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## **Mental Health of Adolescents in Ukraine and Poland: Comparative Analysis of Internalizing and Externalizing Disorders**

### SUMMARY

This paper presents the results of the Ukrainian-Polish survey "Mental health and risky behaviors of adolescents". The survey was conducted in the period between October and December 2016 by a group of Ukrainian and Polish scholars among 15-year-old adolescents. This paper focuses on the internalizing and externalizing indicators of mental health disorders of Ukrainian and Polish schoolchildren. Based on the empirical data the author analyzes youth aggression, violence, violation of the law, etc.

The obtained data prove the presence of risk groups in adolescent samples from both countries under study, which are characterized by the symptoms of internalizing and externalizing disorders in mental health. The symptoms of mental health disorders are more prominent in Polish adolescents. Although the integrated indicators for Ukrainian adolescents are lower, the individual manifestations of mental disorders are still higher. Thus, the indicators of risky behaviours related to aggression and violence, which are components of integrated indicators, are higher for Ukrainian adolescents.

The gender analysis of empirical data indicates that girls are more vulnerable to internalizing disorders. They are more inclined to suffer from depression and poor emotional well-being than boys. This conclusion is true for adolescents from both countries under study. Such results point to the need for differentiated approach to taking preventive measures among boys and girls.

**Key words:** adolescents, risks behavior, internal problems, external problems, mental health.

## Introduction

The problem of adolescents' mental health as a social phenomenon is new for Ukraine. Ukrainian researchers have been considering the problems of mental health disorders mainly in the context medicine for a long time. According to some official medical statistics, "1673328 Ukrainian residents have been registered as suffering from mental and behavioural disorders since January 1, 2017, which makes up 3,9% of the whole population. By the end of 2016 in Ukraine, 261240 patients with mental disorders were registered as disabled, of which 8,5% were children under the age of 17"<sup>1</sup>. It is now officially acknowledged that such an approach has not met expectations and does not correspond to international requirements, new social challenges: "the modern Ukrainian system of mental health as a whole has inherited the organizational structure, as well as the strategies and practices of the Soviet system with all its advantages and disadvantages. This system has not undergone any significant structural changes since Ukraine gained independence. It remains largely focused on biomedical approaches, which are implemented mainly in psychiatric and drug treatment inpatient facilities"<sup>2</sup>.

The need for a qualitatively new systemic approach to studying and solving mental health disorders in Ukraine is substantially actualized by the range of factors. The key macrosocial factors include a long-term economic crisis and a difficult socioeconomic situation in the country, the Russian military aggression in the east of the country since 2014, increasing internal migration of the population from the conflict zone and the emigration of the population, significant flows of external labour migration, uncertainty in the future, etc. All this creates some dangerous tendencies towards mental health disorders at national, group and individual levels. The social groups most vulnerable to these processes involve children and adolescents who require special attention.

The answer to the new challenges has become the adoption of the first document in this area, namely "The Concept for Developing Mental Health Protection in Ukraine up to 2030". In accordance with the key international documents of the World Health Organization, this document interprets mental health as "a state of well-being in which each individual realizes his or her own potential, can cope with normal stresses of life, work productively and fruitfully and is able to make a contribution to his or her community"<sup>3</sup>. The adoption of this document implies designing and implementing relevant programmes for preventing mental health disorders. These programmes are expected to be designed based on a system for monitoring a mental health condition.

One of the first attempts in this direction is the implementation of a joint Ukrainian-Polish study among pupils using a toolkit of Polish scholars who have a solid track record in monitoring the trends in mental and behavioural disorders in adolescents<sup>4</sup>. The posi-

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<sup>1</sup> Концепція розвитку охорони психічного здоров'я в Україні на період до 2030 року (*The concept of the Mental Health development in Ukraine up to 2030*), № 1018, <http://zakon.rada.gov.ua/laws/show/1018-2017-%D1%80>, dostęp: 27.12. 2017 r.

<sup>2</sup> Ibidem.

<sup>3</sup> Ibidem.

