



**Helping Those Who Help:
psychoeducational, educational,
psychological and supportive aid
in the context of Russia's full-scale
war against Ukraine**



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The publication includes contributions from the experts of the Helping Those Who Help project: Natalia Pidkaliuk, Ruslana Rudenko, Liliia Oliynyk, Dr. Joshua Kreimeyer and participants of the “Helping Those Who Help” project: Maryna Syvets, Vladlena Petryk, Natalia Otroshchenko, Yuliia Kurylo, Ihor Kotsiuba, Viktoriia Bulantseva, Alla Voytyna.

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This publication provides a brief overview of the experience of providing psychological and legal aid in the context of Russia's full-scale war against Ukraine and the results of the Helping Those Who Help project, developed and implemented by the Human Rights Vector NGO with financial assistance from the European Union under the Stiykist Programme. The Stiykist Programme is a 30-month project funded by the European Union and implemented by ERIM in partnership with the Black Sea Trust, the Eastern Europe Foundation, the Human Rights Houses Foundation, and the Human Rights House in Tbilisi. The Stiykist Programme is aimed at strengthening the resilience and effectiveness of war-affected CSOs and civil society workers affected by the war in Ukraine, including independent media and human rights defenders.

This publication will be helpful to psychologists, psychotherapists, members of the medical community, social workers, lawyers, jurists, mediators, representatives of Ukrainian and foreign NGOs, state authorities, local governments, donor organisations, researchers, and other interested parties.

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1. Introduction

This publication is dedicated to all those who believe in and fight for Ukraine's victory, help each other in this struggle and work on recovery.

We, the team of the Human Rights Vector NGO, are deeply grateful to all those who are defending our country at the front and who enable us to work to overcome the consequences of the war and to contribute to improving the psychological and mental health of the population, increasing the resilience and capacity of representatives of helping professions.

We admire the work and strength of psychologists, psychotherapists, psychiatrists and other doctors, social workers, medical staff, lawyers, mediators, teachers, journalists and people from many other helping professions who participated in the Helping Those Who Help project and filled this publication with their experience of providing psychological and legal aid and feedback on the training and support programme implemented within the project. It is these people who first encounter the human pain that war brings while, like the rest of us, experiencing its terrible destructive consequences.

The peculiarity of Ukraine's situation is that we are rebuilding in times of destruction. We do not have time to wait until the fighting stops and then rebuild Ukraine, as this is already happening in all spheres of our lives. Moreover, we are developing innovative methods and unique experiences to help. It ensures our steady move towards Ukraine's victory and post-war development daily.

Today, there is an active exchange of experience between Ukrainian and foreign representatives of the helping professions. We are grateful to our foreign colleagues who are helping to fight and rebuild Ukraine, including experts from the United States, Germany, and Israel who participated in the Helping Hands project. The example

of our project also demonstrates that we can adapt the foreign experience to Ukrainian realities and that there is a great demand abroad for our experiences of helping in war to be used to overcome the consequences of other armed conflicts or in civilian life to overcome the consequences of other disasters or traumatic events.

We are eager to thank the entire expert and organisational team of the Helping Those Who Help project for their dedicated and inspiring work and the donors for the opportunity to implement our plans.

We believe that through mutual assistance and support, we will be able to bring the dream of a world without wars, where human rights are respected without exception, closer.

We hope the information in this publication will inspire you to take care of yourself to help others, start new activities and projects of aid, and find assisting tools.

We are stronger together!

Valeriia Rybak
Director of the Human Rights Vector NGO

2. PUT ON YOUR OXYGEN MASK FIRST, BEFORE...

2.1. About the Helping Those Who Help project

The horrific events of Russia's war against Ukraine, which reached an unprecedented scale in 2022, have had a tremendous negative impact on all areas of life, including psychological and mental health.

While at the beginning of Russia's full-scale invasion of Ukraine, the Human Rights Vector team and I helped victims overcome the first wave of shocking and traumatic events, later on, we helped them adapt and act actively in the context of a long-term war.

In response to the consequences of the full-scale invasion of Ukraine by the Russian Federation, the Human Rights Vector NGO organised the Psychological and Legal Aid Line, which began its activities on 12 April 2022. In the first stages, it was titled "Psychological and Legal Aid for People with Disabilities under Martial Law," which reflected the primary target audience, and later, in response to requests, the organisation expanded the range of people to provide aid to. In 2022, a professional team provided individual psychological and legal counselling, held psychotherapy mutual support groups, supervision groups for psychologists, webinars, and prepared information materials¹.

During the work of the hotline, we became convinced of the importance of combining psychological and legal aid to stabilise the condition of victims of war. Often, clients sought legal support, yet while clarifying their requests, it became clear that they also needed

¹ Detailed information about the Psychological and Legal Aid Line of the Human Rights Vector NGO can be found in the annual report of the Human Rights Vector NGO for 2022 at the link: <https://hrvector.org/richni-zviti/>

psychological help to cope with the psycho-emotional stress of the traumatic event and the need to document facts, obtain statuses, etc. And vice versa, when people sought psychological help, it often turned out that the key to solving their issues was within the legal framework.

At the beginning of 2023, the Human Rights Vector NGO reviewed the needs of Ukrainian psychological and legal aid providers and the challenges they face in the Russian Federation's war against Ukraine. The information was prepared based on the survey conducted in early 2023 by the Human Rights Vector NGO among representatives of the public sector and NGO sector who provided psychological and/or legal aid in the context of war after the full-scale invasion of Ukraine by the Russian Federation. The results are presented in the publication "Online Psychological and Legal Aid in the First Year after the Full-scale Russian Invasion of Ukraine. A brief overview of the needs of psychological and legal aid providers. Part 1²." Colleagues noted that the number of clients seeking psychological and legal aid is increasing. At the same time, they start noticing signs of burnout and emotional exhaustion, and there is a growing need for advanced training and specific knowledge.

Thus, realising that the war could last much longer than first expected after the full-scale invasion, the team of the Human Rights Vector NGO decided to look for ways to increase the capacity and resilience of professional communities to help more people in general and contribute to the tasks currently facing Ukraine:

- overcoming the consequences of the traumatic events of the war;
- maintaining psychological and mental health to continue the fight, win the victory and further restore Ukraine.

2 Online psychological and legal aid during the first year after the full-scale invasion of Ukraine by the Russian Federation. A brief overview of the needs of psychological and legal aid providers. Part 1. – Kyiv: Human Rights Vector NGO, 2023. – 36 p. – <https://hrvector.org/en/reports/23-03-20-p1>

It is how the Helping Those Who Help project was born.

The project activities aim to increase the resilience and capacity of representatives of helping professions by:

- A) developing and conducting educational events,
- B) providing specialised psychological support in supervision groups and groups for practice reflection and mutual assistance,
- C) holding public events and preparing materials for sharing experiences.

In total, 629 participants who represented psychological, psychosocial and legal areas have registered to participate in the Helping Those Who Help project. This once again underlines the need to create and operate projects designed to support helping professionals.

The project team included well-known Ukrainian and foreign (USA, Israel, Germany) psychologists, psychotherapists, supervisors, psychiatrists, and lawyers who developed a training programme that included theoretical and practical parts.

Totally, eight two-day online and offline trainings were held for specialists in legal, psychological and psychosocial specialities from June to September 2023.

During the theoretical and practical part, the participants got acquainted with and improved their knowledge of the following topics:

- **“What is ‘normal’ in extreme and rapidly changing conditions.”** Participants and trainers worked on personal resources for overcoming crisis/traumatic situations, including cross-sectoral interaction between specialists in psychological aid and ones in psychosocial support. More about the event: <https://hrvector.org/podiyi/23-06-07-02-03.06.23>

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- **“PTSD and Life in Prolonged Stress.”** Psychologists listened to lectures by trainers on helping families of military and veterans, the Safe Place technique, PTSD treatment protocol and differential diagnosis of stress disorders. More about the event: <https://hrvector.org/podiyi/23-07-05-ptsr>
 - **“Normal Life in Prolonged Stress.”** Trainers discussed the risks of helping professions and the additional burden of dealing with trauma. More about the event: <https://hrvector.org/podiyi/23-07-07-04-05.07.23>
 - **“Adaptation to new conditions. Accelerated Recovery and Accelerated Change.”** Psychologists talked about the neurobiology and treatment of trauma and studied the See Far CBT methodology. More about the event: <https://hrvector.org/podiyi/23-08-09-22-23.07.23>
 - **“Building a dialogue with clients.”** Lawyers worked on the interviewing scheme, the PEACE model and its efficient application, as well as professional risks that lawyers may be exposed to. There was a lecture on psychological states depending on the period of traumatic experience and secondary traumatisation of the lawyer. More about the event: <https://hrvector.org/podiyi/23-08-02-31.07-01.08.23>
 - **“Victim-centred approach: psychological aspects in the work of a lawyer.”** Lawyers worked on the rights and needs of victims. They discussed the re-traumatisation of clients and the trauma of witnesses to crimes. More about the event: <https://hrvector.org/podiyi/23-08-21-15-16.08.2023>
 - **“Resilience and recovery. Or how to continue living with “all this.”** Participants discussed the development of mental health services in communities and created their own maps of mental health in communities in Ukraine. They also worked on personal and group resources for overcoming

prolonged crises and situations. More about the event: <https://hrvector.org/podiyi/23-08-17-12-13.08.2023>

- **“Resources for coping and resilience.”** Lawyer stalked about informed consent as an element of resilience, and participants shared their own experiences by developing a map of legal and psychological aid in the regions of our country. More about the event: <https://hrvector.org/podiyi/23-09-12-05-06.09.23>

The training participants, practitioners providing psychological and legal aid, also had the opportunity to participate in supervision groups and groups for practice reflection and mutual assistance as part of the Helping Those Who Help project. During November-December 2023, 4 sessions were held in each group. The groups were open to all participants who had completed the previous project training. During the conference, there was an opportunity to consider case studies and individual cases of specialists who, like others, were experiencing war events.

As a result of the project, the number of specialists who will be able to better assist war victims in current events and the future in peacetime – in other crisis events, such as natural disasters, and to contribute to the reconstruction/recovery of families, groups, and communities, has increased.

246

In total, 246 professionals from private, civic and public sectors participated in the training events and groups for supervision, practice reflection and mutual assistance.

Among the statistics, we can note that out of 246 participants, 220 were women (89%), 24 were men (10%), and 2 did not wish to specify (1%). 34 people also reported whether they belonged to specific groups, including 29 participants who reported that they were IDPs, 5 – veterans and combatants, and 7 – people with disabilities.

