

Socio-Mental Health Support of Military and Civilians During War Time: Psychosocial Factors



Mykhailo Frolov^{1*}, Victoriia Petruk², Kateryna Shkarlatiuk³, Iryna Berezna⁴, Volodymyr Terpeliuk⁵

^{1*}PhD in Law, Associate Professor, Department of Civil Law Disciplines, Faculty of Training Specialists for Criminal Police Subdivisions, Dnipro State University of Internal Affairs, Dnipro, Ukraine. E-mail: mfrolov@ukr.net ORCID: <https://orcid.org/0000-0001-8513-6844>

²PhD in Pedagogical, Associate Professor, Senior Lecturer, Department of Social Work and Pedagogy of Higher School, Lesya Ukrainka Volyn National University, Lutsk, Ukraine. E-mail: petruk.viktoria@vnu.edu.ua, ORCID: <https://orcid.org/0000-0002-5969-0777>

³PhD in Psychological Sciences, Associate Professor of the Department of Social and Humanitarian Technologies, Faculty of Digital Educational and Social Technologies, Lutsk National Technical University, Lutsk, Ukraine. E-mail: shkarlatiuk2012@ukr.net, ORCID: <https://orcid.org/0000-0003-0855-5003>

⁴Lecturer, Department of Social and Humanitarian Technologies, Faculty of Digital Educational and Social Technologies, Lutsk National Technical University, Lutsk, Ukraine. E-mail: berezna.iryana@lntu.edu.ua, ORCID: <https://orcid.org/0009-0005-6186-0156>

⁵Candidate of Pedagogical Sciences, Associate Professor of the Department of Psychology and Social Work, Kremenets Regional Humanitarian and Pedagogical Academy named after Taras Shevchenko, Kremenets, Ukraine. E-mail: volter_312@ukr.net, ORCID: <https://orcid.org/0000-0002-8705-4014>

Abstract

The article examines the problem of mental health support under martial law, which has become particularly relevant in the country over the past three years, as the state of war has significantly worsened the mental well-being of all categories of the population, especially the military. The study is based on the Ukrainian experience and examines the socio-psychological aspects of this support, as well as the state policy in this area. The purpose of the research was to study the effectiveness of government programs and programs of NGOs aimed at improving and maintaining the mental health of military and civilians affected by military aggression. The study was conducted on the basis of empirical data obtained at the Center for Mental Health (Ivano-Frankivsk). The article uses the method of synthesis and analysis, descriptive method, empirical (survey method) and static methods. The study outlines the concepts of mental health and psychological recovery as important factors in the sustainable development of society; describes the directions and specifics of the work of the newly established mental health centers in Ukraine, the forms and means of providing psychological assistance to the military and the population affected by military operations; and conducts a survey of the military on the effectiveness of psychological assistance received in these centers. The psychological state of the respondents interviewed at the mental health center indicates that they are experiencing different levels of stress and have feelings of fear, lack of self-confidence, lack of understanding of the dynamism of the situation, a decrease in vital energy spent on constant worries, and difficulty in adaptation processes. The majority of people seeking psychological support experience a sense of loss (loss of loved ones, home, social connections, work, hobbies, etc.), which significantly worsens the overall picture of traumatic stress and leads to depression.

Keywords: mental health, psychological support for the population, stress, psychological counseling, correction, mental health, crisis situations, emotional states, communication.

Introduction

Modern military conflicts, evolving from large-scale clashes between armed forces to local, surrogate, terrorist, and low-intensity information wars, are associated with fewer direct deaths but with growing and long-term mental health consequences. These consequences are not only evident among combatants and other military personnel and veterans, but even more so among the civilian population. While active-duty military personnel are pre-screened and trained in resilience, civilians in war zones or as refugees and asylum seekers are at

even greater risk, with a higher likelihood of intergenerational transmission of mental health disorders, with long-term consequences. Both military and civilians suffer from a range of disorders and psychological consequences caused by extreme trauma, including post-traumatic stress disorder, depression, anxiety, addictions, somatization with chronic pain, dissociation, psychosocial dysfunction, suicidal behavior, and more (Morina & Nickerson, 2018; Barry et al., 2025). In the context of localized military conflicts, the mental and behavioral characteristics of the civilian

population become an important object of research. Mental disorders, such as post-traumatic stress disorder (PTSD), significantly affect the quality of life of people who have survived military operations. According to the official WHO data presented in the report, almost 10 million people in Ukraine could potentially face mental health disorders (World Health Organization, 2022a, 2022b).