<sup>4</sup> K. Okulicz-Kozaryn, S. Shchudlo, L. Klymanska, H. Herasym, O. Herus, V. Savka, I. Mirchuk, *Zachowania ryzykowne i zaburzenia zdrowia psychicznego młodzieży we Lwowie, Drohobyczu i w powiecie drohobyckim* [w:] *Monitorowanie zachowań ryzykownych, zachowań nalogowych i problemów*

tive aspects of Polish experience in terms of state-approved programmes for preventing dependencies and promoting mental health protection should be implemented in Ukraine<sup>5</sup>.

The current study aims to comparatively analyze the symptoms of mental and behavioural disorders in Ukrainian and Polish adolescents.

### **Empirical basis**

The empirical basis of the study includes the results obtained from the Ukrainian-Polish survey under the title “Mental Health and Risky Behaviour of Adolescents” conducted during October, November and December 2016 among adolescents from Ukraine and Poland based on the methodology of an authoritative study on adolescents’ mental health in Poland that is more commonly known as the Mokotow Study and has been regularly conducted since the late 1980s<sup>6</sup>.

In Poland, the study was conducted by the specialists from the Institute of Psychiatry and Neurology under the guidance of Krzysztof Ostaszewski, Dr hab. In Ukraine, the author of this article was the coordinator of the study participated by a team of sociologists from Ivan Franko Drohobych State Pedagogical University and Lviv Polytechnic National University (Svitlana Shchudlo, Larysa Klymanska, Halyna Herasym, Iryna Mirchuk, Olga Gerus, Viktor Savka). The initiator of the project in Ukraine was the State Agency for Prevention of Alcohol-Related Problems (PARPA, Poland), which provided all organizational support for the survey.

The survey was conducted in order to discover deep and reliable information about mental health of adolescents in Ukraine and in Lviv region in particular. This information served as a scientific basis for initiating and developing a system to prevent mental health disorders in children and adolescents in the region with the help of the best European practices, including Polish experience.

The well-known studies on the outlined problem include the European School Survey Project on Alcohol and Other Drugs (ESPAD), in which Ukraine has been participating and monitoring trends in the use of psychoactive substances by pupils aged between 15 and 16 since 1995. In Ukraine, this project is coordinated by Oleksandr Yaremenko (Ukrainian Institute of Social Studies) under the guidance of Olga Balakireva<sup>7</sup>. However, this information by itself is not sufficient for the organization of preventive work in Lviv region.

The research toolkit of the Mokotow Study is wider than ESPAD’s one. The study included some questions allowing the identification of the level of using psychoactive

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*zdrowia psychicznego 15-letniej młodzieży Badania Mokotowskie 2004–2016 Badania ukraińskie, obwód lwowski 2016*, red. K. Ostaszewski, Instytut Neurologii i Psychiatrii w Warszawie, Warszawa 2017, s. 126–144.

<sup>5</sup> *Rekomendowane programy profilaktyki uzależnień*, red. T. Kowalewicz, Fundacja Praesterno, Warszawa 2016.

<sup>6</sup> K. Ostaszewski, A. Pisarska, *Metodologia badań Mokotowskich [w:] Monitorowanie zachowań ryzykownych, zachowań nałogowych i problemów zdrowia psychicznego 15-letniej młodzieży Badania Mokotowskie 2004–2016 Badania ukraińskie, obwód lwowski 2016*, red. K. Ostaszewski, Instytut Psychiatrii i Neurologii w Warszawie, Warszawa 2017, s. 11.

<sup>7</sup> О. Балакірева, *Куріння, вживання алкоголю та наркотичних речовин серед підлітків, які навчаються: поширення й тенденції в Україні*, Фоліант, Київ 2015.

substances (alcohol, drugs, tobacco, medications) by Ukrainian and Polish adolescents; the specification of manifestations of mental disorders (depression, psychological violence, aggression), the new forms of risky behaviour related to technologies (Internet misuse, Internet violence), the new forms of adolescents' risky behaviour in their free time; the justification of the impact of family and school on pupils' behaviour.

