

Features of Self Assessments of the Quality of one's Own Life During the Pandemic and the Beginning of Missile Attacks on the Civilian Infrastructure of Ukraine

K.V. Kolyadenko*, O.E. Fedorenko

O.O.Bogomolets National Medical Universit, Kyiv, Ukraine

*Corresponding Author

K.V. Kolyadenko, O.O.Bogomolets National Medical Universit, Kyiv, Ukraine

Submitted: 29 Dec 2022; Accepted: 04 Jan 2023; Published: 29 Mar 2023

Citation: Kolyadenko, K. V., Fedorenko, O. E. (2023). Features of Self-Assessments of the Quality of one's Own Life During the Pandemic and the Beginning of Missile Attacks on the Civilian Infrastructure of Ukraine. *Dearma J Cosmetic Laser Therapy*, 2(1), 01-07.

Abstract

Even before the beginning of the military attack of the Russian Federation on Ukraine, the term VUCA appeared in the national information field, which concentrates the basic features of the modern life-being of the society of the 21st century: volatility (Volatility) - due to the urgent need to take into account numerous changing factors; uncertainty (Uncertainty) the real impossibility of predicting the main perspectives; Complexity lack of real understanding of the essence of many events; ambiguity (Ambignity) clear uncertainty of interpretation of a considerable number of life situations. All these separate components of VUCA became even more "sharpened" after 24.02.2022 and could not help but affect the self-assessment of the quality of life (QoL) of somatically healthy young doctors under the simultaneous combined informational pressure of both the COVID-19 pandemic and the beginning of a full-scale war. 44.

Keywords: COVID-19, Limitations of Military Time, Self Assessments of the Quality of One's Own Life yy Young Medical Workers.

The Purpose of the Study is to track changes in the self-assessment scales of quality of life indicators in clinically healthy young medical workers students of the National Medical University against the background of the infectious and military infodemic.

Materials and Methods

The research used: general clinical methods for general assessment of the somatic condition; psychodiagnostic questionnaire an adapted SF 36 questionnaire for determining quality of life (QoL) biostatistical for the purpose of mathematical processing of the obtained point values of individual scales [1-4].

Our use of this very method of psycho-diagnostic testing was based on the results of its successful use published in professional publications both for such viral pathology as hepatitis B and for other somatic pathologies [5-11]. Another factor in favor of such a choice was the possibility of its use in remote mode, as well as the automated processing and quality assessment of all 36 "raw" answers of each of the two hundred male and female students of the 4th year of the medical and dental faculties of the National Medical University named after O.O. Bogomolets (Kyiv, Ukraine), who, before testing, consciously denied the presence of signs of a real somatically understandable pathology of a non-infectious nature. None of these 21-22-year-old young people, during their previous survey, also showed noticeable anxiety about the general state of their own somatic health and did not consider it necessary to systematically control and

monitor it in any way. That is, all of them, already having an incomplete medical education, considered themselves to be completely healthy clinically. The basic motivation for participating in such voluntary remote testing was their mainly psychological need to at least somewhat expand their interpersonal communication capabilities in the conditions of long-term quarantine restrictions during the Covid19 pandemic. In addition, apparently, their youthful interest in the very procedure of quick anonymous self-testing to determine such, from their point of view, somewhat ephemeral concept as their own self-esteem played a role. Therefore, they can be considered a kind of control group that combines somatic health and a fairly sober medical understanding of the epidemiological features of the pandemic and the real risk of being infected or injured during the performance of professional duties. That is, as a result of such a specific combination, from our point of view, they are potentially minimally psychologically vulnerable to the impact of the social infodemic of recent years on them.

In addition to the answers to the standard questions of the SF36 test, they were also asked to give answers to several simple questions in parallel: 0 - gender = M/F; 1 - has anyone in the family been sick with covid = +\;-; 2 - was sick personally = ++\;-; 3 - just learning = +\;-; 4 - studying and already working in medicine = +\;-; 5.- there are doctors in the family = +\-. After February 24, 2022, two more were added: 6. - someone from the family is now in the Armed Forces = + -; 7 - someone from the family or friends is injured = +\-. And from the fall of 2022, it was

proposed to give an answer to another 5: 8 - there is noticeable fatigue = +\ ; 9 - there are sleep disorders = +\ ; 10 - there is a certain intemperance = +\ ; 11 - there is internal tension = +\ ; 12 - there are quite pronounced mood swings = +\.

