The Russo-Ukrainian War in 2023: Towards a renewed emphasis on the mental health of at-risk groups and forensic-psychiatric considerations

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ARTICLE INFO

Keywords
Ukraine war
Prisoners of war
People living in detention
Psychiatric patients
Forensic psychiatry
Human rights

‘How many there did I desert?’ - ‘In Prison: VII To N. Kostomarov’, Taras Shevchenko (1814–1861)

Nearly a year on since Russian troops crossed the border into Ukraine and the conflict has carried a substantial human toll and created an acute mental health burden (Haque et al., 2022; Goto, Pinchuk, Kolodezhny, Pimenova, & Skokauskas, 2022). At the time of writing, estimates indicate that there have been thousands of fatalities and casualties (Posen, 2023), large numbers of refugees fleeing violence who remain displaced (United Nations, 2023), and serious damage to critical healthcare infrastructure (Gostin & Rubenstein, 2022). When the situation escalated in March 2022, immediate mental health concerns were raised about prisoners of war (POWs), individuals receiving psychiatric in-patient care and people living in detention (Liebrenz et al., 2022). As the fighting continues with no imminent signs of a lasting ceasefire, we wish to reemphasise the necessity of protecting at-risk groups and highlight ongoing forensic-psychiatric considerations.

1. Prisoners of war

Across many other conflicts, POWs have often been exposed to extreme psychosocial stressors and the threat of critical life events, rendering them susceptible to psychopathology and short- and long-term mental health issues, including suicidal ideation, anxiety, and depression (Stein, Itzhaky, Levi-Belz, & Solomon, 2017; Ursano & Benedek, 1999). Trauma and stressor-related disorders can be especially evident in this demographic; for example, a study of American POWs found a lifetime rate of 67% for post-traumatic stress disorder (Kluznik, Speed, Van Valkenburg, & Magraw, 1986) and more complex symptom presentations can be found in those who experience torture (Kozaric-Kovacic, Ljubin, & Marusic, 1999).

Significantly, within the current fighting, POWs on both sides have faced brutality, including torture and gender-based and sexual violence (United Nations, 2022). Further, repatriated POWs have reported physical and psychological mistreatment (Stein & Khudov, 2022), which has led to subsequent health-related morbidities. Suffice to say, these instances represent grave breaches of the Geneva Convention (United Nations, 1949). Accordingly, we reiterate the responsibility of all parties to comply with international law and safeguard the wellbeing and human rights of vulnerable POWs. From a medicolegal view, there have been discussions around the complexities of forensic-psychiatric assessments for former POWs involved in legal cases (Levin, Gold, & Onorato, 2009), of which we believe forensic mental health specialists should be aware. For example, sociocultural considerations, notions of bias, and difficulties in trauma evaluations have been outlined (Levin et al., 2009), with Wettstein affirming the need for personal interviews with POWs during relevant judicial proceedings (Wettstein, 2009).

2. Psychiatric in-patients

Correspondingly, fighting in Ukraine has provoked sizable
challenges for the mental health care of patients in intramural settings (Cocco, Rosello, & Tavoschi, 2022). Amidst Russian attacks, psychiatric hospitals in Ukraine have been severely damaged (Bancroft, 2022), along with other healthcare facilities (Gostin & Rubenstein, 2022). This infrastructural devastation is exacerbating pre-war deficiencies in Ukraine’s mental health system (Roborgh, Coutts, Chelowe, Novykov, & Sullivan, 2022). These institutions are simultaneously seeing increasing demand from soldiers who have been admitted into in-patient care for psychological injuries sustained during the current fighting (Macdonald, 2022). Whilst laudable humanitarian efforts remain ongoing, Goto and colleagues have illustrated a lack of pharmacotherapeutics and basic provisions like food and bedding in psychiatric facilities, together with staff shortages (Goto et al., 2022).

To counter these infrastructural concerns, Goto et al. suggest that general medical practitioners and non-specialists should be encouraged to offer mental health support, as well as underlining the potential of telemedicine and remote consultations (Goto et al., 2022). Here, we believe that psychiatric associations have a role to play in encouraging professional collaborations and making greater resources more readily available to Ukrainian mental health institutions; in this regard, we applaud the establishment of formal initiatives from international organisations (e.g., European Psychiatric Association, 2022) and we call for the additional prioritisation of at-risk psychiatric patients in this conflict from all governmental stakeholders. This is equally urgent in Russian contexts, as worrying reports continue to emerge regarding psychiatric patients being conscripted into military units (Grynszpan, 2022).

3. People living in detention

Van Hout has correctly highlighted the needs of people living in detention amidst the fighting (Van Hout, 2022). Alarmingly, from the outset, Ukraine and Russia have proposed enlisting individuals serving custodial terms to their respective armies in exchange for a sentencing pardon (Liebrenz et al., 2022). As the situation has progressed, accounts of convicted offenders fighting in the Russian infantry have surfaced (Ilyushina & Ebel, 2022) and a change to Russian law has enabled individuals who had been convicted of serious crimes to be eligible for conscription (BBC News, 2022). Further, the Russian mercenary agency, the Wagner Group, has openly recruited people from detention settings (BBC News, 2022). For us, these actions have rightly generated widespread moral opprobrium (e.g., Paton Walsh, Markina, Shukla, Ochman, & Tarasova, 2022). Whilst similar measures have been enacted during other wars (e.g., Statiev, 2010), this simultaneously raises questions from humanitarian and forensic-psychiatric perspectives, especially given the prevalence of mental illnesses that have previously been identified in Russian detention environments (Burgermeister, 2003). Where necessary, it is to be hoped that adequate preparations have been made within Russian mental health services for these individuals and that they receive requisite psychiatric support on their return.

In January 2023, it was announced that some individuals with criminal convictions who had been recruited into the Russian military were set to be pardoned, which may include people with a history of violent felonies (Van Brugen, 2023). Investigations into the correlations this could have for recidivism and forensic risk assessments; for those violent offenders with psychiatric morbidities, exposure to a live combat arena in Ukraine, where they lack viable stress reduction mechanisms and sufficient medical care provisions, might invoke serious concerns about their reintegration into the community. We believe that forensic mental health experts should be attentive to this situation and vigilant of the potential for future delinquency in these individuals.

4. Concluding remarks

As the fighting in Ukraine continues, there have been indications from within the international community that there is growing societal “fatigue” with the conflict (Sky News Australia, 2023). Accordingly, we wish to reemphasis the necessity of ensuring mental health provisions and upholding the welfare of at-risk groups, including POWs, psychiatric patients, and people living in detention, along with the forensic-psychiatric implications of this situation. Presently, we believe that now is not the time for professional complacency in our discipline, but instead we must renew our focus on vulnerable individuals exposed to the brutality of this war.

Declaration of competing interest

AB was born in Georgia and experienced the conflict of the Russo-Georgian War in 2008. RS was born in Ukraine and members of his family were caught up in the violence in 2022. ML is the Editor-in-Chief of FSL: Mind and Law. The authors have no other competing interests to declare.

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