The Ukrainian-Polish study on mental health of adolescents involved 15-year-old pupils – ninth-graders from Ukrainian comprehensive schools and third-graders from Polish gymnasia. The respondents were selected due to the probabilistic method. In Poland, the study covered three parts of Warsaw – Mokotow, Ursynow and Wilanow, which were part of the historic territory of Mokotow. While selecting the respondents, the type of school was taken into account – public (84,4%) and private (15,6%). In total, 761 pupils from Poland were surveyed, 47,4% of whom were girls and 52,6% – boys.

In Ukraine, the study was conducted for the first time and involved the pupils from Lviv region only. The respondents were selected in a representative manner, taking into account the type of living area: the large city (regional center) – Lviv, the average city – Drohobych, the villages of Drohobych district. In Ukraine, 2001 pupils were surveyed, of whom 1246 ones were from Lviv (69%), 307 ones – from Drohobych (17%) and 288 ones – from the villages of Drohobych district (14%). In the Ukrainian sample, the percentage of girls is 48,2% and boys – 51,8%.

The survey included the question about the structure of the families of the surveyed pupils. The question “who have you been living with during the last 3 months?” shows that 62,4% of Ukrainian adolescents live in a full family; some of them live in a single-parent family either without father or mother – 26,3% and 3,8% respectively. Lastly, 7,3% of them have been living without both parents during the last three months. Only 48,6% of them have a sibling (brother or sister). One fifth of the respondents lives with their grandmother and/or grandfather. Labour migration of parents significantly influences the structure of pupils' families in Ukraine. The indicators characterizing the absence of a guardian in Ukrainian families are much higher than in Poland. Approximately 74% of Polish pupils indicated that they lived with both biological parents, 16% of them were raised by mothers only, 1% of them lived only with their father<sup>8</sup>.

## Results and Discussion

In order to analyze mental health of Ukrainian adolescents, one should take into account theoretical and methodological principles of the Mokotow Study presented in some author's works<sup>9</sup>. The Mokotow Study aims to analyze the psychosocial factors of risky behaviour

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<sup>8</sup> K. Ostaszewski, A. Pisarska, op. cit., s. 14.

<sup>9</sup> K. Ostaszewski, *Zachowania ryzykowne młodzieży w perspektywie mechanizmów resilience*, Instytut Psychiatrii i Neurologii w Warszawie, Warszawa 2014; *Monitorowanie zachowań ryzykownych i problemów zdrowia psychicznego młodzieży. Badania Mokotowskie 2012*, red. K. Ostaszewski, Instytut Psychiatrii i Neurologii w Warszawie, Warszawa 2013; *Monitorowanie zachowań ryzykownych, zachowań nałogowych i problemów zdrowia psychicznego 15-letniej młodzieży Badania Mokotowskie 2004–2016 Badania ukraińskie, obwód lwowski 2016*, red. K. Ostaszewski, Instytut Psychiatrii i Neurologii w Warszawie, Warszawa 2017.

and mental health disorders and develops empirical principles with the purpose to formulate the recommendations for their prevention<sup>10</sup>.

The range of issues raised in the empirical study titled “Mental Health and Risky Behaviour of Adolescents” is focused on the two problems:

- differences and similarities in the indicators of internalizing disorders in mental health of Ukrainian and Polish adolescents;
- differences and similarities between Ukrainian and Polish adolescents in the indicators of externalizing disorders in mental health.

Mental and behavioural disorders in children and adolescents are divided into internalizing and externalizing ones based on Thomas Achenbach’s approach<sup>11</sup>. Such division reflects internal or external effects of these disorders and characterizes the system of such relations as “the individual – himself/herself” and “the individual – the external environment” divided by K. Ostaszewski<sup>12</sup>.

### **Comparative analysis on the symptoms of internalizing disorders in mental health of Ukrainian and Polish adolescents**

According to some Polish researchers, the indicators of internalizing disorders in adolescents include depression, self-assessment of mental and physical health and the general indicator of internalizing disorders<sup>13</sup>. The same approach is employed within the current study to analyze some relevant data.