All these additional questions were needed for at least an approximate determination of the degree of their influence on the self assessment of quality of life, and the last five as a preliminary remote diagnosis of the appearance of early manifestations of psychosomatic disorders.

Results and Discussion

Modern human society lives in an era of paradoxes, which, moreover, it is far from always adequately aware of. Perhaps the most obvious of them is the socio-biological one humanity is clearly becoming denser due to mass migration to large cities where the number of social contacts increases, but the feeling of loneliness only becomes more pronounced. The second in importance is the socio-psychological paradox, which forces people to gather mainly because of alarming information (pandemic, war), partially unconsciously forming new social subcultures. Fear of the possible consequences of a biological or military threat unites like no other emotion. The sudden and apparently unpredictable outbreak of first a viral pandemic, and then, in addition, a full-scale war, with its fairly regular missile attacks on civilian infrastructure, became their dominant triggers. Such a combination of them has in many ways changed mass human activity and thinking. In Ukraine, such concepts as "guaranteed safe place", "reliable forecast", "reliable social planning" have finally disappeared because genetic human anxieties and fears as a species of intelligent beings have subconsciously been triggered. Over the years, Ukrainian society has rapidly and irreversibly undergone

something akin to a fundamental global rethinking with qualitative changes in its own consciousness. We are all in a situation where it is impossible to realistically predict the future, but most hope that they will still more or less succeed and continue to balance successfully, despite the instability, uncertainty, complexity and ambiguity. Numerous news reports in the mass media and scientific publications during the pandemic period give reasons to agree with the conclusion of N.A. Nasrallah is the editor-in-chief of the professional journal Current Psychiatry, who stated that "the viral pandemic has created a parallel epidemic of anxiety," and therefore significantly worsened the quality of life of many members of society [12]. And in Ukraine, in addition to this, the military aggression of Muscovites also "contributed". So, we are all really forced by circumstances to live, fight and balance in the world of VUCA combined infectious-military infodemic.

If you try to abstract a little from the specifics of the clinical manifestations of COVID-19, you can generally imagine this viral pathology as a kind of biological trauma to the entire human body, which always causes biopsychological trauma to this person. And therefore, it certainly affects her self-assessment of her own quality of life during this period.

In the summer and early autumn of 2021, the quarantine restrictions in Ukraine, which were due to the Covid19 viral pandemic, mostly lost their sharpness and were perceived by society as something familiar and not very burdensome. Therefore, the results of the remote survey during this period were generally quite positive and were graphically and digitally reflected in Figure. No. 1.

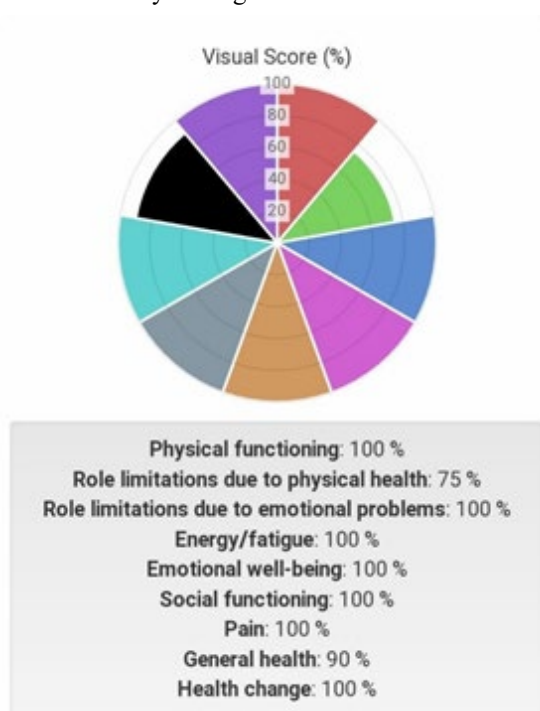


Figure No. 1: graphic and digital display of SF36 scale values at the beginning of autumn 2021.

