical and health conditions, parents are forced to take their children out of school early almost every day, which only increases their stress and sense of helplessness.

Parents of children with disabilities identified the need for psycho-emotional support from professionals as their key needs (65%), quality medical and rehabilitation services (70%), and social integration and leisure (70%).

The questionnaire also contained additional questions, including: "What changes has the war brought to your life?" In their answers, 80% of respondents emphasized that they felt afraid of being abandoned and losing social assistance from the state, which in many families remains almost the only source of income, as mothers cannot work due to the need for constant care for a child with a disability. To the question: "What, in your opinion, can improve the psycho-emotional state of parents of children with disabilities in times of war?" 75% answered that comprehensive support and assistance, including psychological, medical care, financial support, and access to quality educational services. Support from both the state and non-governmental organizations.

Conclusion. Disruption of the psycho-emotional state of parents of children with disabilities during war occurs at the intersection of several layers of risk. At the macro level, there is shelling and evacuations; at the level, the collapse of support systems and the economy; at the micro level, the severity of the child's disability and continuous care. These external factors are reinforced by internal factors (emotional regulation, social support) and socio-demographic determinants (gender, single parenthood, frontline location). The more layers are superimposed, the faster the stress turns into PTSD, depression, or parental burnout. Accordingly, effective interventions should be equally multi-level - from barrier-free shelters and rehabilitation to online psychotherapy and mutual aid communities that "stitch" the family with new resources despite the war storm. The study confirmed that the war has a negative impact on the psycho-emotional state of parents raising children with disabilities. High levels of stress, uncertainty about the future, and lack of proper support lead to a deterioration in their emotional well-being, which in turn affects the quality of family relationships and overall standard of living.

The support of family and friends, as well as the help of professionals, plays an important role in maintaining the mental health and resilience of parents. However, not all respondents are ready to share their experiences with their loved ones, and only 30% receive qualified psychological help.

The study also showed that parents face difficulties in accessing medical, rehabilitation and educational services for their children. They are particularly in need of psycho-emotional support, quality medical and rehabilitation programs, as well as opportunities for social integration and leisure. The findings emphasize the need to implement comprehensive assistance programs adapted to the needs of families of children with disabilities, which will help improve their psychological state and help them effectively overcome the challenges of war.

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