The term “mental health” was coined by the German psychiatrist Karl Leonhard, known for his classification of personality accentuations. The term “mental” is used to avoid possible discrimination and misdiagnosis, especially by laypeople, when it comes to “mental illness”. This is how it is enshrined in the International Classification of Diseases. The World Health Organization (WHO) defines mental health as a state of mind that allows a person to realize his or her full potential, work productively, and cope with the ordinary difficulties of life (World Health Organization, 2013, 2021).

Mental health covers a wide range of issues, refers to the personality as a whole and allows us to identify the psychological aspects of various personality relationships, the structure of activities, behavior, values, beliefs, norms, and individual personality traits. Proper support of mental health makes a person self-sufficient and strengthens internal resources (Saxena et al., 2006). This means that a person is capable of self-understanding, self-acceptance, and self-development in the context of interaction with the world around them and other people in real life; they have developed self-control and the ability to self-regulate within social norms. In a rapidly changing reality, the human psyche is constantly exposed to excessive information, emotional, and intellectual stress, which leads to psychological and physiological exhaustion, disability, professional costs, and deformities. However, in the context of war and direct participation in hostilities, these stresses on the psyche increase many times over, which significantly affects the deterioration of the state of the psyche. Maladjustment in war causes conflicts between expectations and reality, leads to loss of meaning and joy of life; depletes internal resources; causes depression, anxiety, and frustration. One of the most difficult tasks of medicine and psychology is to define the boundary between normality and pathology (Storring & Loveday, 2010). In the assessment of mental health, the main focus is on the impairment of the ability to adequately solve life tasks and behave appropriately in the social environment.

Ukraine has adopted a number of regulatory documents aimed at supporting the mental health of the population, including the Concept for the Development of Mental Health Care in Ukraine for

the Period up to 2030 (2017) (Cabinet of Ministers of Ukraine, 2017; Cabinet of Ministers of Ukraine, 2021), the Resolution of the Cabinet of Ministers of Ukraine “On the Establishment of the Interagency Coordination Council on Mental Health Care and Psychological Assistance to Persons Affected by the Armed Aggression of the Russian Federation against Ukraine” (Cabinet of Ministers of Ukraine, 2022). These programs are coordinated through the international Coordination center for mental health (2024).

The purpose of this article is to study the socio-psychological aspects of psychological support for people during martial law, to study the principles of the forms and methods of work of mental health centers established in Ukraine. The study was conducted on the basis of the empirical experience of the Center in Ivano-Frankivsk, established at Ivano-Frankivsk National University, and the space for the military “Mriya Diya”, which operates at the Ivano-Frankivsk Regional Clinical Hospital.

The purpose of the article determined the following research objectives:

- to outline the areas of psychological support for the population, analyze management decisions on the organization of this support;
- to describe the peculiarities of the work of mental health centers in Ukraine;
- to conduct a survey among people who have applied to mental health centers in two categories: military and civilians, to measure the level of stress in these groups using the PSM-25 Lemyr-Tessier-Fillion methodology.
- to describe the structure of chronic stress in wartime.

Literature review

For the first time, the issue of mental health was raised by researchers during the COVID-19 epidemic. The topics of scientific research included the impact of prolonged isolation of the population on changes in the psyche, and the increased level of anxiety, as well as the need for psychological support among people who had recovered from the disease and had a fear of its recurrence, fear of vaccination (Koliadenko et al., 2022; Liu et al., 2020; Mialkovska et al., 2024a). The second stage of attention to the topic of mental health was the wave of migration in Europe, which caused a number of social problems and discomfort for the local population. The topic of preserving and restoring the mental health of people with traumas of loss among emigrants who arrived in Europe is explored in the article by Kovtunyk et al. (2023).