From our point of view, this is a fairly typical picture of a completely healthy self-assessment of the quality of life of students from medical families, where almost all of them got sick with

COVID a long time ago (4-6 months ago) at the beginning of the fall academic semester of 2021. Takes only a slight weakening to 75% on the scale of role physical activity (RF), which re-

flects noticeable mainly physical fatigue due to the forced combination of training and work as an average medical staff. At the same time, the level of preservation of the general state of one's own health (GH) among such students remained extremely high 90%. And the future forecast is 100% positive-optimistic. And this biological psychological perception was against the background of the distinct infectious instability of the pandemic due to the constant need to take into account numerous epidemiological, somatic, social, hygienic factors that change uncertainly and that are really impossible to predict. Along with this, there was a certain complexity of professional understanding of the features of the infectious process and the ambiguity of interpretation of a considerable number of somatic manifestations and life situations, due to the need for active use of appropriate outpatient or inpatient drug therapy.

Such a visualdigital generalized self-assessment of quality of life was quite typical for the majority of medical students at the end of the second year of the existence of the COVID-19 pandemic in Ukraine and can be characterized as a period of their

quite successful psycho-emotional adaptation to quarantine restrictions, study and work conditions, and already mostly individually successful transmitted viral disease.

From an epidemiological point of view, in the late autumn early winter of 2021-22, the incidence rate of viral pathology (covid + flu) is expected to increase, and quarantine restrictions have become more relevant again, as has the activity of promoting vaccination in the mass media. In other words, a wave of infodemics related to infectious pathology and the forced crowded stay of the population and students, mostly in closed rooms at the place of work and study, has risen again in society. And above all, this was manifested in a sharp (doubled) decrease in the self-esteem of the positive prognosis of all students regarding the quality of their own life in the nearest time perspective. And this was inherent both to those who only studied, and to those who combined studies in the 4th year of NMU named after O. O. Bogomolets with work as an average medical staff in the afternoon. /see Figure. No. 2-3/

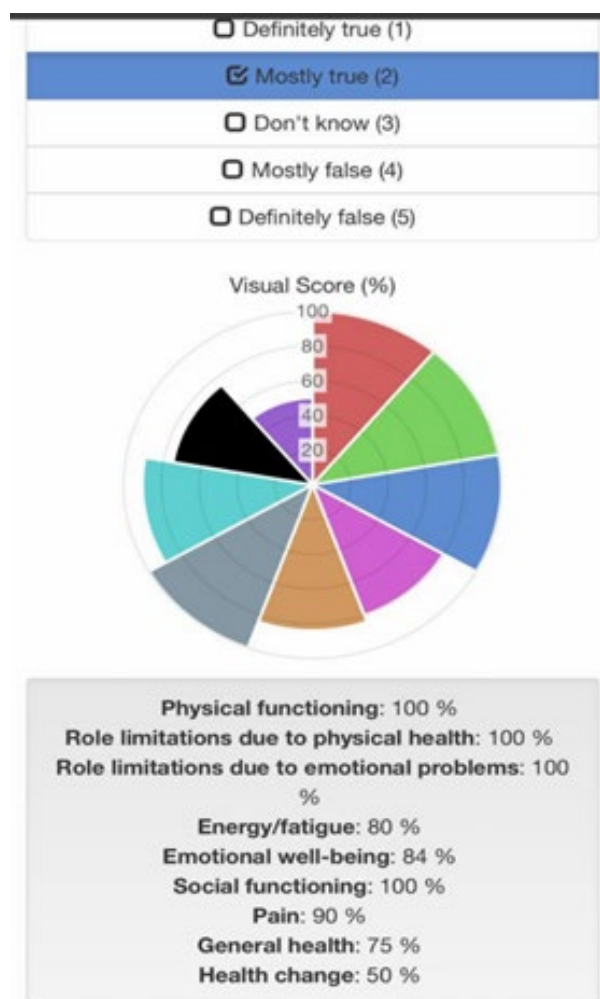


Figure No. 2 is a graphic and digital image of separate scales of the SF36 test in students who have no one in their family and they themselves fell ill with covid in the winter of 2021-22.