During registration and participation in the events, participants had an opportunity to share information about their professional experience. Most of them had already completed a long professional career, but some professionals had just started working in their chosen speciality or were studying. The participants indicated that they consider themselves to be the following professions: psychologists, psychotherapists, art therapists, psychosomatologists and nutritionists, psychiatrists and other doctors, lawyers, mediators, teachers, journalists, social educators, social workers, military personnel, investigators and others who perform both managerial functions and direct provision of psychological, medical and legal aid.

Following the training, supervision, practice reflection and mutual support groups, participants provided anonymous feedback on the events, sharing what was particularly important to them and what they would like to work on. In total, we received 294 feedback questionnaires³.

At the end of the training and support activities, we invited the participants to share their experiences and describe case studies where they used the techniques presented in the Helping Those Who Help project to help clients or support their psychological health. We received 12 questionnaires from participants who provided psychological and legal aid.

Below are examples of responses from these surveys. Depending on whether the survey was anonymous or not, we will indicate to whom the quote belongs. On 3 April 2024, the **conference «Helping Those Who Help: Challenges in the Work and Maintenance of Their Working Condition of Specialists Providing Psychological and Legal Aid»** was held⁴.

3 Participants could complete the questionnaire several times.

4 We invite you to watch and share the video of the conference. The video is available in Ukrainian: <https://www.youtube.com/watch?v=pi5jD7oHrKO> and in English: <https://youtu.be/Y47saT9Vqyo> More information about the conference and its speakers can be found here: <https://hrvector.org/podiyi/24-04-05-03.04.24>

910

The 910 participants from all regions of Ukraine and abroad participated in the event.

The conference aimed to finalise the Helping Those Who Help project, uniting efforts in the face of new challenges and finding efficient solutions. Given the high demand from specialists to participate in the event and receive information about the issues covered, we organised the conference on two online platforms (Zoom and YouTube) with maximum involvement of participants in sharing their experiences.

The event was attended mainly by representatives of government agencies, local self-government, and municipal institutions. At the same time, many specialists provide psychological, legal and social aid within NGOs, foundations, and associations, both Ukrainian and international, and have private practice.

These are all professionals who responded to the question of helping themselves to help others.

This event has become an important communication platform for representatives of the public and non-governmental sectors who work on the same issues and have similar problems: their exhaustion and burnout, lack of resources, the need for training, difficulties in fulfilling client requests, gaining client trust, the psycho-emotional state of clients, legislative gaps, etc.

During the event, we conducted surveys in which participants who joined Zoom and YouTube could participate if they wished.

63% specified the need to increase opportunities for sharing experiences with colleagues. It again confirms that we need to «synchronise our watches» more often, unite, communicate, and build cross-sectoral partnerships.

54% of the respondents reported their exhaustion and burnout. Most participants have not yet attended our educational and support events, so they are worth continuing because of the need and demand.

39% of those who participated in the surveys during the event mentioned the problem of establishing multi-level aid to clients involving various services and authorities. While answering the question about current needs.

We would like to thank our expert team and invite you to get acquainted with them.



Iryna Ratzke-Rybak (Ukraine-Germany)

Psychologist, supervisor, training analyst, group analyst, couples and family therapist. She has more than 20 years of experience as a therapist and training analyst in individual and group therapy, 10 of them in the regional clinical hospital with various psychosomatic disorders.

She is a member of the Presidium of the Association of Psychologists and Psychotherapists of Ukraine (APPU) and head of the Department of Psychoanalytic Psychotherapy for Couples and Families (Ukraine). She is an EFPP Delegate from the Department of Psychoanalytic Psychotherapy of Couples and Families from the APPA in the Department of Couple and Family Psychotherapy. She is a valid GASI member. She is a guest lecturer at the Evangelisches Bildungswerk Regensburg (Germany). Certified Master Trainer in Mental

Health, focusing on trauma psychotherapy and PTSD treatment, Community Stress Prevention Centre מִיבֵּאֲשֶׁם זִכְרָה (Israel). Founder of the Khmelnytsky School of Psychotherapy (Ukraine).

Iryna is a private practitioner and founding director of the Creative Laboratory for Human Development “Lebenskompetenzen”, Regensburg (Germany).

Iryna provides group psychological and psychosocial support to women and children forced to migrate from Ukraine to Germany at EBW (Evangelical Academy).



Natalia Pidkaliuk (Ukraine)

Psychiatrist, Trauma Focus trainer (Institute of Neuropsychotherapy, Austria), head of IPSI NGO.

Natalia participates in educational projects on group psychoanalysis (APPU), clinical hypnosis (APPU), reconsolidation of traumatic memories (RTM), and crisis leadership programs (Centre for Humanitarian Leadership).

Natalya has 20 years of professional experience, 12 of which she worked in a psychiatric clinic and then in the Centre for Medical and Psychological Rehabilitation of Stress Disorders. Since December 2021, she has been conducting private practice and is the head of the NGO.

Since the beginning of the full-scale war, the IPSI NGO has provided psychosocial support services to people affected by the war, with individual consultations and group classes. Since August 2022, the IPSI has been operating the [Plus Plus](#) veteran space as part of the Veteran Hub, which provides psychological, social and legal support services for veterans and their families. She also conducts training for people in helping professions to prevent professional burnout and organises educational events for psychologists.



Ruslana Rudenko (Ukraine)

Has been in private practice since 2004. She works with children, adolescents and adults in the following areas: play psychotherapy, psychodynamic and analytical therapy, psychological counselling, work with couples and families, trauma therapy, Jungian Sandplay Therapy.

Ruslana is a coordinator of the Zhyva Voda group of volunteer psychologists who work with all categories of military personnel and their families, as well as with internally displaced persons, psychological counselling, and supervisory support for fellow psychologists (September 2014 to the present).

Training analyst and supervisor of the Odesa Psychoanalytic Society. Supervisor of the 10th April NGO. Lecturer at the Odesa Psychoanalytic Institute of Postgraduate Education.

She is a member of the Association of Psychoanalytic Psychotherapies, APPU, and EFPP Delegate from the Department of Psychoanalytic Psychotherapy of Couples and Families, a member of the National Psychological Association, NPA, Division of Psychoanalytic Psychology and Psychotherapy, a member of the Professional Association of Child Analytical Psychologists (PADAP).

Social activities: organisation of social projects to overcome trauma and prevent psychological burnout for volunteers, military personnel, IDPs and social workers; psychological support for military personnel and their families. Translation activities in the field of psychoanalysis and trauma therapy (English-Ukrainian). Interviews on television and radio.



Liliia Oliynyk (Ukraine)

Is a lawyer, mediator, dialogue facilitator, and trainer. She participates in the initiatives of the JurFem NGO to provide aid to victims of sexual violence and all types of gender discrimination and in the projects of the Human Rights Vector NGO on psychological and legal support. She has experience working with conflicts in places of assistance to IDPs. She is the author of scientific publications and manuals on the observance of children's rights, the impact of war on the rights of IDPs, and the European Court of Human Rights Case Law (Ukraine).



Mark Sherman (Israel)

Is a head of the Department of Medical Psychology, Northern District, Israel. See Far CBT trauma and crisis expert. Supervisor. Lecturer at Jaffa Academic College in Tel Aviv. He works with civilians, military personnel and police in an integrated approach. Work and supervision in Ukraine from 2011 to the present.



Dr Joshua Kreimeyer

PhD is a Licensed Professional Counsellor (LPC), Licensed Marriage and Family Therapist (LMFT), and AAMFT Approved Supervisor.

Dr Kreimeyer graduated from the University of Minnesota with a B.S. in Recreation. From there, he joined the United States Army as a cryptologic linguist. He and his family served in California, Texas, and Germany. He participated in combat operations in Kosovo (1999) and Iraq (2003). After

an injury that prevented him from being re-enlisted, he transitioned to civilian life, having used a vocational rehabilitation programme to retrain in the field of clinical mental health counselling. He also received a Post-Master's Certificate in Marriage and Family Therapy and now practices in the United States as a licensed professional counsellor, licensed marriage and family therapist and supervisor. He has worked in community-based outpatient clinics, private practice, the Federal Prisons Residential Drug Abuse Program, and for a number of years as a rehabilitation counsellor and family therapist with the U.S. Department of Veterans Affairs.

In addition to his clinical work, Dr Kreimeyer has been teaching FT since 2016, first as a faculty member at Regis University, as the coordinator of their graduate certificate programme in military family counselling, and most recently (January 2023) as an assistant professor of clinical mental health counselling at Colorado Christian University. Dr Kreimeyer received his doctorate in counsellor training and supervision from Regent University.

Dr Kreimeyer is committed to helping service members and their families navigate the transition from war and military to civilian life, as well as mitigate the effects of trauma. While studying at Regent University, Dr Kreimeyer got engaged in pioneering approaches to provide trauma-informed psychological counselling in Ukraine. He was part of the team that helped establish the International Institute of Postgraduate Education in Kyiv, Ukraine (<https://americanprogram.net/>) and its associated community-based clinic (<https://odukraine.com/>). Since 2019, Dr Kreimeyer has also conducted numerous trainings for Ukrainian psychologists and facilitated retreats for families of Ukrainian soldiers through the International Office of the International Organisation for Migration.



Valeriia Rybak (Ukraine)

Director of the Human Rights Vector NGO, Ukrainian human rights defender, has experience working in both government agencies and NGOs, author and developer of the mechanism for trial broadcasting via court technical facilities, expert on judicial monitoring, author of studies, publications and manuals on the communication activities of the judiciary, observance of the right to a fair trial in Ukraine, development of psychological aid to victims of war and overcoming the consequences of Russia's war against Ukraine (publications are available at <https://hrvector.org/valeriya-ribak>, the list is constantly updated).

Valeriia has been working on human rights protection in the civic sector since 2008.

From 2010 to 2012, she worked as an analyst at the Government Contact Center.

From 2012 to 2016, she developed and coordinated the OZON Civic Monitoring Group, which monitors trials and peaceful assemblies. The OZON operates within the framework of the Center for Civil Liberties, a CSO that received the Nobel Peace Prize in 2022 for its significant work in protecting human rights.

In 2015, Ms. Rybak provided professional training for the patrol units at the Ministry of Internal Affairs of Kyiv on the Police and Society Partnership.

Valeriia Rybak is one of the founders of the Human Rights Vector NGO and has been running it since 2016. Within the Organization, in particular, she promoted the dissemination of the mechanism of trial broadcasting via court technical facilities in courts throughout Ukraine, initiated the use of court broadcasts as an educational tool in the training of lawyers in higher education institutions, organized and was one of the trainers of the first systematic

training program for court press secretaries, launched and coordinated projects on judicial communications in times of war, psychological aid to victims of Russia's war against Ukraine and representatives of helping professions.