To measure the effects of depression, Polish experts employ a short version of the CES-D (the Center for Epidemiological Studies Depression Scale) first used in the Ontario Student Drug Use and Mental Health Survey (OSDUHS)<sup>14</sup>.

The respondent must answer four questions about his/her feelings of sadness, loneliness, depression and crying during the last 7 days prior to the study. The respondent’s answers are assessed based on a four-point scale, where 1 is “never or almost never”, 2 – “rarely”, 3 – “often”, 4 – “always”. The answers “often” or “always” for all the four questions show a high risk for depression.

The question “how many days out of the last 30 days have you been feeling stress, depression or emotional problems?” was borrowed by Polish researchers from the CDC Health-Related Quality of Life to self-assess the current condition of mental health<sup>15</sup>.

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<sup>10</sup> *Monitorowanie zachowań ryzykownych, zachowań nałogowych i problemów zdrowia psychicznego 15-letniej młodzieży Badania Mokotowskie 2004–2016 Badania ukraińskie, obwód lwowski 2016*, red. K. Ostaszewski, Warszawa: Instytut Psychiatrii i Neurologii w Warszawie, 2017, s.10.

<sup>11</sup> T. Achenbach, *The classification of children’s psychiatric symptoms: a factor-analytic study*, „Psychological Monographs, General and Applied”, nr 80(7), s. 1–37.

<sup>12</sup> K. Ostaszewski, op. cit., s. 52.

<sup>13</sup> K. Bobrowski, *Symptomy zaburzeń zdrowia psychicznego [w:] Monitorowanie zachowań ryzykownych, zachowań nałogowych i problemów zdrowia psychicznego 15-letniej młodzieży Badania Mokotowskie 2004–2016. Badania ukraińskie, obwód lwowski 2016*, red. K. Ostaszewski, Instytut Psychiatrii i Neurologii w Warszawie, Warszawa, 2017, s. 55.

<sup>14</sup> Ibidem, p. 56–57.

<sup>15</sup> Ibidem, p. 56–57.

The answers ranged from 0 to 30 days. Negative self-assessment of mental health is indicated by no less than 14-day deteriorated health condition.

The presence of internalizing disorders in adolescents is also shown by negative assessment of their own mental health (at least for 14 days of the last month prior to the study) in combination with the answers that indicate high risk for depression<sup>16</sup>.

In order to analyze internalizing disorders in mental health of Ukrainian and Polish adolescents, the data presented in Table 1 should be considered. Table 1 also contains the indicators of the data distribution among boys and girls.

Table 1. Internalizing disorders in mental health of adolescents: high risk for depression, negative assessment of mental health and a general indicator

The indicators of internalizing disorders (%)				
	The number of respondents	High risk for depression	Negative assessment of mental health	The general indicator of internalizing disorders
<b>Poland*</b>				
Girls	338	17,7	29,7	35,2
Boys	368	3,2	14,1	14,7
Overall	706	10,3	21,7	24,6
<b>Ukraine**</b>				
Girls	884	8,7	15,7	18,8
Boys	887	2,0	9,3	10,3
Overall	1751	5,3	12,5	14,4

Source: \* indicators for Poland<sup>17</sup>; \*\* indicators for Ukraine determined by the author.

As shown by the results of the study, significantly higher indicators of internalizing disorders are characteristic of Polish adolescents. Thus, the general (integrated) indicator of internalizing disorders in Polish adolescents is quite high and amounts up to 24,6%. This proves that almost a quarter of Polish adolescents are at risk. This indicator is slightly lower for Ukrainian adolescents and amounts to only 14,4%.

The structure of the indicator determining such a result shows that the overall result is mainly influenced by negative self-assessment of one's mental health. Indeed, 12,5% of Ukrainian pupils experienced stress, depression, emotional disorders for at least 14 days during the last month. In Poland, the share of such pupils was 21,7%.

The feeling of depression manifested itself through the feelings of sadness, loneliness, frustration and crying during the last 7 days is twice as intensive for Polish adolescents (10,3%) than for Ukrainians ones (5,3%). While analyzing the answers based on the four-point scale, only the answers "often" and "always" were taken into account.