The third wave of aggravation of this topic was caused by the Russian-Ukrainian war, which affected

the psyche of all categories of the population (Korolchuk et al, 2023).

A significant number of studies (Bandura & Reynal, 2023; Anderson et al., 2003; Wei et al., 2013) highlight how traumatic events deplete the psycho-emotional state of the civilian population. Mental disorders, such as anxiety and depression, are becoming common among civilians. According to a number of researchers, civilians often experience more acute and severe symptoms of mental disorders in combat than combatants, due to the duration of stress and the unpredictability of the situation.

Ways to prevent mental health are explored in the works of Jordans et al. (2009), Saxena et al. (2006). The issue of communication in psychological support for victims of war, especially communication in crisis situations, is a separate important area of research (Mialkovska et al., 2023, 2024b; Riera et al., 2023). The key problem of some articles is the training and retraining of psychologists to work under martial law, that is, the formation of human resources for the implementation of government programs and programs initiated by public or international organizations (Kwame & Petrucka, 2012; Ratna, 2019; Karnieli-Miller, 2020).

However, a separate study of the practice of mental health support within the newly created centers throughout Ukraine is needed, i.e., a study of individual cases of social and psychological support for the population, an analysis of the structure of stress in war conditions, which determines the relevance of our study.

Methods

The following methods were used in the study:

- analysis and synthesis method – for conceptualizing the concept of “mental health”, reviewing scientific sources on the selected issue, regulatory framework governing the provision of psychological support to the population;
- descriptive method – in describing the principles, forms and directions of psychological support for the population, which are implemented in mental health centers;
- empirical method – in analyzing the data of the survey conducted in these centers;
- sampling method and method of statistical data processing – to work with survey data from military veterans and civilians who sought psychological assistance;

the PSM-25 Lemyr-Tessier-Fillion stress measurement methodology,

method of data systematization, interpretation and generalization of results – to summarize the results of the empirical study and formulate scientific and theoretical conclusions.

The empirical research in the form of a survey was conducted at the Mental Health Center at Ivano-Frankivsk National Medical University (Ivano-Frankivsk) in January–March 2025. The survey covered 50 respondents aged 25–55 years – 25 military and 25 civilians who underwent psychological rehabilitation at the mental health center. The survey was based on a random sample, was voluntary and conducted in compliance with the principles of ethics.

Results

An increased degree of mental stress during war causes mental states that negatively affect a person's vitality and reduce their ability to work, and further lead to anxiety, apathy, depression, and even acute mental conditions. To minimize this waste of vital energy and ensure the psychological resilience of the population in war, it is necessary to develop competencies, skills and abilities that will support a person's ability to successfully solve problems, overcome fears and uncertainty despite adverse situations. In addition, the emphasis on digital transformation, automation, and robotization has shifted around the world. There is an obvious transition to mechanical and contactless control of human consciousness, will, motivation, and life, which certainly suppresses a person as a personality, individuality, and active subject of life. Having stratified social groups, we can identify priority groups for priority psychological assistance: military personnel, their family members, family members of military personnel who were killed, disappeared or are prisoners of war, survivors of the occupation, internally displaced persons who fled their homes, children and adolescents affected by the war.

Post-traumatic stress syndrome, depression, and anxiety disorders are just some of the possible psychological consequences of warfare. Wartime is characterized by a high degree of uncertainty, a constant threat to life and health, loss of a habitual way of life, destruction of social ties, and restrictions on freedom. These factors create conditions for the emergence and development of chronic stress.

The structure of chronic stress in wartime includes various aspects: risk factors (psychological, social and economic threats), psychological reactions (Figure 1).