2.2. How helping professionals participating in the Helping Those Who Help project benefited from it

In this section, we will provide examples of participants' feedback on the project's assistance in their professional activities and personal experience of the war. The team collected information by using the feedback forms filled out by participants after the training, supervision groups, practice reflection groups and mutual assistance groups in confidence, as well as from a survey among participants who described their work with cases from their practice, so some of the quoted feedback may not have the authors listed.

In total, we received

295

feedbacks on the training results (participants could provide feedback on one or more training sessions they participated in),

34

feedbacks on the results of supervision groups, practice reflection groups and mutual assistance (participants could provide feedback on one or more events they participated in),

12

questionnaires with a detailed analysis of practical cases and conclusions about their practice during Russia's war against Ukraine (each participant filled in one questionnaire).

Based on the results of the training, the participants noted their attitudes towards the following theses:

	strongly agree	agree	neutral	disagree	strongly disagree
I improved my knowledge during training	171	97	9	11	8
I will use the knowledge gained to help my clients	186	80	11	11	7
I will use the knowledge gained to help myself	179	85	14	12	7
The event helped improve my psychological state	158	88	32	10	8
After the training, I feel more like a community of like-minded people	167	97	12	11	8

As we can see from the responses, the training activities were essential for the participants to improve their professional performance and work with their condition. The important thing is that, during the training, various exercises were conducted, different methods and techniques were demonstrated, and the participants could immediately feel the positive effect on themselves, which they confirmed in the feedback forms.

A critical point in the training, and later in other project activities, was the combination of participants from different professions and backgrounds, which also became a significant resource for them.

Here are some quotes from participants who commented on their responses to the survey:

“I was very impressed with the style of presentation. I took many interesting aspects into my working arsenal. I particularly appreciated the online rooms, where we could discuss painful and relevant topics. I am also grateful for the practical tools ⁵.”

“I felt that I was not the only one experiencing similar emotions; we shared knowledge of who gets resources to improve their condition and where. I felt the importance of speaking out, I was listened to, and Natalia supported me. It gave me the strength to continue working.”

“I am very grateful for the opportunity to replenish my knowledge to provide psychological aid, the excellent event organisation, at a high level, comfortable, thank you.”

“I immediately tried the practical exercises and questionnaires and told my friend, a psychologist, too.”

“I wrote that I fully agree with the theses written, my knowledge expanded, I met interesting people, I have the opportunity to communicate with them in the future, I saw that I am not alone in facing the problem and through communication, I heard how to help myself, how to find resources for recovery, and thus I can help myself and my clients.”

“Thank you so much for what you are doing! It is an urgent need now!”

“The topics discussed are very relevant now; the accumulated psychological burden of psychologists and psychotherapists who provide professional support to those in need during the war is very high; not to burn out, you need to take care of yourself and your condition.”

5 Hereinafter, the quotations are subject to literary editing, unless otherwise noted.

“The training was useful for me because it once again confirmed that we have a community of helping professionals to whom we can turn for professional, supervisory support, with whom we can share our best practices and thus enrich each other’s capabilities in helping people cope with the challenges of today.”

“I found the training interesting and useful. The programme and delivery of the training were well-thought-out. I was glad to meet interesting and highly professional participants. I received additional tools for working with clients and self-help.”

“Thanks to the offline training, I received a resource, recovered, and gained useful knowledge for my professional and personal growth. I realised the importance of caring for myself to be useful to those seeking psychological help.”

“I am grateful for the invitation to this training, as it was an opportunity to exchange experience with colleague lawyers, to acquire new knowledge and skills from psychologists, doctors, and others, and to work with trainers. I realised that I need to replenish my resources first to provide effective legal aid to those seeking it.”

“Offline communication with qualified colleagues and experts in the field is a significant opportunity to share experiences, knowledge, values and ideas. It’s not only about understanding the complexity of organising and providing psychological and psychosocial support and updating your tools and knowledge in this context but also about identifying interesting cases or scenarios from real practice and further reflection, such as “What could I have done differently?” or “I’ll do it differently,” or “I choose myself – it is the best way.” I gained valuable knowledge and insights. Once again, I realised that we need to be proactive at work and build the foundation of psychological health through a culture of self-care and timely access to specialists without stigma, stereotypes or prejudice. I am grateful to the organisers and experts!”

“I came to the training exhausted and tired, after three weeks without days off, and I am very grateful because these two days were incredible, I left the training filled and inspired.”

“Since I have been working as a psychologist for only 1.5 months, I do not have a psychologist’s degree, so I find it hard to work with the people served in our centre. I regret that I missed the opportunity to attend such training before, as I was on maternity leave. So now I am trying to gain knowledge of psychology through various courses and training. It is very interesting to listen to experienced psychologists. Practical exercises helped me, first of all, relieve some tension, as I have experienced severe stress three times since 2014, and at this training, I saw and felt how to reduce such tension. Thank you!”

“Supporting and setting up yourself and your team (collective), clients are important for obtaining a quality result when providing legal services and teaching.”

“I will emphasise to social workers the importance of timely referral of people suffering from mental disorders to specialists; I will tell them about the project to support such people by the community (our social workers have a specialisation in International Social Projects and Volunteering).”

“I really liked the training and found it useful. I am now working with wounded soldiers who receive treatment in our hospital, so I will use the knowledge gained when working with them. The training gave me an understanding of the best techniques to use with traumatised people.”

“At the training, I learnt about new techniques to recover and relieve stress and techniques to prevent burnout. I will use the information received on the first day of the training in my activities related to restorative justice and mediation.”

“During the training, I received even more significant information on communication with victims in criminal proceedings.”

“The format of the meetings is excellent; it is possible to get both theoretical and purely practical information.”

“The self-help skills I learned at the training help me work with clients. The support of the community is a great resource.”

“I am delighted with the training! Thank you for your work.”

“I have greatly improved my professional level in the area of law. In addition, the training activities affected me internally. Therefore, I decided to enter the speciality “053” (Psychology) at the Lviv State University of Internal Affairs and improve my level in the future professional activity of a psychologist. I definitely think that psychology and law are at the intersection.”

According to the results of supervision groups, practice reflection groups and mutual assistance groups, the participants noted their attitudes towards the following theses:

	strongly agree	agree	neutral	disagree	strongly disagree
I improved my knowledge during training	24	9	0	0	1
I will use the knowledge gained to help my clients	23	10	0	0	1
I will use the knowledge gained to help myself	13	7	9	4	2
The event helped improve my psychological state	22	8	3	0	1
After the training, I feel more like a community of like-minded people	21	11	1	0	1

Here are some comments on the responses described above.

“I liked that the organisers took the approach to working with clients into account, that everyone could freely express their opinions, that there was support and explanations from the supervisor. I leave not only with answers to my question (since I presented a case for discussion) but also with an understanding of where to move in my work with a client if I suddenly feel like I’ve reached a “dead end,” what to keep in mind when working with different types of trauma, what resources I can additionally involve in my work, why it is so important to conduct psychoeducational work.”

“The experience of supervision is new for me. Thank you very much for the qualified meeting.”

“The most interesting thing was the discussion of cases, the expression of our ideas, the disclosure of the inner state of the supervision participants, the atmosphere of closeness and unity. I’ve had enough of everything.”

“Interesting (but hard for clients) cases. The group reacted professionally during the supervision process. I’d like to continue this type of work.”

“The discussion of the case I presented was interesting, and most importantly, it allowed me to understand how to continue working. I received a lot of useful advice and ideas from my colleagues participating in the discussion. It will help me further work on the project and ensure its successful implementation. I am very grateful to everyone for their active participation and support, and I look forward to the next meeting with the team.”

“It was interesting to hear both the legal and psychological perspectives on the case presented.”

“I really enjoyed the format of combining two different professional areas during an event with a small number of participants.”

“I would be happy to participate in further supervision.”

We also invited the participants who provided information about working with cases from their practice to share how participation in the Helping Those Who Help project helped their practice in general and how it helped them personally.

“I have the opportunity to practice techniques that are of practical importance.” – *Tetiana Holovan, head of the Department of State Legal Sciences, Criminal Law and Process at H.S. Skovoroda Kharkiv National Pedagogical University, Alliance Fortes Attorneys at Law.*

“Participation in the Helping Those Who Help project means new effective knowledge and skills, others’ experience, and confirmation that you are working in the right direction. This project is also valuable for me personally. It is support and help for myself because I am an IDP and a military wife.” – *Natalia Otroshchenko, Associate Professor of the Department of Social Pedagogy at Luhansk Taras Shevchenko National University, member of the RIZNIRIVNI NGO.*

“The knowledge and skills gained have helped me improve the provision of legal aid. Participation in the Helping Those Who Help project enabled us to assess the professional risks lawyers may face.” – *Alla Voytyna, chief specialist, lawyer of the Legal Aid and Expertise Division of the Legal Department of Lutsk City Council.*

“First and foremost, it was really helpful for me – getting to know the current trends and directions of resilience development, working through traumatic experiences, emotional stabilisation and recovery, understanding the state of development of psychiatric care in our country, feeling part of a circle of experts who are doing an important job. As a lecturer who participates in training future social workers, I share my experience with students and speak about the significance of creating professional support networks, communication and connections with colleagues in the region and the whole country. Participation in the project gave me professional confidence and a sense of a supportive community. I got answers to my inquiries as part of the supervision group and received new tools for resource recovery for work with clients and personal recovery. After participating in this project, I am more confident in participating in programmes initiated by NGOs as a trainer of group activities.” – *Maryna Syvets, a counselling psychologist, family psychologist, teacher of professional disciplines in the speciality of Social Work at Konotop Industrial Pedagogical Professional College of Sumy State University.*

“I have received an oxygen mask here, gained knowledge from the experience of other colleagues, and the advice is meaningful and relevant. The mentors, organisers, and project participants were great. I am in the zone again.” – *Viktoriia Bulantseva, practical psychologist at Krysky Gymnasium of the Ponornytsia Village Council of the Novhorod-Siverskyi Raion, Chernihiv oblast.*

“Thanks to this project, I felt more confident in my abilities, and communication with colleagues reassured me that I could always get their support. The understanding and support from the organisers and trainers were invaluable. I am grateful for this opportunity to learn and develop with people as interested and helpful as I am.