The general indicator of internalizing disorders in Polish girls is twice as high as in Ukrainian girls – 35,5% and 18,8 % respectively. However, 29,7% of Polish girls and 15,7% of Ukrainian girls were observed to manifest negative effects of mental health during the analyzed

<sup>16</sup> Ibidem, p. 56–57.

<sup>17</sup> Ibidem, p. 62

period. This indicator for boys amounts to 14,1% and 9,3% respectively. As one can see, girls are more likely to suffer from mental health disorders. The comparison of the obtained answers indicates statistically significant differences in the data obtained between girls and boys ( $p < 0,001$ ). The indicators characterizing the girls are more alarming.

Taking into account the sample structure in Ukraine, the indicators of internalizing disorders were analyzed in the context of “a large city – an average city – a village”. Consequently, it was discovered that the increase in the number of adolescents suffering from internalizing disorders was directly associated with the type of living area. In Lviv, the number of such adolescents amounts to 14,8%, which is the highest indicator. The indicators for Drohobych and the villages of Drohobych district are lower. Therefore, one can conclude that the large city generates more risks and is characterized by the higher number of adolescents suffering from poor mental health.

In our opinion, higher indicators of internalizing disorders among Warsaw adolescents than among Ukrainian ones from the analyzed living areas can also be explained by the character of the metropolis, in particular the higher level of its civilization development, a rapid pace of life, lifestyle, numerical risks, etc.

### **Comparative analysis on the symptoms of externalizing disorders in mental health of Ukrainian and Polish adolescents**

The second group of mental health indicators for adolescents consists of externalizing disorders in mental health.

According to the methodology of the Mokotov study, the integrated indicator of externalizing disorders encompasses at least the two of the following three indicators: abuse of psychoactive substances, unlawful behaviour and violence. However, there are some ambiguous views on risky behaviour. Some researchers indicate both the negative and functional influence of adolescents' risky behaviour at maturation stage<sup>18</sup>. Based on this, the manifestations of risky behaviour do not yet clearly indicate the presence of mental health disorders and can be “standard” for a certain period of life. On the other hand, frequent risky behaviour without some additional prevention or regulation can lead to more serious disorders, namely mental health disorders and social problems.

The following indicates the abuse of psychoactive substances among adolescents: daily smoking of tobacco, drug use at least once during the last year or intoxication for the last 30 days, which involves consuming no less than 60 ml of ethanol at least a time. Such amount of ethanol is contained in 1,5 liters of beer, 600 ml of wine or 150 ml of vodka<sup>19</sup>.

Five questions were used to analyze the following acts related to unlawful behaviour: petty theft, (deliberate) destruction of someone's property, drug trafficking, runaway from home, use of a vehicle without the consent of the owner. Unlawful behaviour is evidenced by at least one of the mentioned behaviours during the last year.

Violence is another indicator of the integrated indicator. The concept of violence covers its different forms and manifestations. Generally, violence can be physical and psychological. Considering the fact that physical violence can be clearly understood, psychological violence,

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<sup>18</sup> Ibidem, p. 59.

<sup>19</sup> Ibidem, p. 60.

however, is explained to the respondents as a situation when one or more individuals harass, offend or deliberately disturb another person.

The integrated indicator of violence was determined based on the respondents' answers for three questions and included at least one of the three types of behaviour analyzed during the past 12 months, among which:

- frequent participation in physical or psychological violence in or near school (once a week and more often);
- frequent participation in fights in or near school (four or more times during the last 12 months);
- deliberate injury of someone (during the last 12 months).

Table 2 shows the results obtained from surveying the adolescents from Ukraine and Poland that characterize externalizing disorders in mental health and sex-based distribution of indicators.