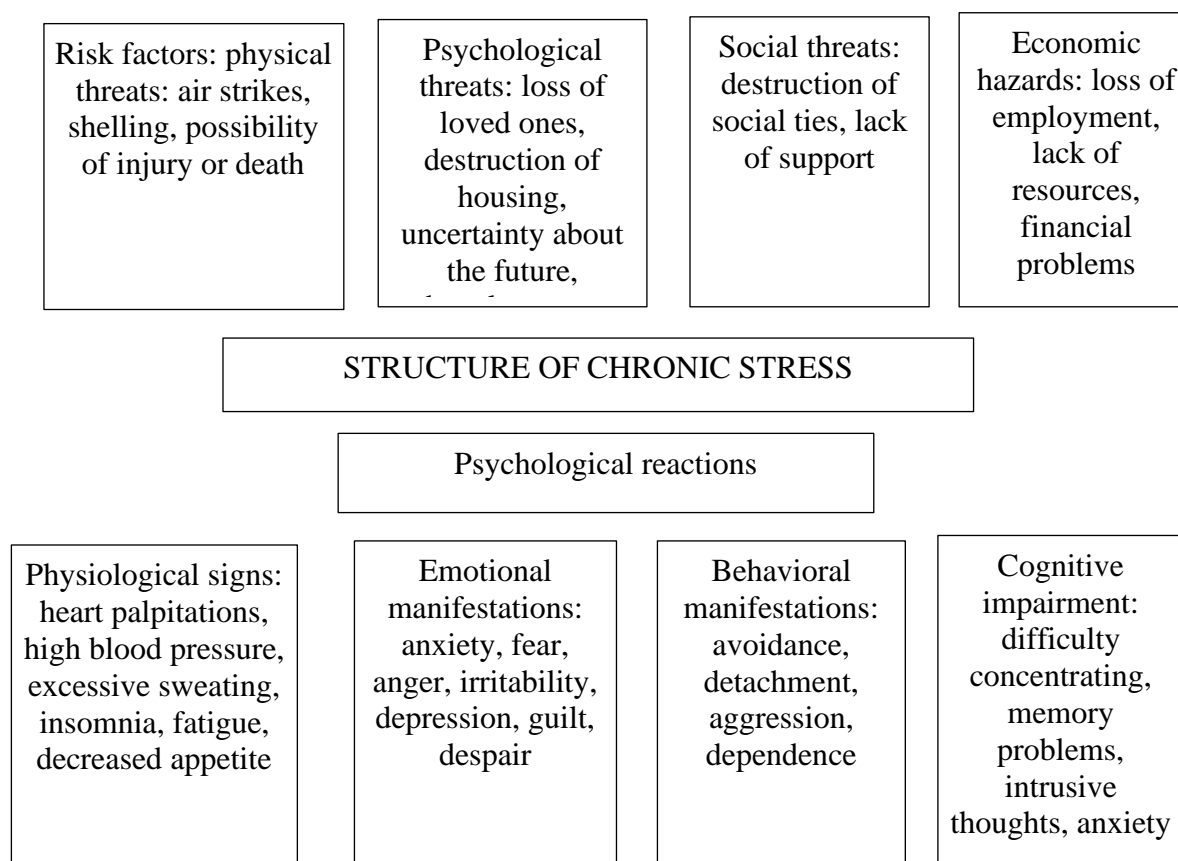


Figure 1. The structure of chronic stress in war conditions
Source: author's development

Mental health centers established in Ukrainian cities put into practice psychotechnologies, the benefits of which we see in the following aspects:

- they have a broad basis in humanities, involving information from physiology, neuropsychology and other related sciences;
- they have a technological basis, are able to translate knowledge into action, to form a skill;
- develop the ability to independently master the methods and techniques of self-assessment, self-correction, self-analysis, self-influence, self-development, and self-realization;
- modern psychotechnologies allow to develop potential capabilities and find reserves for the development and correction of internal human resources, reduce the risks of “burnout”, loss of efficiency and productivity by mastering the skills of psychological stability and positive self-programming;
- help meet the needs for “peak” experiences, and can correct emotional states.

Let's take a closer look at the specifics of the Mental Health Center established at Ivano-Frankivsk National Medical University. The Center was created as part of the All-Ukrainian Mental Health Support Project “Are You OK?” initiated by First Lady Olena Zelenska. This project is being implemented in cooperation with the professional community of

psychologists and volunteers under the guidance of the Coordination Center for Mental Health of the Cabinet of Ministers of Ukraine and with expert support from WHO.