“New knowledge and techniques I now apply in my work, and most importantly, I know for sure now that I am on the right path to helping people. Also, I am always open to new learning and constantly improve my skills to provide the best aid to my clients. I believe that constant development and learning is the key to success in any area, so I always try to keep up to date with the latest trends and methods of work.” – *Vladlena Petryk, nutritionist, psychosomatologist, FoodLIFE Centre for Nutrition and Health Normalisation, volunteer psychologist, Oberig NGO.*

“Participation in the project allowed me to communicate with colleagues from different parts of Ukraine and learn from the experience of speakers and colleagues. The training and supervisory sessions, where they showed me how to work with clients using examples, were of great use. I learnt to help myself first and foremost, and then clients. After all, a psychologist must have special resilience to listen to clients, help them overcome all the difficulties and not fall together with them. That’s just what I learnt by participating in your project. Before, I did not know how to do this and took every case that service recipients came to me with too personally.” – *Yuliia Kurylo, psychologist at the municipal non-profit enterprise Trostianets City Hospital of Trostianets City Council, Sumy Oblast.*

“I have repeatedly given examples with maps and referred me to a psychiatrist. These are new acquaintances and opportunities to seek help. In the beginning, I took the Basic PH test, which inspired me to share it with others.” – *Ihor Kotsiuba, social worker, psychologist at the all-Ukrainian Charity Organisation Convictus Ukraine.*

“Filling the suitcase with tools and developing my one. It became a supportive and inspiring stage.” – *Anastasiia Bilinska, psychologist, art therapist, writer.*

“I would like to mention a crucial point for me. Over the past four years, I have been giving consultations at the Faculty of Sociology and Law on social work in the context of social instability and armed conflict. I had to cover difficult topics for an unprepared audience. After 24 February 2022, it became much harder, and the workload increased tremendously. The quality of mobile communication and access for female and male students was also hampered. We had to move from worldview philosophical conversations to clear instructions and warnings for what not to do. The harshness, clarity and speed of responses at these consultations led to my voice becoming too loud, shouty, commanding... I only paid attention to this after Iryna Ratske-Rybak’s speech. It is clear that young people traumatised by war now need completely different formats of counselling, and I need to work with my voice. The way I conduct a conversation, in particular, the soft, calm and sincere voice of Iryna Ratske-Rybak, has become a model for me.” – *Yuliia Strebkova, Associate Professor in Philosophy, National Technical University of Ukraine “Igor Sikorsky Kyiv Polytechnic Institute,” Faculty of Sociology and Law.*

The participant also gave an example of the application of the methods and experience gained within the framework of the Helping Those Who Help project in the educational process and described proposals for the further development of these developments.

Yuliia Strebkova described how participation in the Helping Those Who Help project can contribute to training social workers:

“Our Department of Philosophy of Igor Sikorsky Kyiv Polytechnic Institute is a graduating department for the Social Work speciality under the International Projects and Volunteering educational programme. After 24 February 2022, our senior students are already at the forefront of psychosocial aid. So, as a lecturer, participation in the Helping Those Who Help project was of great value to me.

I will describe the situations in which participation in the project helped me:

1. Working with maps in the See Far CBT model inspired me to use metaphorical associative cards (MAC) and apply them to gender education. I have been lecturing for many years, and I see how the traditional teaching formats of the twentieth-century classical university are losing their relevance. At the same time, it used to be out of the question for a university professor to bring any maps to the classroom. Except for geographical ones!). When I first started talking about using MAC, the management concluded that this methodology still contains a moment of “guessing,” namely the layout of cards and interpretation, and in general, it “contradicts the Christian worldview of our people.”

In recent years, the need to visualise and apply interactive game methods in the learning process has become more acute, which relates to school education reform in some way but primarily to distance learning. The online training sessions happened at the right time: before the start of the new school year. The popularity of MAC is now undeniable, and they are considered almost a universal tool in the work of a psychologist. However, gender studies specialists were cautious about approaches designed to “revive the feminine in women” in the sense of submission, subordination and learned helplessness. In addition, the interpretation of MAC images often came along with rabid sexism and misogyny of clients, which can be complicated to deal with without a gender lens.

After receiving practical training from Mark Sherman, I developed a training course using the MAC of The Women’s Trajectory. It aims to

identify and overcome gender stereotypes. The training is designed online and offline for a youth audience of 5 to 20 people. The training has already become part of the Winter School for Democracy of the Faculty of Sociology and Law of the Igor Sikorsky Kyiv Polytechnic Institute⁶.

In my opinion, the use of MCA to achieve gender equality goals can be rather promising. According to classical methods, our students used MAC to help clients, working on preventing and combating domestic violence.

In addition, I offered the third-year students of the Social Work programme tasks to develop training with the possibility of using MAC, both for presentations in class and for the final paper on Gender Studies. The best-developed topics were Political Leadership, Gender Socialisation, and Combating Domestic Violence. The important thing is that female students mostly used the Family deck from free resources. Two of them used GPT Chat to build the training. Also, I suppose we can recommend using the MAC for writing the practical section of bachelor's and master's theses in social work.

2. The Helping Those Who Help project was very timely from various perspectives. For me, time is of the utmost importance. Perhaps it is a professional deformation of philosophers! In the second part of the online training series “Adapting to New Conditions. Accelerated Recovery and Accelerated Change,” there was a moment when it was necessary to postpone the training. It is worth noting that the audience was very challenging. The argumentation, rhetoric and defence of their positions by the participants of the training and lectures were curious. The moderator did an excellent job. This incident also inspired me to educational creativity.

Before the full-scale invasion, I developed and taught my course for social workers – Social Work in Emergencies and Social Instability⁷.

6 More details at <https://fsp.kpi.ua/ua/>

7 More details at https://www.instagram.com/p/CueaeldNsyr/?igshid=MzRIODBiNWFIZA%3D%3D&img_index=%201

We worked out the issue of evacuation, especially at the end of 2021. I have now developed and added a situational exercise “Postponed Evacuation Time” to the elective course curriculum. I partially borrowed the scenario and roles of this case study from the case of postponing the class date within the training programme of the Helping Those Who Help project.”

3. PSYCHOLOGICAL AND LEGAL AID IN A FULL-SCALE WAR

Natalia Pidkaliuk

3.1. Is there a limit to mental endurance in war? How can you help yourself when helping others?



War causes crises in various aspects of everyday life, and we, as social beings, cannot stand aside. It does not depend on whether we are in the midst of events physically or emotionally, listening to people's stories, reading criminal cases, or just knowing that our country is at war. Inseparable from the profession, where we have knowledge, instructions, rules on how to act, we remain human beings with our own emotions and experiences. I often hear from people who come to me now: "Is it normal to feel the way I feel, or do I need professional help?" Therefore, the capacity to understand where the limit of endurance is and where it is already a condition that requires support and guidance from a specialist is a good tool in my work. An equally important part of the work is the personality of the specialist. In times of war, many professions have become involved in shocking events that cannot but affect our psyche.

Help and support from the outside, from the international community, has been a stabilising factor since the first days of the full-scale invasion. The interest in the "Helping Those Who Help" project and the large number of people who registered indicates that it was

timely and necessary. Uncertainty, chaos, shock – this is what the first months after the full-scale invasion looked like. At first glance, functioning in the context of adrenaline reactions, a person may think that he or she is doing well in such conditions. Many people are familiar with the state when you do not seem tired: you can stay awake at night but continue to function during the day. When everything you do seems insufficient because the country is at war, and you need to work harder and harder. It was the first phase, and it may have allowed us to survive as a country and as a people, but it also took a lot of strength and lives.

The next natural stage is exhaustion, which happened to everyone in their own time, but it was around this time that the Helping Those Who Help project appeared. You needed to find space and place for your emotional part, which has no place in your work. Irrespective of whether you are a lawyer or a psychologist when you listen to traumatic stories from your clients, you are still primarily a specialist whose obligation is to support the person who has sought advice. Thus, it is essential to have such support for yourself, which is the pivotal idea of the project. The programme combines theory with practice, get to know and remember your own resources, and have the opportunity to attend supervision sessions, review cases, and improve the use of acquired skills.

Traumatic experiences always leave a mark, and our life experiences impact the functioning of our brains. Everything we do and how we interact with the outside world is the outcome of how our neurons interact with each other and how safe and secure the environment that surrounds us from birth is. The establishment of healthy attachments in childhood determines the development of further relationships in life. Therefore, the family and the community are places where our journey begins and where we once will return for resources. The formation of community-based mental health services can be the foundation of recovery for Ukrainians. Everyone has had different experiences, some of them being forced

to leave their homes because of the war, some of them being welcomed into their own homes or communities, and some of them returning home after the displacement. For most of them, depending on establishing this new way of communicating and interacting, it became possible to adapt and function with this new experience. The project's work has also become a kind of slice of society. The map we created at the end showed how diverse our community of helpers was, representing various parts of Ukraine and the world, various professional communities, and various people. But this network we created during the project is also an inspiring example of how to shape a supportive community.

One of the first blocks was the part on cross-sectoral interaction. Any person or their problem should always be seen from different angles. It is impossible to cure depression if the reason is the lack of work and housing. Or vice versa, it is impossible to be effective at work while suffering from severe depression. That is why the contacts that specialists have shared, the opportunity to hear and discuss the recovery-oriented approach to the treatment of mental disorders, can also help those who help. "However, it is important to remember that recovery is not synonymous with cure. Recovery refers to both internal conditions experienced by persons who describe themselves as being in recovery--hope, healing, empowerment, and connection--and external conditions that facilitate recovery--implementation of the principle of human rights, a positive culture of healing, and recovery-oriented services." (Jacobson and Greenley).

At first glance, psychiatry does not seem to be related to the word 'recovery', but in fact, mental health is also a bio-psycho-social model. Therefore, according to the WHO definition, it implies not only the absence of mental disorders but also a sense of complete well-being. Everything that Ukrainians have to go through in the context of war is not a common experience for our brains, and it is natural that over time, symptoms of excessive stress may appear in

the form of specific symptoms of stress disorders or even the disorders themselves. Therefore, it is significant for professionals, especially now, to explain to the person who comes to them or sometimes to themselves whether this is normal, what I am feeling now or whether it is time to get the support of a mental health professional to cope with what they have to endure. The basic knowledge in the field of mental disorders and screening methods provided will be a helpful addition to the tools for various professions.

For me personally, the experience of interacting with such seemingly different specialists – lawyers and psychologists, became quite intriguing. And how similar the cases they deal with are. After all, people going through traumatic experiences often need legal and psychological support at the same time. However, while mental health professionals know personal experiences, their reflection, experience in their own therapy and participation in supervision, legal professionals have less or no such experience. Therefore, as the project has shown, the opportunity provided is unusual but timely for lawyers. It is something that may continue because by taking care of professionals, you can have an indirect impact on a much larger scale and all those addressing them. They will be able to use stabilisation and self-help techniques both for themselves and their clients. Legal professionals should be guided by facts and laws rather than emotions to be effective in their work. However, it does not exclude an emotional response that sometimes lasts longer than the duration of the case. Supervisions became a format where one can share such emotions, although this format was unfamiliar.

