

## SECTION: MEDICAL PSYCHOLOGY

## РОЗДІЛ: МЕДИЧНА ПСИХОЛОГІЯ

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## ADAPTIVE POTENTIAL OF PATIENTS WITH MENTAL DISORDERS

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The work is devoted to studying the peculiarities of personal adaptive potential in mental disorders of different genesis. The analysis of the structure of adaptation potential, hierarchy of its elements, qualitative diversity of its internal and external relations can reflect the dynamics of adaptation process prognosis, be an effective component of psychological support programs in forming adaptive strategies of co-adaptive behavior, providing personalized psychological correction assistance. A total of 105 patients with mental disorders of various genesis aged 19 to 67 years participated in the study. Among them there were 35 patients with mental disorders of neurotic, 35 - endogenous, 35-with organic genesis. The comparison group consisted of 35 persons without signs of psychopathology. In case of mental disorders there is a decrease in personal adaptive potential. This reflects a reduction in the ability to respond adequately and productively to a complex of adverse factors under stressful loads, disproportionate use of functional reserves, which in turn affects the prevention of premorbid conditions. The structure of adaptation possibilities of patients with mental disorders testifies to the prevalence of neuropsychological stability as a leading adaptation mechanism in this category of patients, along with much less pronounced communication abilities and moral standards. Among patients with mental disorders of various genesis the highest adaptive potential was noted in the group of patients with organic disorders, which reflects their ability to adequately regulate the functional state of the organism in various living and activity conditions. Also this category of patients had the highest indices of neuropsychic resistance. Patients with neurotic disorders, as a leading way of adaptation, most often used communication skills, which prevailed in comparison with other nosological groups, and the lowest indicators for all components of coping behavior resources were observed in patients with endogenous disorders.

**KEY WORDS:** adaptation, mental disorders, neurotic disorders, endogenous disorders, organic mental disorders, psychological stability, communication ability, moral normativeness.

**Problem statement.** The urgency of studying mental disorders is caused not only by the prevalence of psychogenic factors and low mental adaptation of the population, but also by the prevalence of chronic recurrent, resistant forms in the structure of psychopathology, which significantly reduce social functioning and quality of life of the population. Under these conditions, the study of personalized mechanisms of disease genesis, which make it possible to identify a person's "vulnerability" to the development of

pathogenic influences, acquires not only theoretical but also important practical significance.

**Problem analysis.** The instability of modern life (social and political crises, terrorism, armed conflicts, migration) places increased demands on adaptive personal mechanisms and increases the risk of mental disorders, which is confirmed by the results of epidemiological studies. It has been shown that a characteristic feature of interaction in the 'human environment' system is that a person acts as its active side, modeling various adaptation

strategies, using both genetically fixed and acquired mechanisms of adaptive behavior (Lazareva, 2012, Soroko, 2012). It is possible to designate that adaptation is defined as a process of interaction between a person and the environment, as a result of which he or she has models and strategies of behavior that are adequate to the conditions changing in this environment (Bulan, 2008, Shestopalova, 2002).

The level of development of this property defines the interval of change of conditions and character of activity within which adaptation for a concrete individual is possible (Ng, Jeffery, 2003). Turning to the role of the individual in adaptation, it has been revealed that an individual's adaptive abilities largely depend on psychological features of the individual, which determine the possibility of adequate regulation of the functional state of the organism in various conditions of life and activity (Tolstyh, 2011). The more significant are adaptation abilities, the higher is the probability of normal functioning of the organism and effective activity at the increase of intensity of influence of psychogenic factors of external environment (Trifonova, 2013, Schroder, 2004).

The mental component of adaptive capacity is provided by latent and real human mental capabilities, which allow reflecting the objective reality in all its diversity and regulating various relationships with it and with oneself, preserving one's own integrity, self-realization and self-transformation (Romanov, 2012, Bogomolov, 2008).