Information in the mass media about the seasonal increase in viral pathology and the already accumulated psychological fatigue from the previous long quarantine restrictions caused a substantial deterioration (up to 50 score) of the overall prognosis regard-

ing the assessment of one's own quality of life and its entry into the zone of certain "risky instability", when it is equally likely both its further possible slight, mostly dynamic decrease-deterioration, and improvement-increase. And this despite the fact that

the self-assessment of general health (GH) remained quite high (75 score), as well as vital activity (VT) and vigor (80 score), role functioning (RE) conditioned by emotional state (84 score). They remained in the zone of guaranteed and stable "wellbeing".

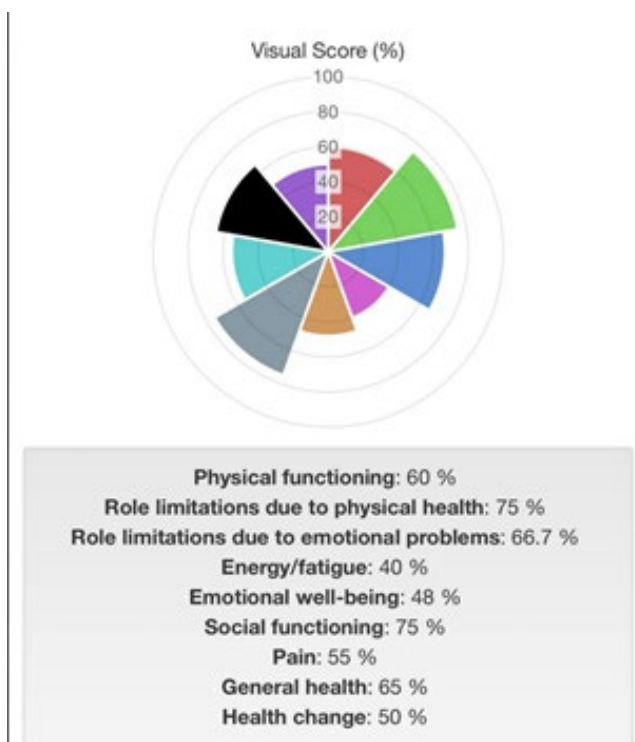


Figure No: 3 Graphical representation of the average score values of the SF36 test in working students whose family members and they themselves have already contracted covid in the winter of 2021-2022.

In this category of students, as a result of a recently transmitted viral disease, their vital activity (VT) suffered more than twice (up to 40 score), moving into the zone of pronounced psychological "risk", when the self-assessment of the quality of life is clearly underestimated and has a tendency to further deteriorate under the influence of various unpredictable factors. Only a little less (up to 48 score) suffered and their emotional state (RE), which, however, can also have a rather risky effect (positively or negatively) on the ability to perform usual and necessary life roles in everyday theoretical and clinical training. And, in ad-

dition, physical activity (PF) decreased substantially (up to 60 score) to the zone of an average acceptable level due to also risky (55 b) bodily pain sensations (BP). Also, the fullness of their social functioning (SF) also "fell" by a quarter, remaining, nevertheless, in the zone of unambiguously positive "comfortable rest" and social activity. Similarly, on the scale of self-assessment of general health (GH = 65 score). It is quite expected that the overall prognosis (Hch) of quality of life also became somewhat doubtful (50 points), being in the zone of "risky instability".