Another pivotal stage of the project was the face-to-face meeting in Kyiv. The online format provides opportunities where they would not have been but also limits human interaction. It was not only about learning but also about establishing further cross-sectoral cooperation, the chance to communicate during breaks and merely reboot, thanks to the excellent organisation of the process.

The project was designed to become a place where, in a circle of people with different experiences, you could take a little glimpse into your emotions so that you could continue to do your job, remembering that endurance depends on how we know how to take care of ourselves while helping others. We will bring all the knowledge we learn from each other to our clients, to our communities, to our families. And this is what can help us endure. The war is ultimately not over, and we all continue to be specialists in the face of ongoing trauma. As global experience in mental health shows, the best way to prevent the development of severe stress disorders is psychoeducation, training in self-help techniques in communities, and a recovery approach to working with clients. There are no specialists for everyone, and everyone does not need them. But knowledge about oneself, how to regulate one's emotions, when to stop and reboot, and what matches this will always be relevant. This project, perhaps, will be just one of the stages of support and will be able to develop further as one of the elements of building stress resistance among Ukrainian professionals.

Ruslana Rudenko

3.2. Psychotherapy in turbulent times: working with children, adolescents, and their families during the war



Psychotherapeutic framework

With the beginning of the full-scale invasion on 24.02.22, the psychotherapy framework changed significantly, and after the first months, we entered a different, new rhythm of work. However, in the autumn and winter of 2022-2023, we experienced new shocks when the Russians continuously shelled Ukraine, trying to destroy its energy system, and regular power and mobile phone outages exhausted us. During that period, all the constants of psychoanalytic sessions – a stable place, fixed time, payment, and even psychoanalytic neutrality – have undergone significant changes. I did not stop working for a single day, and from 24 February 2022, I remained in almost constant contact with child patients and their families. Especially in the first 2-3 months of the full-scale Russia's invasion of Ukraine.

In the first three days after the invasion, when everyone was in shock, I would write and ask my patients' teenagers or parents directly if they were safe and assure them that I was safe, too. By writing to my patients, I wanted to maintain the sustainability of our relationship and attachment. I could remain a secure base for many of them when things around them became dangerous. In addition, I wanted to preserve our therapeutic space and minimise interruptions to the therapeutic process. This form of sustainability

appeared as the only axis of psychoanalytic networking I could offer my child and adolescent patients in those days.

In the following weeks and months, my colleagues and I supported each other more intensively than usual in intervision groups and discussed our emotional state. Together, we shared fantasies and tried to symbolise our experience of working during the hot phase of the war. One of the most iconic images of the war was a blown-up apartment building in Borodianka (a town near Kyiv where Russian troops committed numerous atrocities), where an intact ceramic jug in the shape of an iconic Ukrainian rooster stood in someone's ruined kitchen cupboard. This jug survived just as we did, preserving the meaning, images, associations and passions that our patients, adults and children, entrusted us in those days.

In the first war months, when some of my patients were late for a session, waiting for any amount of time for them to come in person or join online became unbearable, even if it was only 15 minutes. I could barely wait five minutes before texting or calling them because anything could happen to them. In the autumn of 2022, the total power outage and the absence of even mobile phone service triggered the same reactions of uncertainty, anxiety and disorientation. The blackout and the resulting lack of access to basic resources forced Ukrainian children and adults to relive the same horrific psychological states as at the beginning of Russia's full-scale invasion of Ukraine. During the cold and dark days in late 2022, I often had to invent various ways to warn my patients when I lost electricity and even mobile phone service. I periodically had to go out to the street intersection searching for a mobile connection to text via any available network at least. Honestly, when thinking back to those days, it is hard to rationalise what we all went through; I wonder how we survived. Often, we were unable to conduct our therapeutic practice or even communicate with our patients. While still having access to the Internet and a more or less stable place to socialise in the first months of the war, we lost even that as a result of Russian

missile attacks in the autumn of 2022. Both the analysts and our patients communicated from wherever we were: from bomb shelters, different buildings, rooms, corridors, or even different corners of the same room. Analysts and our patients met on the phone while we were sitting on balconies, park benches, swings in the garden, or cars. We tried to use Zoom, of course, like during COVID-19, but due to the unreliability of the network and electricity in those days, we saw only our Zoom avatars on the screens. I sometimes conducted sessions with my teenage patients via texting.

Payment issue

The system of payment for therapy services changed or even disappeared during the first weeks of the war, as many people lost everything they had and could no longer pay. As the parents of some of my patients had jobs outside the country (e.g. online work), part of my income as an analyst remained stable. However, I decided to continue my therapeutic work regardless of my patients' ability to pay. I also received similar support: my analyst suggested that I should not pay for my analysis (three times a week) or pay as much as I could now, and my supervisor offered the same.

Later, I learned that most of my psychoanalyst colleagues made such changes in payment, including working for free. We all seemed to make these decisions spontaneously, without any discussion or encouragement from our professional groups.

Along with many other analysts, I also wrote to my patients who had gone to serve in the army. Although the war against Ukraine began in 2014, the full-scale invasion created a very different and more dangerous environment for the Ukrainian military, who fought against the invasion, occupation and destruction of an entire country. Like other analysts, I proposed to create a free schedule and pro bono structure with my military patients. With them, as well as with my child and adolescent patients, I wanted to maintain a strong connection and a safe therapeutic space that they could rely on during these

difficult times. It was hard to conduct regular sessions with people on the front line. Instead, I would receive messages describing a dream or nightmare and photos of flowers or snow. I was relieved when I received only a 4.5.0 code, which means “everything is fine.” I would note that none of my Ukrainian military patients agreed to work without payment. I had to argue with several ones to cut our fees in half. One of my psychoanalyst colleagues pointed out Freud’s suggestion that payment honours people’s commitment to psychoanalytic work and that military personnel may also feel castrated when a therapist refuses to charge them.

Although the parents of many of my patients (children and adolescents) could no longer afford any payment for therapy, I continued to work with them anyway. We started seeking financial support from mental health foundations and organisations that offered to help with funding only in the summer of 2022. Nevertheless, like most Ukrainian analysts, I continued to do much volunteer work.

Other changes in the psychoanalytic setting

The principle of psychoanalytic neutrality also passed the test by the trials of war. I had to become much more open and directly caring because I noticed that therapeutic detachment causes considerable anxiety among patients and can be traumatic. As psychoanalysts, we had to directly answer patients’ questions about our life situations and conditions to reduce their high levels of anxiety. This transparency became particularly important with my adolescent patients. I kept in constant contact with both the teenagers and their parents. I met with them whenever possible and often just talked to them (including via texting) several times a week. Sometimes, our scheduled sessions lasted only 20 minutes or less. It was only after a few months that we were able to find a more stable session duration.

In the first months after the invasion, I focused on surviving and supporting the survival of my patients. When the initial shock of the war wore off, after about a month, my colleagues and I faced a new

wave of patients seeking therapy. Initially, I worked for free with these new patients who were in a poor psychological state. I noticed that for people in acute psychological distress, meetings of 20-30 minutes three to four times a week worked best. Of course, this was not psychoanalysis. It was work that required my skills in dealing with acute stress and trauma.

The content shared by people was also horrifying, regardless of their age. People described life-threatening experiences of fleeing the Russian-occupied territories. Many talked about fleeing with very young children. They fled under fire and in horrific circumstances. A mother of two girls shared that she was haunted by memories of meeting traffickers at the border.

I noticed that after four to six 30-minute crisis counselling sessions aimed at stabilising their psychological state, my patients felt better: they slept and functioned much more effectively. In addition, after affect stabilisation, many of these new adult patients expressed a desire to continue treatment, refocusing their request on improving their relationships or self-esteem. Their willingness to continue therapy under these conditions was surprising at times but also profoundly inspiring.

Psychoanalytic help for children and adolescents

I observed the most significant difference in my child patients. Of course, many children discussed their fears and experiences directly related to the war. However, for most children, the presence of war was indirect, as the focus of therapy was on phobias and nightmares that did not seem to be related to war. Undoubtedly, all these children had witnessed the war: they had all seen missiles flying over their towns or heard loud explosions. Thus, working with children implied working with their traumatised psyche, which displaced the unbearable and unimaginable realities of warfare into other forms of mental distress. For example, intrusive or phobic reactions to phenomena or objects that seemingly did not have to do with war.

In addition, in the first few months after the invasion, I saw a new group of patients appear in my practice (often online or by phone). These were Ukrainian teenagers aged 13-15 now living abroad in different countries. Many of them felt maladjusted to a new country. However, some of them reported several significant symptoms, including self-harm (usually cutting), various forms of severe eating disorders, social phobias, and severe homesickness. In my clinical experience, it was more difficult for adolescent girls than boys. By the time I started working with these adolescents, other doctors in the countries where they were refugees were already prescribing them medications (e.g. antidepressants, anxiolytics). But they were also recommended to work with a psychologist, preferably a Ukrainian one, due to the language barrier and cultural needs. It appears that Ukrainian adolescents were the most likely to manifest and express their trauma through a variety of significant distress symptoms and a full range of affects. As opposed to this, I observed that their parents often did not allow themselves to experience distress. Almost all of my new adolescent patients continued to work with me, even when they returned to Ukraine or moved to other regions, and I returned to practice in Odesa. Those of them who returned to Ukraine reported that their symptoms had significantly decreased, and they felt much happier, even if they had to deal with more missile attacks, endless air raid sirens or complete power outages.

In one of my cases, a Ukrainian girl in her late teens was diagnosed with social phobia when she and her family were refugees in Germany. When she returned to Ukraine six months later, she immediately applied and was accepted to college to study psychology. She said she made lots of new friends and started dating a boyfriend. I have seen similar things with my other adolescent patients. For instance, after coming to Ukraine, a girl in her early teens was happy to return to her old high school and reconnect with her old friends. During our sessions, I noticed she dyed her hair

in different colours every time. In this case, she was satisfying her adolescent needs for rebellion and identity. But her self-harming behaviour and eating disorders that she had reported when she was a refugee in Europe were now controlled or reduced. For example, the patient said that instead of cutting her hand, as she did when she was abroad with her family, she found a safer way to relieve anxiety after returning to Odesa, such as painting her hand with a red marker. I used to involve parents in supporting their children. For example, to help their teenager get a facial piercing in a beauty salon rather than somewhere in a friend's kitchen. I continue to be amazed by the ability of children and teenagers to return to their creativity and vitality once anxiety is under control.

Working with parents

In the first weeks of the war, in March 2022, I organised a support group for parents. Like during individual consultations with parents as part of my work with their children and adolescents, I normalised the experiences in this group. I also offered parents psycho-pedagogical information about trauma and developmental processes. Besides, I taught them how to manage their stress. Many parents came only once to hear answers to the most painful questions about their children's behaviour, development and emotional state during the war. Most parents were concerned about worsening relationships with their children and adolescents. They described a significant deterioration in their children's mental health, especially in the refugee situation, including more frequent manifestations of indifference, aggressive or addictive behaviour, poor academic performance, lack of friends and homesickness, eating disorders, phobias, depression, self-harm, suicidal thoughts and threats of suicide.