By adaptation we mean the process of not only preservation of physiological, but also mental homeostasis; optimal constant interaction of a person with the environment and establishment of the most effective correspondence between physiological and psychological factors, as a result of formation of relatively stable psychophysiological relations (Chikhachev M.V. 2016, Nikolaev, 2013).

The adaptive potential of the individual is inextricably linked to the social and psychological well-being of the individual and productivity in life activities (Maruta, Fedchenko, 2019). Destructive mechanisms of desadaptation lead to the formation of various forms of deviations. Therefore, our task

is to respond to the problem in a timely manner, correctly diagnose the adaptive potential and provide professional assistance (Ovcharenko, 2020).

**The aim of this research** was to investigate the peculiarities of adaptive potential in patients with mental disorders of different etiologies, as well as its structural differences depending on the genesis of the disease.

#### **Configuration and research methods.**

Psychological research was conducted at the Department of Medical Psychology of the National Academy of Medical Sciences of Ukraine. A total of 105 patients with mental disorders of various genesis aged 19 to 67 years (mean age  $32.57 \pm 9.84$  years), including 33 (31.41%) men and 72 (68.58%) women, participated in the study. Among them there were 35 patients with mental disorders of neurotic (F41, F43, F44, F48), 35 - endogenous (F34.0, F34.1, F33), 35 - with organic genesis (F06.4, F06.5, F06.6). The comparison group consisted of 35 persons without signs of psychopathology. In general, the main socio-demographic features of the main group and the control group were identical.

In order to realize the set goal, the method of the "Adaptivity" personal questionnaire was used (Raygorodsky 2001). Statistical processing of empirical data was carried out with the help of the method of establishing the reliability of sample differences (by t - Student's criterion,  $\phi$  - Fisher's criterion of reliability of differences).

**Statement of the main material.** The analysis of the research results showed that a decrease in personal adaptive potential (PAP) is observed at mental disorders ( $4,89 \pm 0,14$  standart ten). This reflects a reduction in the ability to respond adequately and productively to a complex of adverse factors under stressful loads, disproportionately involve functional reserves, which in turn negatively affects the prevention of pre-morbid conditions. The study of the structure of adaptation possibilities of patients with mental disorders testifies to the prevalence of neuropsychological stability (NPS) as a leading adaptation mechanism ( $5,35 \pm 0,26$  standart ten), along with much less expressed communicative abilities (CA) and moral normality (MN)

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( $4,79 \pm 0,09$  standart ten and  $4,89 \pm 0,14$  standart ten,  $p < 0,05$ ). This reflects the relative productivity of the specificity of the motivational and consumer sphere, which determines the vector and intensity of individual activity, the mechanisms through which the processes of goal setting and choice of means to achieve the goals.

In patients with neurotic disorders a satisfactory level of adaptation was noted ( $4,97 \pm 0,04$  standart ten), in the structure of which the prevalence of communicative ways of coincidence was expressed ( $6,71 \pm 0,16$  standart ten). Thus, high and average levels of CA were observed in 45,71% and 40% of patients respectively, and low - in 14,29% (Fig.1).