Table 2. Externalizing disorders in mental health of adolescents: abuse of psychoactive substances, unlawful behaviour, violence, the integrated indicator of externalizing disorders

Indicators of externalizing disorders (%)					
	The number of respondents	Abuse of psychoactive substances	Violence against others	Unlawful behaviour	Integrated indicator of externalizing disorders
<b>Poland*</b>					
Girls	340	19,1	18,4	37,5	21,8
Boys	371	22,2	27,5	39,0	28,3
Overall	711	20,8	23,2	38,4	25,3
<b>Ukraine**</b>					
Girls	840	13,9	20,1	34,3	17,0
Boys	865	16,0	31,5	32,8	23,1
Overall	1705	14,9	25,9	33,5	20,1

Source: \*indicators for Poland<sup>20</sup>; \*\* indicators for Ukraine determined by the author

As evidenced by the obtained results, there are no significant differences in the analyzed indicators between Ukrainian and Polish adolescents. The integrated indicator amounts to 25,3% for Polish adolescents and 20,1% – for Ukrainian adolescents.

The obtained results indicate that every fourth Polish pupil surveyed (25,1%) and every fifth Ukrainian pupil (20,1%) turned to at least two types of risky behaviour, which is a rather alarming indicator.

If one considers the components of this indicator in more detail, one will see that Polish pupils are characterized by higher indicators of substance abuse (20,8% in Poland, as opposed to 14,9% in Ukraine) and unlawful behaviour (38,4% in Poland, as opposed to 33,5% in Ukraine). However, the indicators of violence among Ukrainian pupils (25,9%) are slightly higher than those in Poland (23,2%).

<sup>20</sup> Ibidem, p. 67.



The gender analysis on the indicators of risky behaviour shows that they are higher for boys than for girls. This correlation relates to both Polish (respectively, 28,3% and 21,8%) and Ukrainian (23,1% and 17,0%) adolescents. In Ukraine, the largest presence of risky behaviour is characteristic of boys from rural areas (24,0%).

It is important to consider the manifestations of violence in the adolescent environment in more detail. Table 3 shows the respondents' answers about whether they became victims of physical or psychological violence in or near school during the last year prior to the study. The presence of these problems can be proved by the answers "daily or almost daily", "at least once a week" taken into account while combining the integrated indicator.

Table 3. Experiences of physical or psychological violence in or near school

During the last year (%)					
	The number of respondents	Daily or almost daily	At least once a week	More seldom than once a month	Never
<b>Poland*</b>					
Girls	342	1,5	6,4	22,2	69,9
Boys	374	4,0	7,8	34,0	54,3
Overall	716	2,8	7,1	28,3	61,8
<b>Ukraine**</b>					
Girls	868	2,1	6,2	18,5	73,2
Boys	893	2,4	4,3	14,2	79,2
Overall	1761	2,2	5,2	16,4	76,2

Source: \*indicators for Poland<sup>21</sup>; \*\* indicators for Ukraine determined by the author.

The share of pupils who reported having experienced violence in or near school during the last year is higher in Poland than in Ukraine. Indeed, 76,2% of Ukrainian pupils and 61,8% of Polish pupils lacked such experience. However, 9,9% of Polish pupils and 7,45% of Ukrainian pupils suffered from violence on a daily basis. It must be borne in mind that the real indicators may be even higher, since not all the respondents are ready to share their negative experiences, and yet some of them may not be even aware of psychological violence against them.

The study shows that nearly twice as many boys in Poland as in Ukraine (11,8% and 6,7% respectively) became victims of violence regularly ("daily and almost daily" and "at least once a week").

The following question aimed to find out whether the pupils themselves committed physical or psychological violence against others, namely "how often have you been involved in physical or psychological violence against other pupils in or near school since September last year up till now?" (Table 4).

<sup>21</sup> Ibidem, p. 64.

Table 4. Physical or psychological violence committed in or near school

During the last year (%)					
	The number of respondents	Daily or almost daily	At least once a week	More seldom than once a month	Never
<b>Poland*</b>					
Girls	343	0	3,2	14,6	82,2
Boys	373	2,1	4,0	24,1	69,7
Overall	716	1,1	3,6	19,7	75,6
<b>Ukraine**</b>					
Girls	868	1,5	2,6	13,4	82,5
Boys	889	3,0	3,8	19,3	73,8
Overall	1757	2,3	3,2	16,4	78,1

Source: \*indicators for Poland<sup>22</sup>; \*\* indicators for Ukraine determined by the author.