One of the most surprising concerns parents repeatedly expressed was their children's academic performance, even when families were on the move or did not have access to schools. Even in refugee

camps or amid air raid sirens and prolonged power outages, parents wanted something constant in their children's lives that they felt they could not provide. Moreover, they sought to maintain parental control over at least one part of their children's lives.

In my work, I have always normalised with parents all experiences, feelings and thoughts of their children, including theirs. I keep reminding them that war is not a state in which people will live their whole lives. I have never stopped emphasising that all children and adults regressed initially after the invasion, even those who did not come under direct fire. I keep repeating to everyone that their abnormal emotions and fears are understandable and expected as they have been living in abnormal circumstances for the past two years. I also always tell them that they and their children are entitled to all the intense and complex feelings of grief, loss, rage, fear and existential anxiety that war brings.

Put on your oxygen mask first, before...

Participation in the Helping Those Who Help project was a new and refreshing experience for me to communicate with different professionals, such as lawyers and psychologists, who, at first sight, may seem very different. However, the cases they work with can be very similar because people who are going through traumatic events often need psychological and legal support at the same time. While mental health professionals have in-depth knowledge of personal experiences, reflection, and therapy, lawyers may have less or no such experience. Therefore, the opportunity for cooperation provided by the project is not only interesting but also important for both psychologists and lawyers.

It was enlightening for psychologists and me to see the prospect of solving clients' problems in a different field. And for lawyers, it was significant to gain skills in dealing with strong feelings. Stabilisation and self-help techniques can be of considerable use to professionals and their clients. To be successful, lawyers need to be guided by

facts and laws, but this does not exclude an emotional response that can last for a long time. This project became a place where people with different backgrounds could safely face their emotions and continue working, remembering that resilience depends on caring for yourself and helping others. The knowledge gained can be helpful for clients, communities and families. It can help to maintain and even improve the quality of life in the face of prolonged stress. International experience shows that psychoeducation, self-help techniques and a recovery approach to working with clients can prevent the development of stress disorders. Therefore, self-understanding and the ability to regulate emotions will always be relevant in building the stress resistance of Ukrainian professionals.

Conclusions

We are all going through terrible times, where there is a lot of grief and death; we experience fear, hatred, despair, anger, and hope. But we continue to believe in Ukraine's victory, face the challenges of war with courage and preserve our humanity.

Liliia Oliynyk

3.3. Victim-centred approach in action: notes on the results of the Helping Those Who Help project



The Russian-Ukrainian war, which has been going on for eleven years now, puts new challenges on the agenda of our society, including those related to the general concepts of humanity and humanism, resilience and sustainability of individuals and the whole society. How can we preserve humanity when there is a war in the country, a lot of cruelty and division in the information space, and work is carried out under constant tension? How can we find resources to care for the client's physical and psychological safety but also for our own?

The challenges described above relate to various areas of life: personal and professional. Since the beginning of the war and particularly the large-scale invasion, the focus of attention of representatives of many professions has shifted to victims of the armed aggression of the Russian Federation. In this context, anyone and everyone who has suffered moral, material, or physical harm can be considered a victim in the broadest sense. Legislative norms currently define different categories of victims, including IDPs, people who have lost property as a result of Russian aggression, victims of war crimes, etc. About the latter category, we need to realise that war crimes committed by the Russian military on the territory of Ukraine are different in their objective nature and therefore, victims of these crimes may have different needs.

In this context, the victim is a primary subject of legal proceedings. Often, the focus of criminal proceedings was on the rights of the accused person, leaving out the victim, who was forced by criminal justice activities to return to their experiences time and again. The introduction and widespread use of the victim-centred approach in the Ukrainian public space began to be mentioned in the context of conflict-related sexual violence as the most brutal manifestation of war crimes committed by the Russian military on the territory of Ukraine, and later – concerning all victims of war crimes.

War has a direct impact on the crime rate, and it is not only an increase in the number of war crimes but also other violent crimes. Therefore, an approach focused directly on victims and their NEEDS is relevant to crimes of the above categories and generally – for the entire criminal justice paradigm.

In this context, it is crucially important to understand and think about specific measures and mechanisms that would contribute not only to the nominal declarative proclamation of the approach but also to its practical implementation at all stages of the criminal proceeding and beyond.

On 15 March 2023, the Committee of Ministers of the Council of Europe adopted recommendations to member States on the rights, services and support for victims of the crime of 15.03.2023, which, among other things, declared the need to carefully balance victim rights with the rights of those suspected or accused of having committed a crime, as well as with the need for the proper administration of justice, and understanding victims' needs and aiming to achieve a cultural change so that justice and support processes are designed and delivered in a manner that is sensitive to victims' needs, autonomy and agency.

One of the steps to implementing and developing a victim-centred approach in line with the above recommendations is a regulation on the selection and training of staff. In this regard, it is recommended

that due consideration be given to the training of both officials who may come into contact with victims (such as police, court officials, emergency services, etc.) and judges and prosecutors involved in relevant criminal proceedings, including to raise awareness of the needs of victims. Also, with due respect for the independence of the legal profession, member States should furthermore recommend that those responsible for the training of lawyers make available both general and specialist training to increase the awareness of lawyers of the needs of victims. The goal is to enable practitioners to recognise victims, to increase awareness of the needs of victims, and to enable them to deal with victims in an impartial, non-discriminatory, respectful and professional manner.

One of the minimum requirements in the context of general training, alongside the requirements to be aware of the negative effects of crime on victims and the effects of crime on a victim's attitudes and behaviour, including verbal behaviour, and to acquire the skills and knowledge required to assist or professionally interact with victims, is awareness of the risk of causing secondary victimisation and the skills to minimise this risk.

Therefore, such normative recommendations to Council of Europe member States and the lack of a holistic state approach to their implementation, although primarily a conscious attitude to one's professional activities and continuous improvement of competencies, including those required when working with victims of war and violent crimes, including a trauma-sensitive approach, became the motivation for participation in the Helping Those Who Help project.

The combination of theoretical and practical elements, activities aimed at representatives of various legal professions, on the one hand, and legal concepts and tools with psychological, organisational and managerial tools, on the other, resonated with the participants.

For example, the topic related to client interviewing included several levels of study: personal, theoretical, practical and reflective, and was part of a broader topic of the Building a Dialogue. As a result of the training, the participants understood their trigger points, the identification and further elaboration of which would allow them to work effectively with specific topics. They could draw up a roadmap both for the first meeting with a client and the preparation for an interview, including with victims of war crimes, with an understanding of the significance and interconnection of individual elements of the interviewing model developed. We paid particular attention to the needs of victims, impartial and non-discriminatory treatment, barrier-free attitude, and working with stereotypes and prejudices.

A separate key element was the topic of informed consent of the victim or survivor, based on the principle of autonomy, ethical respect for human autonomy and the right to free expression of will, understanding of all aspects and stages of the subsequent processes, understanding of the information provided, voluntariness and giving voluntary consent without coercion, and embodies the idea that a person should be free to choose their action plan for themselves.

The fundamental principle on which the concept of informed consent is based is the principle of autonomy, where autonomy means the ability of the victim to make their own decisions. Respect for autonomy requires recognising the right of an individual to make independent choices and take actions based on their values and beliefs.

Effectively, the understanding of autonomy applies to representatives of the legal profession who work with victims of war crimes, gender-based crimes, or generally – extrapolating to the conscious choice of their areas of activity and responsibility for it.

The approach that became the basis for the project's implementation in terms of supporting legal professionals can be described as a combination and reinforcement. It means activities aimed at

providing participants with conceptual knowledge and practical tools in their work, communication, and building relationships with victims who become clients, as well as skills and tools that would help legal professionals take care of their own safety and build psychological resilience and boundaries. At the request of the participants, the project organised intervention meetings where everyone could find support in addressing their needs on a peer-to-peer basis.

They say that in the face of ongoing stress or turbulence, which is accelerating every moment, we gain resilience and the ability to overcome the challenges of today, including (and perhaps primarily) those related to professional activities. At the same time, the support of colleagues and the availability of a safe platform for finding answers and sharing experiences are of particular importance and value and contribute to professional growth, which leads to better and more effective assistance to those we work with.

Dr. Joshua Kreimeyer

3.4. Self-care is necessary to ensure the capacity to care for others



Many people outside of Ukraine became aware of the current status of “war” inside this sovereign country only after the invasion of Russian troops in February of 2022. The people of Ukraine know that outside of a long history of oppression and occupation, the most recent initiation of war started in 2014, around the time of the Russian occupation of Crimea and other areas inside Ukraine’s borders and the events that occurred on the Maidan. Shortly after the atrocities of the Maidan, this author, a former Russian Linguist in the US Army, started his PhD. As he prayed for a sign to confirm this path, he immediately had it in the form of a Ukrainian Professor, Olha Zaporozhets. Local churches, desperate for training to help lay workers more effectively manage the impact of the developing war, reached Dr Zaporozhets. At the time, Dr-to-be Kreimeyer received his sign and could be integrated into trips to Ukraine to help build what would become the charter accredited Counseling program in trauma therapy in Ukraine. The Institute for Training and its connected community-serving mental health clinic are collectively called “Open Doors”⁸.

From the foundation of Open Doors, the US-based team, in collaboration with Ukrainian colleagues, has continued to build the established and ratified ethical code for mental health, working on standards of practice before the invasion. The most current level of planning

⁸ Detailed information can be found at the link: <https://odukraine.com/>

includes land purchased and blueprints drawn for a national PTSD center⁹. Since 2019, Dr Kreimeyer has been an International Expert with the UN International Office for Migration. Through all of these efforts and numerous trips, several things have become apparent:

1. All Ukrainians have been impacted by this war, not just those on the front lines.
2. Two years after the invasion, the light behind “Volya” (Will) is still present but has recently dimmed a little.
3. Helpers, from lay workers in a church and NGOs to professionals such as social workers and psychologists, are not immune from either the personal or professional impact of bearing witness to the atrocities of war.

Because of these insights, Dr. Kreimeyer has focused most of his efforts recently on advocating for treating those who help. Current proposals are submitted to provide 4-day restorative retreats to help those who help others. Those who help others often consider self-care selfish, and this is directly challenged by stating that it is not only far from being selfish but is absolutely necessary to ensure that the capacity to care for others endures despite the ongoing war. It is and will remain Dr. Kreimeyer’s primary focus for the immediate future of his clinical work in Ukraine.