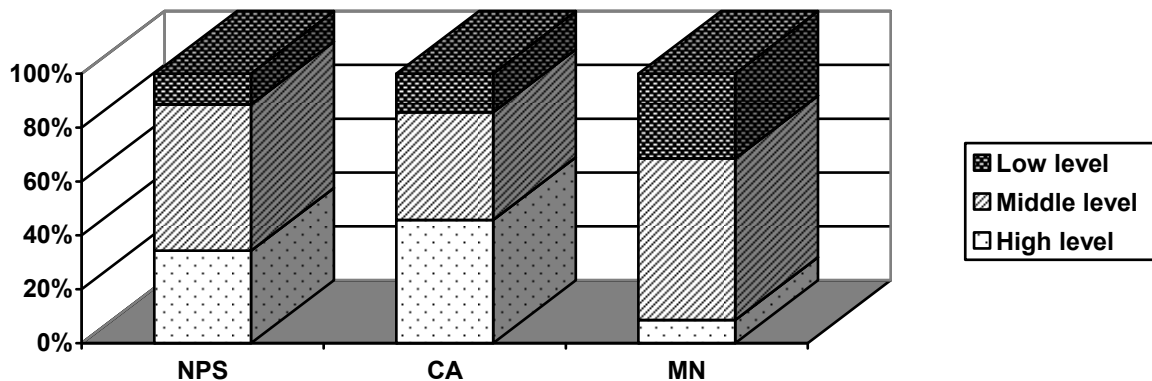


Figure 1. The structure of personality adaptive potential in patients with neurotic disorders.

The indices of neuropsychological resistance in patients with neurotic disorders were satisfactory ( $5,11 \pm 0,29$  standart ten). At the same time the majority of subjects had average level of NPS (54,28%), high resistance indices were 34,29%, and low - 11,43%.

In the case of neurotic disorders, there was a significant decrease in moral normality as an adaptation resource of the individual ( $4,97 \pm 0,04$  standart ten,  $p < 0,05$ ). In this group only 8,57% of subjects had a high level of observance of generally accepted norms and rules of behaviour, 60%

adhered to the rules irregularly, depending on external environment conditions, and 31,43% had a low level of MN.

In the group of patients with mental disorders of endogenous genesis the level of personal adaptive potential was rather low ( $3,88 \pm 0,08$ ). The most significant in the structure of the co-operative resource was NPS ( $4,6 \pm 0,17$  standart ten,  $p < 0,05$ ), which high and medium level was in 37,4% and 34,29% of the subjects respectively (Fig.2). Low level of behavioral regulation and lack of adequate self-esteem were demonstrated by 28,57% of patients.

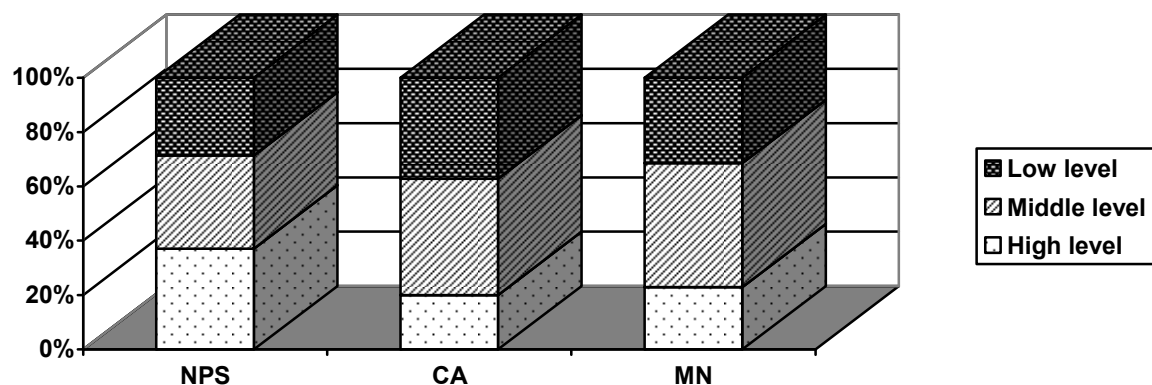


Figure 2. The structure of personality adaptive potential in patients with endogenous disorders.

In endogenous mental disorders, CA were observed at a low level ( $3.31 \pm 0.03$  standart ten). Patients of this group had difficulties in building productive communications, interaction with others, and were inclined to use an inflexible system of interpersonal relations: the average and low CA indices were recorded in 42.86% and 37.14% of the subjects, respectively, while the ease of contact and nonconflictiveness was shown only in 20% of cases.