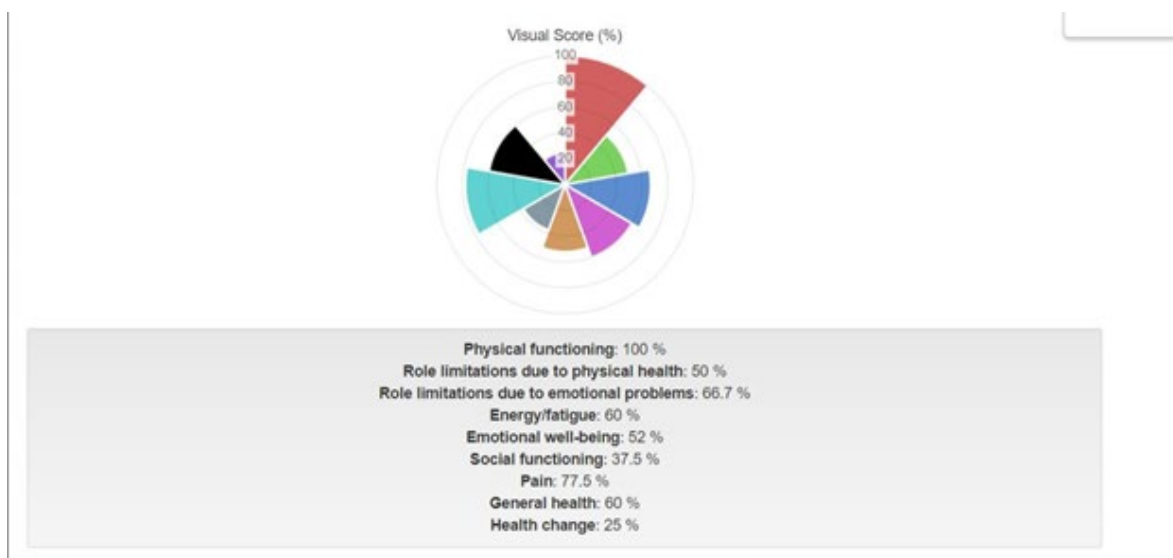


Figure No: 4 Graphical representation of the average point values of individual scales of the SF36 test in working female students whose family members and they themselves were ill with covid in the winter of 2021-22.

The determination of the peculiarities of the self assessment of one's own quality of life among working female students is reflected in Figure. No. 4. As can be seen from the digital and graphic display of point values of individual SF36 scales, the imbalance of self-assessments of their quality of life has become even more pronounced. With 100% preservation of physical functioning (PF), its role significance (RF) became half as small (50 score), being in the zone of only certain "risky instability". And this despite the fact that vital activity (VT) remained at an average acceptable level of 60 score, and the role value of emotions (RE) within the limits of a uniquely positive physical and mental "comfortable calm" at 66.7 points. Along with this, the understanding of the adequacy of one's own social functioning

(SF), its completeness, and sufficiency, decreased very clearly (to 37.5 score). They are clearly already psychologically "storming" in this aspect, although they are still trying to somehow unsuccessfully fight against it. Well, frankly catastrophically (up to 25 "storm" score) the understanding of the very positive prognosis of preserving their quality of life "fell", falling into the zone of a clear psycho-emotional tsunami. That is, it seems to us that they are at the beginning of the formation and subsequent development of certain psychosomatic disorders. And it was after realizing this threat that it was decided to supplement the last 5 questions of the test in order to objectify even a little our fears in this regard.

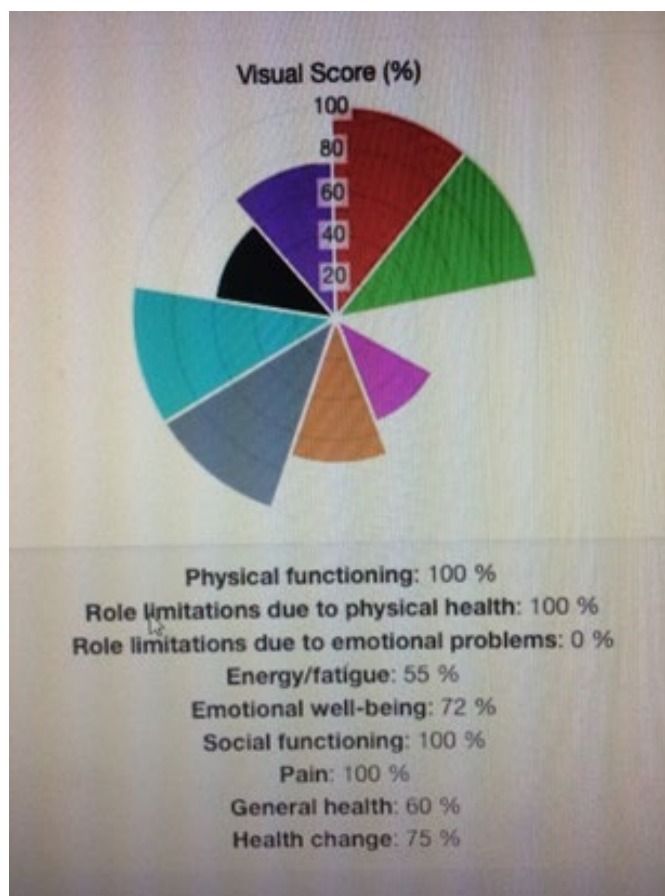


Figure No: 5 Graphic representation of the average point values of individual scales of the SF36 test for students who just studied in the spring of 2022.