The only other experts in the field of effectively mitigating the impact of ongoing war had been the mental health forces of Israel. However, as the war in Ukraine continues, it becomes clear that the world will not only owe a debt to the armed forces of Ukraine for repelling the evil encroaching upon the Western world but also gratitude for the litany of lessons learned in how to effectively meet, manage and heal the hallmark injuries of war, such as PTSD and TBI, while a war rages on. These lessons can only be garnered (learned) and passed on if helpers prioritize, and not avoid, helping themselves.

9 Detailed information can be found at the link: <https://uit.org.ua/>

3.5. Generalised observations of the participants of the Helping Those Who Help project

With Russia's war against Ukraine, professionals providing psychological and legal aid have faced new challenges related to psychological conditions, working with clients and their well-being. The issue gained a new scale and scope after 24 February 2022 with the outbreak of full-scale war, which had already gone through several stages at the time of this publication.

Twelve psychologists, teachers, social workers, and lawyers who have completed training events, supervision groups, practice reflection groups and mutual assistance groups of the Helping Those Who Help project shared their practical cases, work with them, observations from practice on trends in working with clients after the outbreak of full-scale war and what is new compared to previous periods.

It is more common in clients/patients:

- depression, with more frequent occurrence of a deeper depression;
- eating disorders;
- panic attacks;
- anxiety;
- loss of vital energy;
- loss of meaning in life;
- military personnel diagnosed with OCD, GAD or PTSD;
- children's speech and language disorders;
- problems with parent-child relationship;
- uncertain loss issues¹⁰.

¹⁰ Cases related to the recognition of family members as missing in action.

The experts also noted the following features:

- Immediately after the start of the full-scale invasion, the number of men seeking psychological aid and counselling increased. The situation levelled off again in the second half of 2023, and the number of men's requests decreased.
- In working with military personnel, it is more often necessary to combine the work of a psychologist and a psychiatrist, as the number of cases of OCD, GAD or PTSD has increased. However, such interaction between specialists is often in demand in other cases, in particular when working with civilians, for example, who are diagnosed with depression.
- Cases of younger girls and women (18-20 years old) suffering from severe depression and clinically expressed anxiety have become more frequent.
- There is a very high desire to avoid talking about traumatic experiences during the war, which affects the methods of working with such clients.
- First of all, people try to help themselves on their own rather than seek professional help. There is often resistance to receiving help from a psychologist, psychotherapist and/or other specialists. Nevertheless, once they seek help, the vast majority of them remain in therapy after a trial consultation or two.
- It is worth paying attention to the increase in cases of anorexia nervosa among boys, which is an extraordinary trend in the context of military events.
- It has become much more difficult for clients to cope with emotions and counteract stress.
- With Russia's full-scale invasion of Ukraine, a new category of clients has emerged – people forced to move abroad to escape the war and their family members who remained in Ukraine. People

have a very traumatic experience of leaving and separating from their families and have difficulty adapting to new conditions. Cases of divorce and related experiences have become more frequent.

Here are a few quotes from the answers to the question: could you please note what general trends among the clients in your practice you have observed after 24.02.2022 that are new compared to previous periods?

“I can note that immediately after the start of the full-scale invasion, the number of men seeking psychological help and counselling increased. The nature of the requests implies mainly support in decision-making situations and relationship problems. The situation levelled off again in the second half of 2023, and the number of men’s requests decreased. At the same time, the presence of fathers at family counselling sessions has increased compared to the period before 24.02.2022 in terms of interaction with children and solving parent-child problems.” – *Maryna Syvets, counselling psychologist, family psychologist, teacher of professional disciplines in the speciality of Social Work at Konotop Industrial and Pedagogical Specialist College of Sumy State University.*

“Eating disorders and deeper depression, more frequent panic attacks.” – *Viktoriia Bulantseva, a practical psychologist at Krysky Gymnasium of the Ponornytsia Village Council of the Novhorod-Siverskyi Raion, Chernihiv oblast.*

“For example, there has been an increase in binge eating in stressful situations, which leads to weight gain, and in refusing to eat when fear is triggered. It can have a serious impact on health, so it is important to find healthy ways to manage stress and seek support from loved ones or professionals.” – *Vladlena Petryk, nutritionist, psychosomatologist, FoodLIFE Centre for Nutrition and Health Normalisation, volunteer psychologist, Oberig NGO.*

“New requests for confirmation that you are a man but you can sometimes be weak and cry, that you do not have to be afraid of death, then you stay alive.” – *Natalia Otroshchenko, Associate Professor of the Department of Social Pedagogy at Luhansk Taras Shevchenko National University, member of the RIZNIRIVNI NGO.*

“People often come to us with depression, anxiety, and loss of meaning in life. There are cases when those who have travelled abroad suffer greatly from moving and separating from their families, and this leads to divorce.

A new aspect of our work is working with military personnel undergoing treatment after being wounded. Combatants are diagnosed with OCD, GAD or PTSD, and the work of a psychologist alone is not enough. Psychiatrists, neurologists, physical therapists, occupational therapists and other specialists get involved in rehabilitation. There are specific techniques for helping military personnel with PTSD that I use in my work.

It is disturbing to see very young girls and women (18-20 years old) suffering from severe depression and clinically pronounced anxiety. It is difficult to pull them out of this state; they often do not find the resources and strength to overcome their disorders on their own. Unfortunately, the help of psychiatrists and antidepressants is indispensable.” – *Yuliia Kurylo, psychologist at the municipal non-profit enterprise Trostianets City Hospital of Trostianets City Council, Sumy Oblast.*

3.6. Examples of cases caused by war events from the practice of participants of the Helping Those Who Help project

Title:	Surviving a divorce after forced evacuation abroad due to the events of the war
A specialist who provided aid and described the case:	<i>Maryna Syvets, a psychologist-consultant, family psychologist, teacher of professional disciplines of the speciality of Social Work at Konotop Industrial and Pedagogical Specialist College of Sumy State University.</i>

Case description:

A client came to me with a request to help her child cope with her divorce from her father. The woman said that after learning about the parents' separation, the child no longer wanted to communicate with him, saying: "You broke my heart" and refusing to make contact. I invited both parents and the child to the meeting. At the session, I found out that the woman needed the most emotional support at that time, while her child needed to hear that the emotions he was experiencing in this situation were normal, that he was in no way to blame for what had happened between his parents, and that the father was ready to continue to take an active part in the child's life, even though he and the child's mother would now live separately. The situation was aggravated by the fact that the man had decided to divorce her when they were at a distance (the woman and the child had lived separately for a long time, having gone abroad because of the war). Now, his ex-wife felt as if having no one close to her at home. Her ex-husband had been her support during their long relationship.

Aid provided: In my work with clients, I drew their attention to the fact that acceptance of the new reality (transformations in

relationships, returning home and re-adaptation to life in a country at war) occurs through definite stages: shock, denial, anger/guilt; bargaining; depression; acceptance. Together, we identified which of the stages each participant in the situation was currently at and how each manifested itself. I also emphasised the fact that the woman herself was now in the most vulnerable emotional state, which required the organisation of external support and that this could be the key to stabilising her emotional state and acceptance of the situation by her child. The woman refused to receive help (she did not have sufficient funds for it, and the proposal that her ex-husband would pay for her work with a psychologist seemed unacceptable to her). We decided that help and support would be provided to the child if her child's emotional state continued to be severe.

How participation in the Helping Those Who Help project helped with the case study described above:

I brought this case for supervision as part of the project, which helped me see other approaches to the situation. For me, the experience was of utmost importance, as the opinions expressed in the space of the supervision group reflected how I saw my own position in the situation more in the process of working with the client, paying less attention to how the client perceived the situation. During the supervision meeting, I discovered ways to work in similar cases when someone urgently needing help refuses to receive it. Another thing that helped me in my work was drawing up a map of specialists, where everyone left information about themselves and their contacts and areas of work, which helped me feel that I was not alone and that even if my resources were not enough for a particular case, I could turn to my colleagues for support.

As a result, I got in touch with the woman again, asked about her condition and the condition of her child, and learned that after the meeting and the realisation and mourning of the fact that she now

had to rely only on herself, the woman was able to rely on this inner support and began to build her life the way she wanted it, without adjusting to anyone, as she had done for a long time before. It turned out that talking about her problem, even through a request for her child and the thought that if she suddenly failed to cope on her own, she could still seek professional support (I told her that there were many charitable programmes and projects, whose representatives I met at the Helping Those Who Help project, where one could receive psychological aid for free) was enough to get her out of a severe emotional state.

Title: Adaptation to new conditions: anorexia nervosa, the story of a 13-year-old girl in the war

A specialist who provided aid and described the case: *Vladlena Petryk, nutritionist, psychosomatologist at the FoodLIFE Centre for Nutrition and Health Normalisation, volunteer psychologist at the Oberig NGO.*

Case description:

After the outbreak of hostilities, a 13-year-old girl, along with her mother and sister, was forced to leave her home and move to Poland. Her mother, trying to provide for the family, spent a lot of time at work, so the girls felt a lack of maternal attention. The girls felt frustrated being separated from their father, with whom they stayed in their home country. As a result of stress and insecurity, the girl began to refuse to eat, showed aversion to touch and even lost weight, reaching 44 kg with a height of 167 cm. In addition, she was constantly in a bad mood and prone to crying.

Now, we address the challenge of helping the girl to gain weight, improve her mood, regain her taste for life and pleasure in food, and adapt to new living conditions.

Aid provided: working with the client, I used my methodology, which combines diet selection with an online menu creator for a balanced diet. Every day, during consultations, we worked together with the client to create a menu for the next day, depending on her wishes. I used photos of dishes on the website to stimulate appetite and the desire to eat. In addition, I applied psychotherapy techniques such as cognitive behavioural therapy (CBT) and art therapy, in particular, painting a plate – drawing a cat to measure the portion and improve the mood while having meals. Drawing pictures captivated the client and helped improve her mood (imagining in which resource place we were having lunch today).

Additionally, I used calming techniques such as tapping, the Butterfly Hug, online MAC, and motivation for further life. There were moments when the client felt despair and refused to eat, which led to hospitalisation due to a deterioration in her physiological state. After hospitalisation, the work continued with a psychotherapist.

The client has now gradually started to gain weight, her enjoyment of food is returning, and her mood is improving. I plan to continue working with the client to improve her health and emotional well-being.

How participation in the Helping Those Who Help project helped with the case study described above:

Participation in the Helping Those Who Help project, including in supervision, helped me find support and advice from other project participants who also faced similar cases. I benefited much from the project because I had the opportunity to discuss my problems with people who understood me and could share their experiences.