Also in patients with endogenous disorders in the structure of adaptation mechanisms a decrease in MN was observed ( $3.74 \pm 0.05$  standart ten). Only

22,86% of subjects adhered to behavioral norms and regular evaluation of moral and ethical principles, while average and low MN levels were observed in 45,71% and 31,43% of patients respectively. In case of organic mental disorders, relatively high PAP indices ( $5.83 \pm 0.17$  standart ten) were registered. In the structure of resource potential the MN reliably prevailed ( $6,8 \pm 0,12$  standart ten), high and medium level of adherence to moral and social norms were demonstrated by 54,29% and 37,14% of the subjects, respectively, while intolerance to moral aspects was observed only in 8,57% of patients with this pathology (Fig.3).

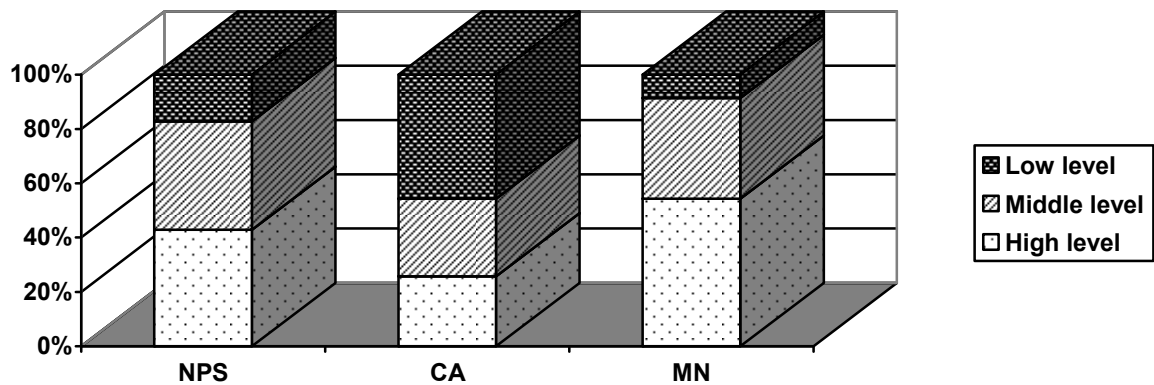


Figure 3. The structure of personality adaptive potential in patients with organic mental disorders

In patients with mental disorders of organic genesis the adaptive component of NPS was also expressed ( $6.34 \pm 0.32$  standart ten,  $p < 0.05$ ). A high and average level of resistance to stress was noted in 42.86% and 40% of respondents respectively. Low level of behavioral regulation was registered in 17,14% of subjects.

The lowest indices in the group of patients with organic pathology were observed for CA factor ( $4,37 \pm 0,08$  standart ten,  $p < 0,05$ ). It was shown that 45,72% of patients had difficulties in communication, establishing contacts with others and deep emotional connections. In this group, only 25.71% of the respondents had adaptive communication skills, while 28.57% had the average structural indicator of the CA.

Comparative analysis of the study data of patients with mental disorders showed that a significantly higher adaptive potential was observed in the group of patients with organic

disorders ( $p < 0,005$ ), which reflects their ability to adequately regulate the functional state of the body in a variety of living and activity conditions (Fig. 4). Also, this category of patients had the highest rates of NPS.

Patients with neurotic disorders were more likely to use communication skills as a leading way of adaptation than other nosological groups ( $p < 0.005$ ). This indicates a propensity of this category of patients to use interpersonal interaction as a way of avoiding in difficult life circumstances, reluctance to accept responsibility by transferring negative emotions to external objects and a desire to replace the process of cognitive experience processing.

A study of the structure of adaptive capacity in patients with mental disorders showed that the lowest rates for all components of coping resources were observed in patients with endogenous disorders ( $p < 0.05$ ). Such distribution is characterized by low level of behavioral regulation,

certain propensity for neuropsychiatric breakdowns, lack of adequate self-esteem and real perception of reality, low level of development of communicative abilities, difficulties in building contacts with others, manifestation of aggressiveness, increased conflict, inability to adequately evaluate one's place and role in the team, lack of aspiration to observe generally accepted norms of behavior.