The center provides psychological support in such areas as educating the public about the possible consequences of war for the human psyche, training medical personnel in the field of early detection and prevention of mental illness, individual and group forms of psychotherapy, and psychoeducation. One of the key principles of the center's work is the principle of multidisciplinary teamwork, as well as inclusiveness, continuity of care and the principle of barrier-free access. The center's premises are made in accordance with barrier-free access standards, which guarantees comfortable access to all its services for people with disabilities.

The Center creates psychoeducational programs to explain the most common mental disorders that occur in wartime, such as panic attacks, anxiety disorders, and prolonged grief disorder, and develops trainings to overcome the crisis tension caused by unexpected events of war.

To study mental and behavioral characteristics, the center's specialists use a set of methods that allow them to understand human reactions to stressful situations as deeply as possible. In this context, the methods used in social psychology and conflictology

demonstrate their effectiveness and versatility, in particular, the following:

1. A method of observing the behavior and communication of individuals during individual or group counseling. This method provides an opportunity to directly record the behavior and emotions of participants, which allows collecting data on real reactions to difficult situations arising in war, demonstrates how conflicts affect personal and group dynamics.

2. Sociometry is a tool that helps to identify social ties and interactions in an indirect way, to study the level of social cohesion in a conflict situation, when the interaction between people can change under the pressure of stress.

3. Surveys are an effective method for assessing the level of stress and mental disorders among citizens. Properly structured questionnaires help to identify specific aspects, such as anxiety or social adaptation, which is important for developing recommendations for supporting victims.

The combination of different methodological approaches allows for a more complete study of the

mental and behavioral characteristics of civilians in the context of military operations, opening up new horizons for future research in this important area.

Communication and interaction within families and communities have a great impact on adaptation to the new reality. Counseling programs can improve mutual understanding and reduce conflict, which also opens up access to the formation of a collective support mechanism, as it is easier for people to overcome difficulties when they are united.

A survey was conducted on the basis of the Mental Health Center at Ivano-Frankivsk National Medical University among military (n=50) and civilians (n=25) to study the level of stress, time spent under the influence of traumatic experiences, priority of individual or group psychological counseling, and reasons for contacting the center.

The first question of the questionnaire was “What form of psychological assistance do you prefer: individual psychological counseling or group psychological counseling?” The answers were distributed as follows (Figure 2).

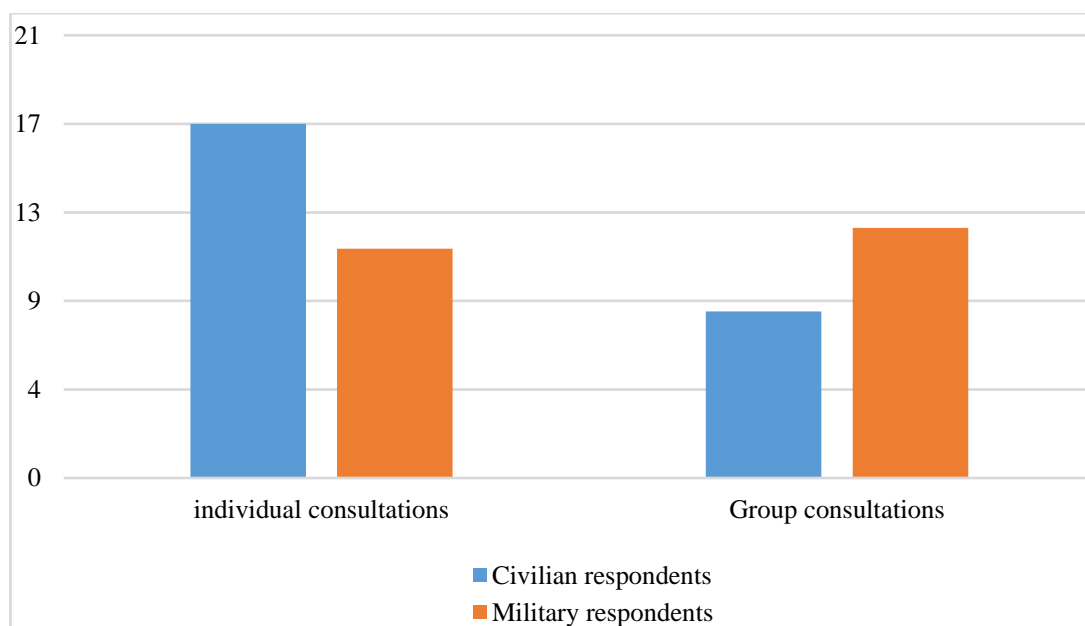


Figure 2. Results of answering the question “Which form of psychological assistance do you prefer: individual psychological counseling or group psychological counseling?”