Thanks to participation in the project, I increased my knowledge and skills in psychology and social work, which became an integral part of my work with the case described. I appreciated learning the method of working with MAC: now, in my work, it is a significant help and an opportunity to work with the client on their request.

In general, the Helping Those Who Help project appeared extremely useful for me in working with the case described above, as it provided me with the support, knowledge and skills I needed to resolve the problem successfully.

Thanks to the project, I felt more confident in my abilities and knew I could always get support from the project staff. Their understanding and support were of great significance to me. I am grateful for this opportunity to learn and develop with people as interested and helpful as I am.

Title: Supporting an active military commander in a state of severe exhaustion in combat

A specialist who provided aid and described the case: *Natalia Otroshchenko, Associate Professor of the Department of Social Pedagogy at Luhansk Taras Shevchenko National University, member of the RIZNIRIVNI NGO.*

Case description:

The client is a commander of a unit of the Armed Forces of Ukraine. He made the following request: he has been at war for a year and a half, tired, frightened, and desperate. He is responsible for his subordinates, not knowing whether he will withstand the battle and have enough strength, understanding of the situation, etc.

I saw the request in the fact that a serviceman, being constantly in terrible conditions, began to feel like an inferior person. He was overcome by fear of death, disbelief in whether they could defeat the enemy on the battlefield, etc.

Events preceding the incident: for five months in a row, he had been leading an assault unit without rotation. He is worn out and exhausted.

In the current period, he has to go on assault every three days, so the client's head is increasingly full of the words: "This time, I will definitely die."

Aid provided: I worked with the client online, using telephone communication and via Telegram. Above all, I was guided by intuition, feeling that the serviceman needed to be listened to (i.e., the active listening technique): he spoke for a long time, and I asked clarifying questions. I paid particular attention to the words I used (accurate, important, meaningful words for him). I felt I had to help him restore his faith in his strength, skills, and experience. Therefore, we recalled the pre-war time when he was an effective leader and asked him about his dreams (it helped him relax). Here, I used the BASIC Ph.

Then we worked on the here-and-now approach: we tried to joke. While communicating, we concluded that there was no choice but to return from the task alive every time!

I used instructions, requests, and recommendations. For example, “When you leave the task, write a short message: “alive.”

I managed to raise the client’s morale. There were tough battles, but he had a clear picture in his head – I can’t be defeated. That is why his subordinates also felt his support. We started using aromatherapy to improve physical and mental health. The smell of the aroma candle reminded the client of a peaceful life, unlike the smell of dampness in the field fortifications, and returning to these memories helped stabilise his emotional state. Later, it even became a tradition among the unit’s soldiers to discuss dreams of the future and memories of pleasant moments of peaceful life after completing a mission by lighting an aroma candle. Breathing techniques also proved to be effective.

The serviceman has passed his exams and is now studying to become a military psychologist. I provided him with literature to read in between tasks (he said it was a breath of fresh air).

How participation in the Helping Those Who Help project helped with the case study described above:

It helped a lot. My main professional activity is a lecturer with a lot of theoretical knowledge. When I joined the Helping Those Who Help project, I had a request to find out how to effectively provide individual psychological and social work to military personnel on a volunteer basis, as I had many requests.

Listening to the trainers, communicating with the participants who shared their experiences, and analysing my own, I understood and got convinced that I was on the right track. Participation in the project has replenished my knowledge and skills and given me confidence in being effective.

Title:	Surviving the loss of a son during the occupation
A specialist who provided aid and described the case:	<i>Yuliia Kurylo, psychologist at the municipal non-profit enterprise Trostianets City Hospital of Trostianets City Council, Sumy Oblast.</i>

Case description:

The client is a 61-year-old woman. A year and a half ago, she lost her son (killed by Russians during the occupation of the city). She has not gotten over the loss yet; she has depression, insomnia, anxiety, and panic attacks.

The goal is to help the client survive the loss, relying on her resources and life meanings.

Aid provided: we had six consultations with the client, each lasting an hour.

The initial conversation, as well as psychodiagnostic techniques, helped identify the client's mental state. She was diagnosed with moderate depression and subclinical anxiety.

At the beginning of the therapy, I offered the client self-help techniques such as Square (Box) Breathing to stop panic attacks and the 5-4-3-2-1 Grounding Technique to be in the here and now and distract from the trauma.

During the consultations, we gradually mastered new techniques: Conscious Drinking to distract from the negative emotions, the Butterfly Hug to perceive your body and emotions, and progressive muscle relaxation (PMR) technique to improve your condition and get a deeper sleep.

The Resource Bag technique helped the client find the meanings and resources she needed to rely on to survive the loss and move on. These are two grandchildren who lost their father, her talent for

cooking and caring for a flower garden, and helping the Army as she periodically goes to weave military nets. Tending to her son's grave is a vital resource for the mother, where she pays tribute to her son's memory.

Working thoroughly through the loss. We started this part of the psychological work in the third session when the client was at her best and learned self-help techniques after the psychologist and the client established trust and emotional contact.

Techniques I applied: Memories – looking at photos, telling stories from the life of the deceased and the family. The client could cry and express her emotions without hiding them. I was there to support her. If necessary, we returned to self-help techniques.

“A Letter to the Deceased” – the client agreed to write such a letter, expressing everything she would like to say to her son, telling how they live without him and what changed since he passed away. I suggested that she either tear up the letter or keep it and add whatever she wanted to. The client chose the second option. Later, she reread the letter to me.

At subsequent meetings, we looked at the photo of her son again and talked about him. We removed the guilt the mother felt. She told the psychologist about it during one of the consultations. The Pie exercise about guilt helped: we remembered and wrote down everyone (circumstances, people) who were to blame for her son's death. It turned out that the mother was not to blame or was very minimal. She could not have influenced the tragic events in any way.

We are still working with the client. She comes when she needs support. We had previously planned ten sessions.

The client's condition improved, and she became more focused and active. Her panic attacks have almost disappeared. She has learnt to live with her emotions and seeks the positive attributes in the world around her.

How participation in the Helping Those Who Help project helped with the case study described above:

I used the self-help techniques we mastered during the Helping Those Who Help project. It helped me a lot in supporting both the client and myself. I realised that without such support, therapy would not be complete.

Title: Cross-sectoral interaction of psychologists, social workers, and psychiatrists to help clients with suicidal thoughts

A specialist who provided aid and described the case: *Ihor Kotsiuba, social worker, psychologist at the all-Ukrainian Charity Organisation Convictus Ukraine.*

Case description:

The client sought help because of panic attacks, fears, and anxiety. All the recent events that took place due to the shelling of Kyiv were the reason for the appeal. The client moved with his family to Obukhiv district and currently lives there. He works in a bank (remotely/online), is very worried about receiving a summons from the Territorial Recruitment Centre (TRC) and, thus, becomes even more desperate.

Aid provided: I had to listen a lot and not even say much at the first session. I was alarmed by the fact that the client mentioned suicidal thoughts, and I remembered how Natalia Pidkaliuk emphasised in her presentations the need to refer such clients to a psychiatrist.

We did so, having talked through all the details, and the client addressed a specialist.

How participation in the Helping Those Who Help project helped with the case study described above:

These are a referral to a psychiatrist and techniques that really helped the client, including CBT, closely related to the SEE FAR SBT model and the Basic PH test.

Title: Work with uncertain loss: helping a mother whose son went missing

A specialist who provided aid and described the case: *Viktorii Bulantseva, practical psychologist at the Krysky Gymnasium of the Ponornytsia Village Council of the Novhorod-Siverskyi Raion, Chernihiv Oblast.*

Case description:

I was a shell-shock survivor myself and not quite in a position to provide such counselling, but it was necessary to start working with a client with an uncertain loss, as it had an impact on the state of other people. The client's son went missing during a combat mission. She has not heard from him for more than a year, and there is still no news about him. She began to suffer from psychosomatic illnesses, constant depression, crying every day, and inattention. She broke her arm because of her carelessness, quit her job for health reasons, divorced her husband and set up a whole memorial at home with photos of her missing son. Her other older son began to fear for his mother and how the house looked. He began to suffer from pneumonia very often, so as a colleague of mine, I took notice of that. After that, the client came to me for a consultation with a complaint about how hard it is for her and a question about how to live further.

Aid provided: I always listened to the client and was there for her. After the story, we did breathing exercises and grounding. Later, the client did mindfulness meditation or practised art therapy (drawing). However, she could not go through the grieving process in full because she knew nothing about her son. During the supervision as part of the Helping Those Who Help project, the participants said that it was worth paying attention to her life and her psychoeducation and inspiring her to live on in the illusion that nothing had happened and that her son was alive with faith in it, and it worked. It has taken a little time, but she has stabilised a bit,

comes to classes and lives a fulfilled life - she celebrated her birthday, went for a manicure and a hairdresser, cares for her grandson and elder son, etc.

How participation in the Helping Those Who Help project helped with the case study described above:

Participation in the project inspired me, and secondly, other project participants gave me a lot of recommendations from their experience and vision, which I later used in practice.

Title: Stabilisation of a client during investigative actions

A specialist who provided aid and described the case: *Tetiana Holovan, Head of the Department of State Legal Sciences, Criminal Law and Procedure at H.S. Skovoroda Kharkiv National Pedagogical University, Alliance Fortes Attorneys at Law.*

Case description:

When working with a client who is a victim in a case, I had to apply practical advice on stabilising her state (reduce anxiety). During the investigation, memories of past events provoked a panic attack in the client. After the client recovered, the investigative actions were resumed.

Aid provided: I used various methods to stop the panic attack: blowing up a balloon, the Butterfly Hug, focusing on the five senses, etc.

How participation in the Helping Those Who Help project helped with the case study described above:

I had the opportunity to apply the knowledge gained in practice.

Title:	Applying a victim-centred approach in a domestic violence case
A specialist who provided aid and described the case:	<i>Alla Voytyna, chief specialist, lawyer of the Legal Aid and Expertise Division of the Legal Department of Lutsk City Council.</i>
Case description, aid provided:	

In my practice, I was involved in a case related to domestic violence. The client, a victim of violence, asked me to provide her with legal support and protection. Immediately after receiving the information from the client, I remembered that during our training as part of the Helping Those Who Help project, we studied the victim-centred approach and the professional risks lawyers can face. Thanks to this knowledge, I created a secure and supportive environment during the interview with the client. I used the interviewing patterns I learnt during the training to get detailed information about her situation. Being aware of the professional risks, I emphasised confidentiality and privacy of the client's data. It created a foundation of trust that allowed us to work together effectively to develop a strategy to protect her and address legal issues related to domestic violence.

How participation in the Helping Those Who Help project helped with the case study described above:

Overall, the Helping Those Who Help project trained me in a comprehensive approach to working with victims.



