

# The problem of psychological conflicts in inclusive rehabilitation institutions and ways to solve them

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## ABSTRACT

The article examines the features of the application of various technologies for the prevention and resolution of psychological conflicts in inclusive rehabilitation institutions. The article considers the general features of conflicts that may arise during the rehabilitation process, taking into account the nosologies of patients, gender differences of persons in need of social, medical and psychological rehabilitation. The article actualizes the issue of psychological conflicts in rehabilitation institutions as this problem is not clarified features of internal personal and interpersonal conflicts in the rehabilitation process. The urgency of gender- based violence in the process of rehabilitation and its relationship with sexual violence, the problem of which is increasingly discussed in all spheres of society, are considered. Recommendations for the prevention and resolution of gender conflicts in the rehabilitation process are offered. The problems of the emergence and resolution of religious conflicts that may arise due to ignoring the religious needs of persons undergoing rehabilitation have been studied. The team of authors proposed to build models of conflict resolution in the rehabilitation process through mediation, prevention and treatment of compulsive disorders and diseases and the prospects of cognitive and gestalt psychology in the field of conflict resolution in rehabilitation institutions. The text analyzes the Japanese national experience in resolving conflicts within enterprises and extrapolates it to the sphere of conflicts that may arise in the rehabilitation process in specialized institutions.

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## 1. INTRODUCTION

The number of people in need of rehabilitation is increasing every year in the world. The main reasons for this state of affairs can be called the disability of the population among the majority of the population and a significant increase in the number of behavioral disorders. Although the number of people in need of rehabilitation is increasing among all sections of the population, this problem is still most relevant for the following categories: children, the elderly and the military who have participated in military operations. Representatives of these categories of the population usually need comprehensive rehabilitation, which includes medical, physical, psychological and social components. This range of rehabilitation services can be obtained only in specialized rehabilitation centers. One of the tasks of the complex of rehabilitation services is to ensure maximum inclusiveness during rehabilitation. Since rehabilitation should provide the person with the maximum conditions for its functioning within modern society and inclusion provides an opportunity to integrate the person into various social processes already during the receipt of rehabilitation services. At the same time, the inclusion and maximum access of rehabilitated persons to communication with other persons creates a risk of conflicts during the rehabilitation process.

The methodological basis for the study of gender conflicts were the works of [6], on gender in the rehabilitation of patients with pulmonary diseases [7], the study of on compulsive disorders [12], the study of on the national system of conflict resolution in Japanese enterprises.

## 2. The aim of the study

To find out the urgency of conflicts during the rehabilitation process in specialized institutions and to find out the possibilities of prevention and resolution of psychological conflicts in inclusive rehabilitation institutions.

## 3. Results

Rehabilitation services are one of those sectors in the health industry market that has been developing dynamically for several decades and this trend is steady and unlikely to change in the future. Today, more and more people (with autism, the elderly, whose work is associated with high levels of stress, and others) need rehabilitation services. Usually in the context of rehabilitation services it is accepted to consider the problem of accessibility, provision of quality specialists, availability of specialized premises, and at the same time today the problem of conflicts is growing both during the direct rehabilitation process and during domestic communication within outpatient and inpatient rehabilitation centers. These manifestations of conflict do not contribute to the rehabilitation process and lead to a violation of motivation to rehabilitate persons who are consumers of rehabilitation services and therefore the prevention of such conflicts should take place in all institutions that provide rehabilitation services. In the event that such conflicts have become relevant to institutions that provide rehabilitation services, they should be resolved and this should be prepared in advance. The concept of "conflict" is multidimensional and polyparadigmatic, which means combined. In most social sciences and humanities, it is considered in the context of important contradictions of social, political and psychological content. In all these sciences, conflict is a phenomenon that significantly affects the social and psychological reality. In our study, we took as a basis the psychological interpretation of the concept of "conflict". Thus, interprets "conflict" as "a contradiction that is difficult to resolve and associated with acute emotional experiences" [1]. This concept makes it possible to explain the

conflicts that arise during the rehabilitation process as a symbiosis of social and psychological misunderstandings between the participants in the rehabilitation process. These contradictions may arise due to the lack of a high level of motivation to provide and consume rehabilitation services and household problems that may arise in persons in need of rehabilitation among themselves while living together in rehabilitation institutions.

At the same time, conflicts have a complex typology and classification and one of the largest groups of conflicts according to different classifications are group or social conflicts. According to each conflict is a set of different reflections that determine the nature of the conflict and the peculiarities of confrontation in it [2]. The importance of group and social conflicts in the rehabilitation process may be that persons who are objects and subjects of the rehabilitation process may be skeptical about certain rehabilitation methods or, conversely, to the conceptual foundations of rehabilitation technologies and methods used in specific rehabilitation facility. For example, it is fashionable today to use environmental techniques in physical and social rehabilitation, but at the same time a rehabilitation institution can rely on traditional rehabilitation technologies and this can already lead to a conflict between a rehabilitation specialist and a person who uses rehabilitation services. The study proves that people who experience internal conflicts and have cross-border traits are prone to conflicts, including in the rehabilitation process [3]. That is, individuals who are insecure, prone to nervous disorders are prone to the production of conflict situations, including in the rehabilitation process. Usually it is people with similar traits who need rehabilitation care and the likelihood of conflict situations in the rehabilitation process is quite high and requires both prevention through analysis of potential risks and the availability of effective models to overcome them. The lack of these tools significantly impairs the quality of the rehabilitation process and worsens the perception of the rehabilitation program in the eyes of the public, especially since in this case the risk of conflicts with consequences significantly increases.