Given the anonymous nature of the survey and the confidentiality of information (the respondent put the completed survey into an envelope and sealed the envelope by himself/herself), we hope to have received quite frank answers to the questions about school violence. The indicators are similar for Ukraine and Poland. In general, the obtained data indicate a rather high level of violence in school. This means that school is not always a safe and peaceful place where the pupil can feel comfortable.

The indicators characterizing boys in relation to committing violence are twice as high as in relation to girls. In Ukraine, the share of answers among girls increased with the size of their living area. The highest indicators are recorded to be in Lviv – 4,6%.

The following question of the survey was related to pupils' involvement in fights in or near school during the last year (Table 5).

Table 5. Involvement in fights in or near school during the last year

During the last year (%)							
	The number of respondents	Never	Once	Two or three times	Four or five times	Six or more times	Frequent fights four or more times
<b>Poland*</b>							
Girls	344	93,9	4,4	0,9	0,3	0,6	0,9
Boys	374	76,2	10,2	8,3	1,1	4,3	5,4
Overall	718	84,7	7,4	4,7	0,7	2,5	3,2
<b>Ukraine**</b>							
Girls	870	82,2	9,5	6,2	0,8	1,3	2,1
Boys	894	51,9	19,1	20,4	3,6	5,0	8,6
Overall	1764	66,8	14,4	13,4	2,2	3,2	5,4

Source: \*indicators for Poland<sup>23</sup>; \*\* indicators for Ukraine determined by the author

<sup>22</sup> Ibidem, p. 64.

<sup>23</sup> Ibidem, p. 65.

Table 5 shows gender-based frequency of pupils' involvement in fights during the last year in Poland and Ukraine. Among all the answers, it was crucial to identify the share of those pupils being involved in fights four or more times as it characterizes high intensity of fights and is considered as "frequent fights" within this study. In general, school fights are not a rare phenomenon. It must be noted that during the last year 3,2% of Polish pupils and 5,4% of Ukrainian pupils have been involved in them. As one can see, the indicators are higher for Ukrainian pupils than for Polish ones.

Boys (8,6% in Ukraine and 5,4% in Poland) are more aggressive, which is characterized by involvement in fights. In Ukraine, the highest number of frequent fights among boys (11,8%) is typical for rural areas. Taking into account girls' answers, the highest indicators in terms of living areas are characteristic of Lviv (2,8%).

Externalizing disorders can be also indicated by unlawful behaviour. To identify unlawful behaviour, the respondents were asked a question aimed at recording the following manifestations: petty theft, (deliberate) destruction of someone's property, deliberate injury of someone, drug trafficking, runaway from home, use of a vehicle without the consent of the owner, cheating in school. The obtained results are presented in Table 6.

Table 6. Unlawful behaviour: Have you committed the following during the last 12 months?

Unlawful behaviour	The number of respondents	Driving a vehicle without the owner's permission	Breaking or destroying private property deliberately	Selling marijuana or other drugs	Taking private property without the owner's permission	Hitting or injuring someone deliberately	Running away from home (going somewhere without parents' permission)	Cheating on a test, exam, etc.
<b>Poland*</b>								
Girls	342	1,2	8,8	3,2	27,9	14,7	16,7	—
Boys	374	2,7	15,2	4,5	28,8	7,3	24,3	—
Overall	716	2,0	12,3	3,9	28,5	10,9	20,8	—
<b>Ukraine**</b>								
Girls	868	1,5	6,8	2,4	22,6	16,9	14,4	87,0
Boys	889	5,4	10,8	3,6	21,3	25,2	10,9	86,5
Overall	1757	3,5	8,8	3,0	22,0	21,1	12,6	86,7

Source: \*indicators for Poland<sup>24</sup>; \*\* indicators for Ukraine determined by the author.