If until February 24, 2022, only messages about the Covid19 pandemic had a psychological effect on the self-esteem of students, then suddenly they were supplemented with information about the large-scale military aggression of Muscovites against all citizens of Ukraine and the course of further military operations. Figure. Nos. 5-6 were reflected in the results of self-testing of 2 groups of students, the only difference between which is only one thing. The first were just studying (figure. no. 5), and the second combined studying during the day with work as an average medical worker (figure. no. 6) in the second half of the same day. That is, with less and slightly more personal clinical experience.

When comparing these two graphics, at first it seems that they are almost completely identical. And above all, this applies to

the SF36 scales, which describe mainly the physical components of self assessment of the quality of one's own life: physical functioning (PF), role functioning caused by the physical condition (RF), existing bodily pain sensations (BP). In both of these two groups, all these 3 scales objectively testify to the complete and guaranteed stable physical "well-being" of these students. In parallel with this, really catastrophically negative internal emotional evaluations of role functioning also turned out to be similar (RE = 0 score). As well as self-assessments of the general state of one's own health (GH = 55-60 score). And this, from our point of view, confirms that all other existing differences between them are due to the mental components of self-assessment of the quality of life - that is, their somewhat different clinical experience.

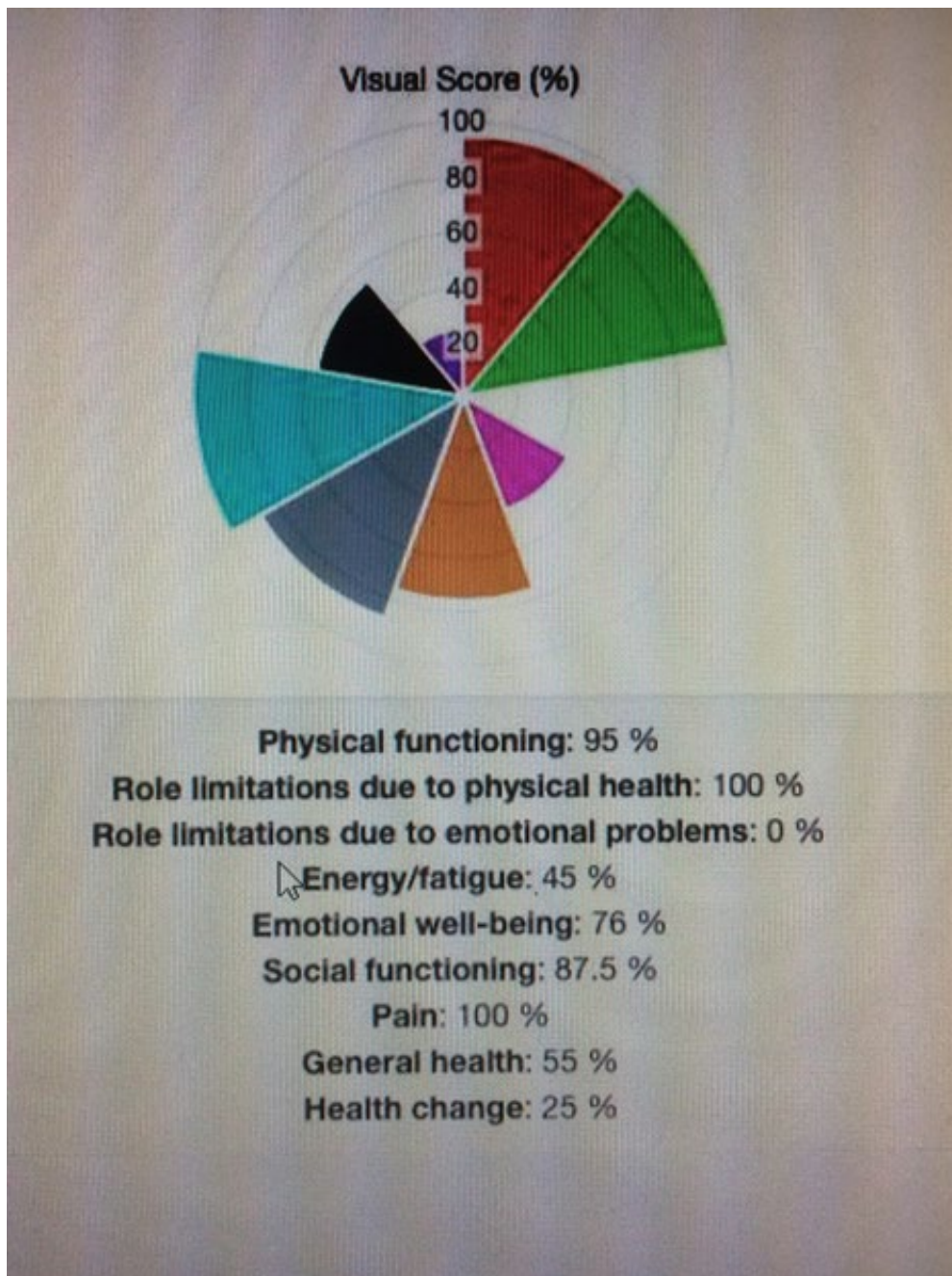


Figure No: 6 Graphic representation of the average point values of individual scales of the SF36 test for students who combined their studies with work as nurses in the spring of 2022.

Another confirmation of this is a slight decrease (from 100 to 87.5 score) of completeness on the scale of social functioning (SF), although the measure of its sufficiency and adequacy, social activity during communication remained in the zone of stable mental "well-being" from the point of view sight of protested persons. And already according to the scale of vital activity (VT), from the zone of only certain "risky instability", when it is equally likely that both its mainly dynamic decrease-deterioration and improvement-increase are possible (55 score), there was a transition to the zone of pronounced psychological "risk" (45 score), when the self-assessment of quality of life is clearly underestimated and has a tendency to further deterioration.

The most pronounced difference was found on the scale of possible self-assessment of quality of life in the future (Hch). A little