According to a study by American researchers led by [4], we can conclude that the basis of internal conflicts of personality is the lack of balance between personality desires and real motivation to change the surrounding reality by taking certain actions. As part of the rehabilitation process, a person often does not fully comply with the recommendations of rehabilitation specialists and therefore the pace of rehabilitation is insufficient to perform rehabilitation tasks. In this case, the person not receiving adequate rehabilitation results from him begins to blame himself and the bad results. In this case, her destructive assessments of her own personal qualities are actualized, including the transfer of responsibility for her own condition to close relatives, friends and other people who affect her life. Being in the specified psychological condition the person is capable of aggravation of relations both with the rehabilitologist and with the persons who together with it consume rehabilitation services. According to "The highest need of an individual is in self-actualization, ie in the realization of human potentials, abilities and talents. It is expressed in the fact that a person strives to be what he can become "[5]. That is, often the cause of intrapersonal conflict is not acute psychological states and behavioral disorders, and personal motivation for self-improvement. In this case, the rehabilitation process plays the role of a mechanism of self-improvement to harmonize relations with the world and society. In case of any failures, such a person feels acute dissatisfaction with their status and role set and is ready to translate the internal conflict into external. Such conflicts are actualized at the household level and their importance in the organization of the rehabilitation process is often underestimated. This condition is mainly due to the fact that rehabilitation specialists and other employees of rehabilitation institutions focus mostly on the rehabilitation process itself and ensuring a certain level of domestic comfort during the provision of rehabilitation services. At the same time, one of the requirements of today in the rehabilitation process is to ensure maximum psychological comfort for people who Despite the fact that in modern society the number of internal or personal conflicts is increasing, interpersonal

conflicts that interfere with the harmonious functioning of various social groups and institutions and the implementation of the rehabilitation process in particular do not lose their relevance.

The processes of psychological, social and medical rehabilitation are social practices that have significant social importance for the functioning of society. Rehabilitation institutions operate according to the laws of social life. Participants in the rehabilitation process have their own psychological characteristics, which creates a system of socio-psychological interaction. Each of the participants in the rehabilitation process has its own gender and gender characteristics, which determines the specifics of their behavior in both small and large social groups. The interaction of representatives of different genders and gender identities creates a danger for the actualization of gender conflicts. There are also gender conflicts within rehabilitation institutions and they will need both prevention and resolution in the event of their occurrence. Well, according to the German researcher to this day in European countries and in particular in Germany there is gender inequality, which is relevant for various spheres of social life and in education in particular [6]. The issue of gender inequality is relevant for different age groups. At the same time, it should be noted that inclusive education is an important element of both social and psychological rehabilitation, where socialization takes place in which rehabilitators learn social and cultural norms and the assimilation of such norms with stereotypes of social inequality is a destructive factor. and socio- psychological rehabilitation in general. One should not think that the gender component is not directly related to the rehabilitation process. Thus, a group of Canadian scientists led by proved that gender significantly affects the medical rehabilitation of patients with bullet monological diseases [7]. This fact is likely to be confirmed in the medical rehabilitation of other groups of patients as gender differences are significant in the perception of certain forms of treatment and rehabilitation. Hormonal processes, which have different physical basis depending on the sex of the patient form certain features of personality behavior and therefore it is safe to say that gender features significantly affect the medical rehabilitation of patients with different nosologies. That is why the use of most rehabilitation technologies should take into account the gender characteristics of a particular patient. Due to ignoring the gender approach in the rehabilitation process, gender conflicts often occur. Their essence is mainly that the rehabilitation process is social and during the implementation of rehabilitation procedures gender rights can be violated and discriminatory practices based on gender can be carried out.

According to a group of scientists from Umeå universitet led by people with disabilities are constantly suffering from gender-based violence. As part of their own study, they proved this hypothesis on the example of Sweden [8]. Given that Sweden has been one of the models of gender tolerance for many years and this problem is still relevant for this country, extrapolating this experience to other countries, we can assume that this problem is international. That is, this problem is highly relevant for a large number of countries. In the framework of our research, the problem of discrimination on the basis of gender criteria is relevant because most people with disabilities are the main clients of rehabilitation institutions, including inclusive. The main aspects of gender conflicts during rehabilitation are that, for the most part, rehabilitation facilities are unable to provide adequate living conditions that would enable women to meet their own physiological and psychological needs. Quite a large number of women undergoing rehabilitation have young children. Due to the fact that very few rehabilitation centers have a children's room or the opportunity to stay in the center of children with mothers have to postpone rehabilitation to a later date, when the children become independent. Due to this problem, time is often lost for the provision of emergency rehabilitation services, which make it possible to achieve the greatest rehabilitation effects. In this case, we see a direct relationship between the inability to meet the gender needs of the person in need of rehabilitation and the effectiveness of the rehabilitation process. Another element of gender conflict in a rehabilitation institution may be the bowling of individuals who receive rehabilitation services due to

sexuality, clothing style and certain elements of physiological development (the shape of the mammary glands and other parts of the body). Undoubtedly, the main gender conflict is the dementia from which women suffer the most, which can with some probability turn into full-fledged sexual violence. Sexual violence against people in need of rehabilitation is one of the social taboos. Because it seems that the rehabilitation process is carried out in ideal conditions in accordance with the principles of humanism and democracy. But as experience shows, there are enough cases of sexual violence in this area as well.