As evidenced by the presented data, the indicators of petty theft and deliberate injury of someone are quite high for Ukraine (22,0% and 21,1% respectively). As for Polish pupils, the highest indicators of unlawful behaviour are related to the following: taking private property without the owner's permission – 28,5% (almost every third one), running

<sup>24</sup> Ibidem, p. 66.

away from home (going somewhere without parents' permission) – 20,8% (every fifth one). With regard to taking private property without the owner's permission, it was equally typical for boys and girls from both countries.

It is also necessary to consider individually such aspect of unlawful behaviour as cheating on a test, exam, etc. The data included in the table relate only to Ukrainian pupils, since the indicators are rather high. As evidenced by the presented data, the problem of academic integrity is extremely relevant for the Ukrainian system of education. Taking into account the general indicator (86.7%), this behaviour is viewed as normal for both boys and girls. Therefore, many pupils do not consider it to be unlawful. The identified high indicators of cheating in school points to the need to take more preventive measures and explain that it is a form of intellectual theft.

### Conclusions

Summarizing the results presented in the article, one can conclude that this study, regularly conducted in Poland and firstly conducted among adolescents from Lviv region, has provided a vast array of information that is important for comparing adolescents from two neighboring countries – Poland and Ukraine. The collected array of information can be practically used by scholars, educators, social service specialists and policy-makers working with the youth.

The obtained indicators prove the presence of risk groups in adolescent samples from both countries under study, which are characterized by the symptoms of internalizing and externalizing disorders in mental health. The symptoms of mental health disorders are more pronounced for Polish adolescents, namely Warsaw pupils. Although the integrated indicators for Ukrainian adolescents are lower, the individual manifestations of mental disorders are still higher. Thus, the indicators of risky behaviour related to aggression and violence and being components of the integrated indicators are higher for Ukrainian adolescents.

The gender analysis of empirical data indicates that girls are more vulnerable to internalizing disorders. They are more inclined to suffer from depression and poor emotional well-being than boys. This conclusion is true for adolescents from both countries under study. Such results point to the need for differentiated approach to taking preventive measures among boys and girls.

However, one should more profoundly analyze how civilization development of the social environment in which adolescents grow up influences their mental health. Metropolitan cities and large cities with advanced technological development, faster pace of life are filled with a wide range of risks that can negatively affect the health of adolescents. New social realities urge to come up with qualitatively new and modern modes of working with adolescents to prevent risky behaviours.

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## STRESZCZENIE

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### **Zdrowie psychiczne nastolatków w Ukrainie i w Polsce: analiza porównawcza zaburzeń internalizacyjnych i eksternalizacyjnych**

Artykuł przedstawia wyniki ukraińsko-polskiego badania „Zdrowie psychiczne i ryzykowne zachowanie nastolatków”. Badanie to zostało przeprowadzone wśród 15-latków w okresie od października do grudnia 2016 roku przez zespół ukraińskich i polskich naukowców. Artykuł skupia uwagę na internalizacyjnych i eksternaliza-

cyjnych wskaźnikach zaburzeń zdrowia psychicznego. Bardziej wyraźne są objawy zaburzeń psychicznych wśród badanej młodzieży polskiej. Chociaż ogólne wskaźniki dla ukraińskiej młodzieży są niższe, jednak niektóre przejawy psychicznych zaburzeń są wyższe. Tak więc wskaźniki ryzykownych zachowań, związane z agresją i przemocą, które są częścią integralnych wskaźników, są wyższe w odniesieniu do ukraińskich nastolatków.

Analiza genderowa empirycznych danych wskazuje na to, że w większym stopniu dziewczęta są podatne na zaburzenia internalizacyjne. One częściej niż chłopcy ulegają depresjom i złemu samopoczuciu emocjonalnemu. Ten wniosek sprawdza się dla młodzieży obu badanych państw.

Otrzymane wyniki wskazują na potrzebę zróżnicowanego podejścia do zorganizowania pracy profilaktycznej wśród chłopców i dziewcząt.

**Słowa kluczowe:** nastolatki, ryzykowne zachowanie, internalizacyjne problemy, eksternalizacyjne problemy, zdrowie psychiczne.

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