Source: developed by the author on the basis of the survey results

As can be seen from the results of the survey, the majority of military respondents (14 respondents) prefer group counseling, while the majority of civilians (17 respondents) chose individual counseling. This indicates that military personnel have a high level of trust in their colleagues, are used to working in teams and supporting each other, so group counseling is a priority form of psychological support for them.

The next question in the questionnaire concerned the length of time spent in a stressful situation. To the question “How long have you been in a stressful situation?” most civilians (13) answered that they have been under constant stress since the beginning of the war (3 years), 5 respondents - more than one year and 5 respondents - several months. Among the military, the answers were ranked as follows: 7 respondents - for three years, 11 - for the last year, and 5 - for several months (Figure 3).

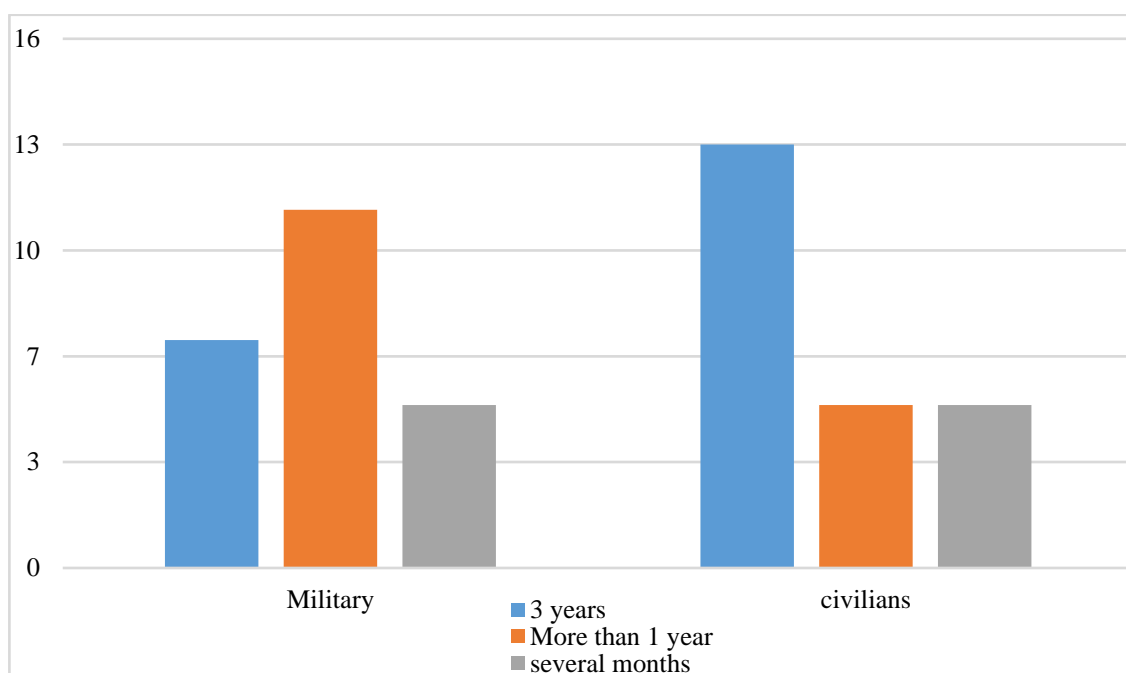


Figure 2. Results of answering the question "How long have you been in a stressful situation?"
Source: developed by the author on the basis of the survey results

The answers of the respondents show that most civilians have been under constant stress since the beginning of the war, while military respondents are more stress-resistant, the cause of their stress being mainly the beginning of participation in military operations, not the beginning of the war, as in the case of civilian respondents.