According to a research by a group of researchers led by [9], the problem of sexual violence and gender discrimination with elements of sexual violence is relevant among both women and men. Often, only the problem of gender discrimination and sexual violence against women is relevant in public discourse, although the problem of violence against men is increasingly relevant in today's world in the context of both heterosexual and homosexual relationships. At the same time, the topic of violence against men is often considered marginal due to gender prejudices about the possibility of violence against men. The globalization of the processes of modern society has led to the fact that interreligious and interethnic relations are becoming increasingly important. The increase in such communicative contacts leads to an increase in conflicts in this area. This trend and the sphere of rehabilitation have not been missed. Therefore, today we can state an increase in the number of conflicts on religious and ethnic grounds in the framework of inclusive rehabilitation institutions. This state of affairs is due to the fact that in the modern world there are very few rehabilitation institutions where an effective system of religious tolerance would be applied. There are usually three models of religious policy in rehabilitation institutions: adherence to the principles of the secular state, which means the prohibition of religiosity in the rehabilitation institution; recognition of the religious ethics of the dominant religion in society; recognition of the ethics of the religious community that is the founder of the rehabilitation institution.

All these scenarios do not help meet the religious needs of believers and members of small religious communities. According to [10], it is the prohibition of religious rituals and manifestations that causes religious conflicts in all social groups and social processes. A similar situation is typical for inclusive rehabilitation institutions. Inclusiveness as a manifestation of socio-cultural self-identification should not be overlooked in inclusive institutions. Therefore, in the process of organizing and implementing the rehabilitation process should not ignore the manifestations of religious self-identification of participants in the rehabilitation process, especially Models aimed at addressing gender-based violence should be based on the ideology of mediation. In this case, we rely on the ideas of [11]. There may be different variations in the prevention and resolution of gender-based conflicts and those that provoke sexual violence, but mediation and communication should play an important role in this process. Preventive interviews and diagnostic measures should be conducted with participants in the rehabilitation process to identify behaviors that may indicate conflicts within the rehabilitation facility. In this situation, it should be borne in mind that conflicts regardless of age and gender may be involved in conflicts that escalate into violence. The relevance of this thesis is added by the fact that today more and more different categories of the population need rehabilitation. In case of conflicts between the participants of the rehabilitation process, they should organize interviews with practical psychologists and other specialists who will help in resolving conflicts.

The achievements of Japanese companies in resolving conflict situations are interesting. Today in Japan there is a national system for resolving conflicts between employees and the company and between its employees. According to Japanese researchers, the advantage of this model is that certain criteria for assessing the resolution of the conflict. Justice, equality and needs [12]. That is, the practical application of any model of conflict prevention and resolution during rehabilitation practice is evaluated according to these criteria based on the interests of all participants. This approach is very valuable especially for Europe



and North America, which are unfamiliar with the concepts of conflict resolution in modern Japanese society. We should not forget that conflict situations can be caused by the consequences of the psychological state in which at one time or another are the persons who provoked it. One such condition is compulsive disorder, which significantly affects a person's behavior [13]. Clients of rehabilitation institutions are prone to behavioral and compulsive disorders. Therefore, prevention of exacerbation of compulsive states is a technology for conflict prevention and resolution during rehabilitation. According to a study by, technologies of cognitive psychology, in particular the formation of the experience of effective behavior during conflict situations, which people have already experienced in the past, have a significant potential for resolving and preventing conflict situations. These scientists have proven the effectiveness of such an approach for people over 60 years [14]. In our opinion, through training in positive practices of behavior in typical conflict situations would help reduce conflict situations during the implementation of rehabilitation activities among members of all ages.

The study, opens significant prospects for resolving conflict situations using Gestalt therapy technologies [15]. Gestalt therapy enables a person who is in the active phase of the rehabilitation process to establish both a positive internal dialogue, which will be useful in resolving internal and external conflicts.

#### **4. CONCLUSION**

Lack of communication in the rehabilitation process both contributes to the spread of conflict and nullifies all efforts of rehabilitation specialists to ensure inclusiveness. Because it is impossible to provide a medium or high level of inclusion for people with disabilities and other medical or psychological problems in the absence of trust and communication between partners. In modern rehabilitation institutions there is a high probability of actualization of both internal and external conflicts. Among them are such types of conflicts as gender, religious, domestic, and so on. We see ways to resolve these types of conflicts in rehabilitation institutions in the use of cognitive and gestalt psychology technologies.

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