To determine the significance of adaptation potential indicators by identifying and diagnosing criteria of mental disorders, the structure of resource potential in subjects without signs of psychopathology was analyzed (Fig. 5). The study showed that in the comparison group LAP was significantly higher than in the presence of mental disorders ( $7.36 \pm 0.25$  standart tens,  $p < 0.005$ ).

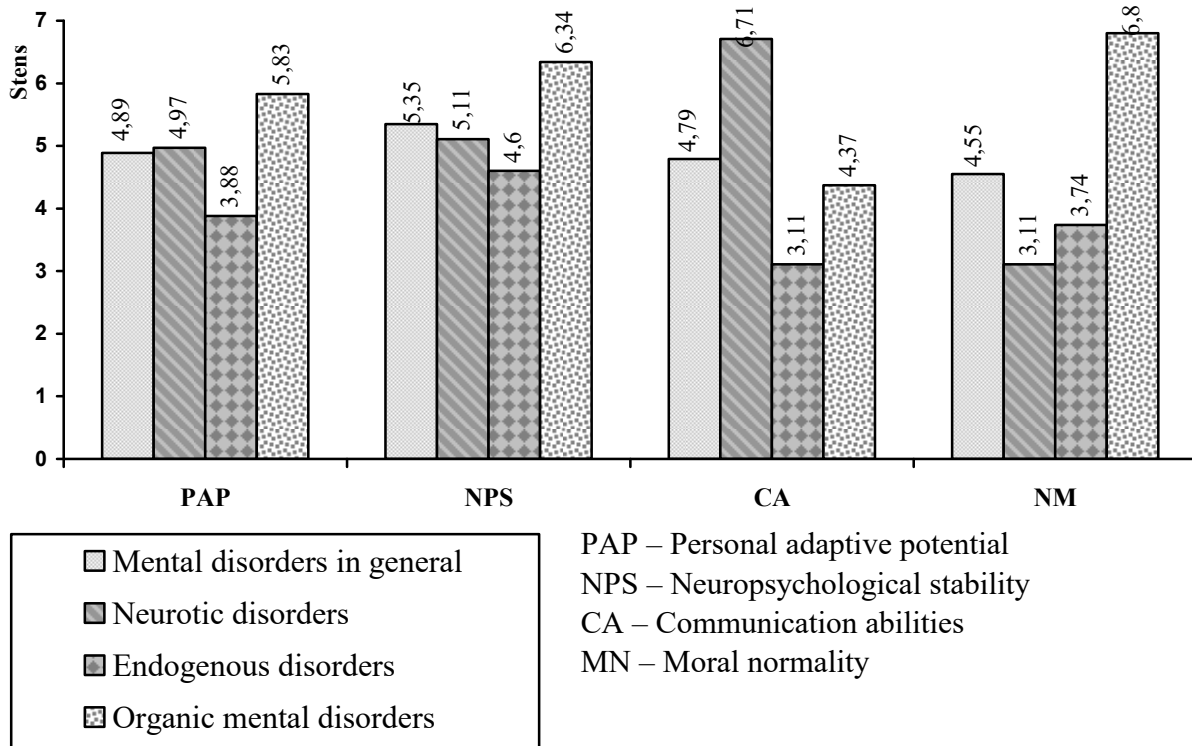


Figure 4. The structure and comparative rates of personality adaptive potential in patients with mental disorders in general and nosological groups.