The next step of the empirical study was to measure the level of stress at the beginning of psychological assistance. For this purpose, we used the PSM-25 Lemyr-Tessier-Fillion stress measurement methodology.

The results of the stress level (PSM-25) before the start of group psychological trainings are presented in Table 1.

Table 1. Stress level (PSM-25 scale) (%) at the beginning of group psychological trainings

| Level/respondents | High level of stress | Average level of stress | Low level of stress |
|----------------------|----------------------|-------------------------|---------------------|
| Civilian respondents | 9 | 11 | 5 |
| Military respondents | 6 | 15 | 4 |

Source: developed by the author on the basis of the survey results

The results of the stress level according to the PSM-25 Lemyr-Tessier-Fillion stress measurement methodology indicate a high level of stress observed among civilian respondents (9 respondents), while among military respondents there were 6 people with high stress, while the military had a higher percentage of people with moderate stress (15). The low level of stress was almost the same in both groups of respondents.

Discussion

We agree with the position of Tsybuliak et al. (2023) regarding the importance of psychological assistance in rehabilitation centers and hospitals, not only military hospitals, but also basic clinical hospitals, as civilians also need professional psychological support.

The results of our study correlate with the findings of Bandura and Reynal (2023) that civilians during wartime are under constant stress and find it difficult to cope with this problem, while the military have slightly higher levels of stress resistance, and the period of their stress often coincides with the period of participation in hostilities or the loss of a loved one.

When providing psychological assistance, we suggest that psychological counseling should take into account the fact that psychological counseling should be focused on the psychological difficulties of everyday life, as well as on neurotic problems and complaints, and fears associated with being in a traumatic situation. The ability to master self-help techniques is an essential element in a traumatic situation. We believe that a unified system of

training for psychologists should be created to work with the population affected by the hostilities, which will allow them to provide assistance from a unified methodological perspective.

In our opinion, it is important to create an environment for the re-adaptation of military veterans and people affected by military operations in every locality of Ukraine. The main activities of such an environment should include:

- addressing the specific needs of veterans (public recognition of their social significance, acceptance of their understanding of the specific values of the military brotherhood, peculiarities of mental reactions and behavior of veterans, etc.);
- assistance in the cognitive comprehension of traumatic information and correction of emotional states by relevant specialists;
- active reintegration measures (for example, by involving combat veterans in active social work);
- creating a system of social and psychological support for veterans.

Conclusions

Thus, work with society is of great importance in the social and psychological reintegration of war veterans and civilians whose mental health has suffered from constant stress. It is society that is central to the reintegration of veterans, because it is its willingness and ability to accept and assimilate people with a “naked psyche” that largely determines whether the psychological consequences of participation in war, such as post-traumatic stress disorder, will develop. It has been established that the mental health of the civilian population in wartime is critically important and requires further study and development of support programs. It is important to understand not only mental illness, but also the impact of the psycho-emotional state on the behavior and social life of the population. A psychological assistance program adapted to the needs of civilians should take into account the specifics of the traumatic experience and create conditions for recovery and support.

Psychosocial work should be comprehensive and holistic, based on the principles of respect, inclusiveness and focus on the needs of the population. Such an approach can significantly help civilians overcome crisis situations and restore confidence in the future. The need to continuously analyze and adjust programs based on feedback from the population will contribute to the evolution of assistance models and, as a result, their effectiveness.

The psychological state of the respondents interviewed at the mental health center shows that they experience different levels of stress and have feelings of fear, lack of self-confidence, lack of understanding of the dynamism of the situation, feel

a decrease in vital energy spent on constant worries and difficulty in adaptation processes. The majority of people seeking psychological support experience feelings of loss (loss of loved ones, home, social connections, work, hobbies, etc.), which significantly worsens the overall picture of traumatic stress and leads to depression; constant stress exacerbates existing neuroses and psychoses, so it is important to approach the problem of rehabilitation in a comprehensive manner, especially if traumatic stress is closely intertwined with other psychological stimuli or existing neurotic disorders. Prospects for further research may include studying the effectiveness of individual psychological methods and practices in overcoming the “consequences of war,” in particular in improving the mental health of representatives of different social or age categories.

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