more clinical experience of the students, who not only studied, but also worked in the evenings, in fact instantly led to their "falling" from the zone of unambiguously positive mental "comfortable calm" (75 score) to the very center of the "storm" zone (25 score). That is, to the situation "You are in a sea of problems and you don't even have an oar!". That is, they potentially found themselves at the start of the beginning of the development of military distress.

Conclusions

- Abstracting from the specifics of the clinical manifestations of COVID-19, one can generally imagine this viral pathology as a kind of biological trauma to the entire human body, which almost always causes personal biopsychological trauma. And therefore, it certainly has a negative effect on her self esteem

and her own quality of life during this period.

- In the summer and early fall of 2021, quarantine restrictions in Ukraine mostly lost their sharpness and were perceived by society as something familiar and not very burdensome. Therefore, the results of the remote survey were generally quite positive and can be characterized as a period of successful psycho-emotional adaptation of young doctors to quarantine restrictions, conditions of their training and work.

- At the end of autumn at the beginning of the winter of 2021-22, the incidence rate of viral pathology increased as expected, quarantine restrictions became more relevant again, the wave of infodemic related to infectious pathology increased and this was manifested in a sharp decrease in self esteem of a positive prognosis among all students regarding the quality of their own lives in the near future.

- Determining the peculiarities of the self-assessment of one's own quality of life among working female students deserves special attention. Their understanding of the adequacy of their own social functioning, its completeness, and sufficiency has very clearly decreased. Well, the "fall" of understanding the possibility of a positive prognosis for preserving their quality of life, being in the zone of a clear psycho-emotional tsunami, became frankly catastrophic.

- Information about the initiated large-scale military aggression of Muscovites, without even minimally affecting the physical components of self-assessment of the quality of their own lives by students, at the same time had a catastrophic negative effect on the shock-emotional assessments of their own role functioning, that is, the extremely negative internal emotional state clearly limited their ability to perform the usual and necessary life roles in everyday life (including reducing the amount of work, reducing its quality), as well as the prospect of a possible further positive self-assessment of quality of life.

- The combined impact of the infectious and military infodemic destroyed a significant part of the previously formed adaptation mechanisms, and young doctors potentially found themselves at the start of the development of military distress.

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