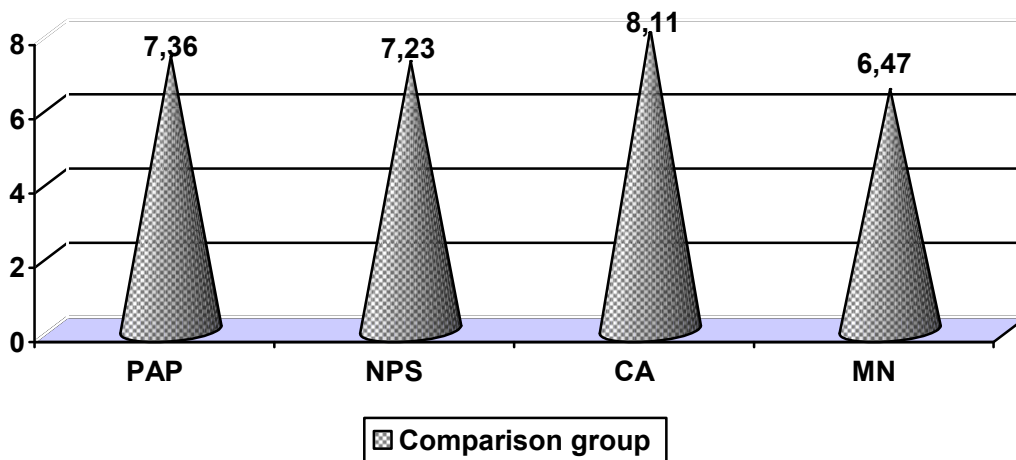


Figure 5. The structure of personality adaptive potential in comparison group

The leading adaptation mechanism was CA ( $8.11 \pm 0.29$  standart tens,  $p < 0.05$ ), while NPS and MN were expressed less ( $7.23 \pm 0.14$  and  $6.47 \pm 0.31$  standart tens, respectively), while being within the framework of high normative indicators. Thus, this group was distinguished by a high level of neuropsychological stability and behavioral regulation, high adequate self-esteem and real perception of reality, developed communication abilities, ease of establishing contacts with others, reduced conflict, a real assessment of its role in the team, orientation on compliance with generally accepted norms of behavior.

With the help of Fisher's exact method it was established that patients with mental disorders differed from the comparison group by PAP ( $p < 0,001$ , DC=9,62, IM=0,73), NPS ( $p < 0,001$ , DC=8,09, IM=0,71) and CA ( $p < 0,001$ , DC=10,93, IM=0,82).

### Conclusions

1. In case of mental disorders there is a decrease in personal adaptive potential. This reflects a reduction in the ability to respond adequately and productively to a complex of adverse factors under stressful loads, disproportionate use of functional reserves, which in turn affects the prevention of premorbid conditions.

2. The structure of adaptation possibilities of patients with mental disorders testifies to the prevalence of neuropsychological stability as a leading adaptation mechanism in this category of patients, along with much less pronounced communication abilities and moral standards.

3. Among patients with mental disorders of various genesis the highest adaptive potential was noted in the group of patients with organic disorders, which reflects their ability to adequately regulate the functional state of the organism in various living and activity conditions. Also, this category of patients had the highest indices of neuropsychic resistance. Patients with neurotic disorders, as a leading way of adaptation, most often used communication skills, which prevailed in comparison with other nosological groups, and the lowest indicators for all components of coping behavior resources were observed in patients with endogenous disorders.

The prospect of further research on this issue is to study the extent to which adaptation resources influence the formation of pathopsychological symptomatology, variability, severity, duration and peculiarities of the course of mental disorders of different etiologies.

The analysis of the structure of adaptation potential, hierarchy of its elements, qualitative diversity of its internal and external relations can reflect the dynamics of adaptation process prognosis, be an effective component of psychological support programs in forming adaptive strategies of co-adaptive behavior, providing personalized psychological correction assistance.

