

## **REACTIONS TO FACES OF INDIVIDUALS WITH DIFFERENT MEDICAL CONDITIONS: POPULATION ASPECT**

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The study of reactions to different types of human faces is of a special interest to psychologists, psychiatrists, criminologists, anthropologists, ethologists, socio-biologists, image-makers, personnel of marriage agencies etc. Based on faces with different behavior deviations, a lot of diagnostic procedures are developed. Some of them are based on picture response evaluations. Leopold Szondi is a Hungarian psychiatrist who suggested one of such methods known as Szondi test. It is based on portrait choices of people with some mental conditions. Szondi approach is applied in the current paper.

A face plays a critical role in a subject's acceptance by other people, because it's the most exact external identification characteristics. Initially, Szondi test was used in clinical practice. Szondi considered that people could be diagnosed by prevalent "attraction" to the portraits of individuals with specific disorders. It was suggested that the prognosis of a disease progression could be estimated in such a way. Currently, these speculations are considered to be not scientifically ground, and that the diagnostic value of the procedure is doubtful. Nevertheless, application of Szondi test for other non-diagnostic purposes are not rejected if specific types of individuals will be concentrated in groups of certain behavior deviations.

Szondi test was rarely used for a general population study. Recently, Hungarian and Portuguese community samples were analyzed for their reactions to Szondi's portraits. The aim of the current study was to receive distribution characteristics of reactions to faces of people with different medical conditions and peculiarities in population of Ukrainian megapolice Kharkov (eastern Ukraine).

The aim of this research is to study population-related distribution of certain aggression types among the population of Ukraine in two successive generations.

355 volunteers (90 males and 265 females) participated in the research. All participants lived in Ukraine and were Slavs (predominantly Ukrainians and Russians). Most of them were Kharkiv city residents and were students of schools, colleges and universities. The study design was cohort and cross-sectional.

The following results were obtained from the population distribution of different portrait type reactions and analysis. Both males and females found pictures of individuals with some behavior peculiarities more or less attractive. Nevertheless, no

sex differences were found for four portrait type reactions out of eight disorders. Similar male and female face reactions were described as well for Hungarian and Portuguese community samples. These findings were a ground to combine males and females to one group for a further analysis.

Volunteers responded in the most tolerant way to faces of individuals with mania disorders. So 54% of participants considered that faces of patients with these mental disorders are less unpleasant, comparatively with faces of other individuals in portraits. For comparison, it should be mentioned that respondents from a general population in Hungary and Portugal had very similar rate of positive response to faces of maniacs. The second place on tolerability in Ukraine belongs to faces of individuals with homosexuality. Positive reactions to homosexual faces were found in 41% of cases. About 1/3 of respondents tolerantly perceived the faces of individuals with epilepsy and paranoid schizophrenia, about 1/4 – responded to faces of individuals with hysteria disorders and sadists. The faces of patients with depressive disorders and catatonic schizophrenia were less pleasant to respondents.

The results obtained, herein, may help to explain famous criminology and psychology phenomena. For example, many maniacs and serial killers are able to attract a potential victim. It is easily explained by data obtained that an evident hostility to faces of individuals with mania disorders is rarely observed. Among Ukrainian sample under examination, only 12% of respondents disliked the faces of people with mania disorders.

33% of individuals expressed null reaction to faces of sadists. These people can potentially form a group risk on face, differentiating difficulty of normal individuals and those who are predisposed to violence. But this will be true only if associations between specific phenotypic face features and personality traits are proved.

About 4/5 of respondents did not express attraction or did not react at all to faces of individuals with depressive disorders. This may partially explain why these subjects are lonely. In such a situation of a lack of attention and support of other people, their relative isolation may facilitate suicide attempts completely.

The current study of Szondi test was applied not for diagnostic purposes. It was found out that there were found no sex and age differences in individual reactions to portraits presented. The results obtained can contribute to facts described by other scientists such as reactions to faces with different mental conditions and hence, serve as a control for studies conducted with diagnostic aim.