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#### АДАПТАЦІЙНИЙ ПОТЕНЦІАЛ ПАЦІЄНТІВ З ПСИХІЧНИМИ РОЗЛАДАМИ

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Робота присвячена вивченню особливостей особистісного адаптаційного потенціалу при психічних розладах різного генезу. Аналіз особливостей адаптаційного потенціалу, його структури та елементів, дисперсії його внутрішніх і зовнішніх характеристик, здатних відображати динаміку прогнозування конструктивних стратегій розвитку, бути ефективним компонентом програм психокорекційних заходів при формуванні адаптивних стратегій копінг-поведінки, при проведенні персоналізованих програм психологічного супроводу. Всього в дослідженні взяли участь 105 пацієнтів з психічними розладами різного генезу у віці від 19 до 67 років. Серед них було 35 хворих з психічними розладами невротичного, 35 - ендогенного, 35 - органічного генезу. Група порівняння складалася з 35 осіб без ознак психопатології. При психічних розладах спостерігається зниження особистісного адаптаційного потенціалу. Це відображає редукцію здатності адекватно і продуктивно реагувати на комплекс несприятливих факторів при стресових навантаженнях, непропорційно використовувати функціональні резерви, що в свою чергу негативно позначається на запобігання розвитку преморбідних станів. Структура адаптаційних можливостей пацієнтів з психічними розладами свідчить про переважання у даній категорії випробовуваних психологічної стійкості як провідного адаптаційного механізму, поряд зі значно менш вираженими комунікативними здібностями і моральними нормативами. Серед пацієнтів з психічними розладами різного генезу більш високий адаптаційний потенціал відзначався в групі хворих на органічні психічні розлади, що відображає їх здатність адекватної регуляції функціонального стану організму в різноманітних умовах життя і діяльності. Також дана категорія пацієнтів мала найвищі показники психічної стійкості. Пацієнти з невротичними розладами в якості ведучого способу адаптації найчастіше використовували комунікативні навички, які у них переважали в порівнянні з іншими нозологічними групами, а найнижчі показники за всіма компонентами копінг-ресурсів спостерігалася у хворих на ендогенні розлади.

**КЛЮЧОВІ СЛОВА:** адаптація, психічні розлади, невротичні розлади, ендогенні розлади, органічні психічні розлади, психологічна стійкість, комунікативні здібності, моральна нормативність.

#### АДАПТАЦИОННЫЙ ПОТЕНЦИАЛ ПАЦИЕНТОВ С ПСИХИЧЕСКИМИ РАССТРОЙСТВАМИ

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Работа посвящена изучению особенностей личностного адаптационного потенциала при психических расстройствах различного генеза. Анализ особенностей адаптационного потенциала, его структуры и элементов, дисперсии его внутренних и внешних характеристик, способных отражать динамику прогнозирования конструктивных стратегий развития, быть эффективным компонентом программ психокоррекционных мероприятий при формировании адаптивных стратегий совладающего поведения, при проведении персонализированных программ психологического сопровождения. Всего в исследовании приняли участие 105 пациентов с психическими расстройствами различного генеза в возрасте от 19 до 67 лет.

Среди них было 35 больных с психическими расстройствами невротического, 35 - эндогенного, 35 - органического генеза. Группа сравнения состояла из 35 человек без признаков психопатологии. При психических расстройствах наблюдается снижение личностного адаптационного потенциала. Это отражает редукцию способности адекватно и продуктивно реагировать на комплекс неблагоприятных факторов при стрессовых нагрузках, непропорционально задействовать функциональные резервы, что в свою очередь негативно сказывается на предотвращении развития преморбидных состояний. Структура адаптационных возможностей пациентов с психическими расстройствами свидетельствует о преобладании у данной категории испытуемых психологической устойчивости как ведущего адаптационного механизма, наряду с значительно менее выраженными коммуникативными способностями и моральными нормативами. Среди пациентов с психическими расстройствами различного генеза более высокий адаптационный потенциал отмечался в группе больных с органическими расстройствами, что отражает их способность адекватной регуляции функционального состояния организма в разнообразных условиях жизни и деятельности. Также данная категория пациентов имела наивысшие показатели психической устойчивости. Пациенты с невротическими расстройствами в качестве ведущего способа адаптации чаще всего использовали коммуникативные навыки, которые у них преобладали по сравнению с остальными нозологическими группами, а самые низкие показатели по всем компонентам ресурсов совладающего поведения наблюдались у больных с эндогенными расстройствами.

**КЛЮЧЕВЫЕ СЛОВА:** адаптация, психические расстройства, невротические расстройства, эндогенные расстройства, органические психические расстройства, психологическая устойчивость, коммуникативные способности, моральная нормативность.

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