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# PSYCHOLOGICAL REHABILITATION OF COMBATANTS IN UKRAINE FROM 2014 TO 2021: STATISTICS AND CURRENT STATUS

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## SUMMARY

### Background:

Military action in eastern Ukraine [Anti-terrorist Operation (ATO)] has a significant impact on the psyche of combat participants and causes changes in the life activities and behaviour of the individuals concerned. The traumatic experience gained during hostilities has a negative impact on the health of military personnel. According to psychiatrists' forecasts, in the best-case scenario, 20% of combatants in Ukraine will be diagnosed with chronic post-traumatic stress disorder, which has already been given the name "ATO syndrome". Given this, there is now an urgent need for rehabilitation activities, and the new conditions of hybrid warfare require social service professionals to respond quickly to combatants' requests to organise and deliver comprehensive rehabilitation. Therefore, the aim of this study is to analyse the provision and conduct of psychological rehabilitation of combatants in Ukraine from 2014 to 2021.

### Material/ Methods:

Philosophical and general scientific methods were employed to achieve the aim. Among the general scientific methods, the theoretical (analysis, generalisation, classification, and synthesis) and empirical (description and comparison) levels should be highlighted. Also, a bibliosemantic method was used to summarise the analysis of the subject literature and our own experimental data. In addition, various programs were employed to rehabilitate the military. For example, the "Cyber Defenders" project, which was launched in 2021. This involved 30 veterans who will receive a certificate in cybersecurity upon graduation. The E-Veteran system, which allows veterans to seek psychological support, was also analyzed.

### Results:

As the main results, it is worth mentioning that psychological rehabilitation is a pool of psychophysiological, psychotherapeutic, organisational, and medical measures aimed at the resumption of lost mental functions and psychocorrection of the social status of military personnel who have suffered mental combat trauma. The study analysed the mental state and profile of servicemen and servicewomen, the psychological and psychiatric problems that affected them, and government programmes and projects to support and assist ATO/JFO (Joint Forces Operation) veterans. Regarding the process of psychological rehabilitation for military personnel in Ukraine itself, positive trends can be observed since 2014, such as the opening of the Ministry of Veterans' Affairs, but in the light of current threats and challenges, these undertakings are still insufficient.

### Conclusions:

The system of psychological assistance and rehabilitation of ATO participants should be considered a component of the national security of the state. The article is of practical value in a range of areas, including in political, social work, pedagogical, and educational fields, as well as having application in criminal justice and the law.

**Key words:** psychological state, post-traumatic stress disorder, social adaptation, psychological help, ATO/JFO veterans, Ministry of Veterans' Affairs of Ukraine

## INTRODUCTION

The armed conflict taking place today in the east of the country has become a real test of the ability of the Armed Forces of Ukraine (AFU) to carry out their tasks to protect the state and the psychological stability of the army. To date, over 350.000 Ukrainians in Ukraine have been granted combatant status. However, more than 75% of them need psychological rehabilitation, and 32% need long-term rehabilitation measures [1,2]. The traumatic experience of combat has a negative impact on the health of military combatants. Over 7 years of combat operations in Ukraine have recorded more than a thousand suicides, more than half (66%) occur not on the front line but at permanent deployment points, apparently, since many ATO (Anti-terrorist Operation) participants do not know how to cope with stress and other negative states [3]. In particular, during their return to peaceful life, they experience new stresses related to social adaptation, misunderstanding of their relatives, difficulties in communication, professional self-determination, self-actualisation, creating a family, etc. Psychiatrists predict that, in the best-case scenario, 20% of combatants in Ukraine will be diagnosed with chronic post-traumatic stress disorder (PTSD), which has already been given the name "ATO syndrome" in the coming years [4]. Dissatisfaction with their position in society, post-traumatic stress disorder, high suicide rates, and psychological distress are the consequences that prevent servicemen and service women participating in hostilities from realising their maximum potential in civilian life.

As a result, AFU soldiers who took part in hostilities require increased social attention and the organisation of a comprehensive rehabilitation system. As statistics show, during the years of the war in Donbas, more than 320.000 veterans appeared in Ukraine in need of comprehensive assistance in order to integrate back into society. The process of their integration requires the creation of a rehabilitation system that combines medical, social, psychological, and other types of rehabilitation. Specialised social services and rehabilitation institutions have an important role to play in this process, providing decent conditions for the successful comprehensive rehabilitation of this category of military personnel. However, the existing set of measures in Ukrainian society providing social services for the rehabilitation of soldiers, and veterans of combat operations is partial, haphazard, and fragmented.

The aspects of psychological rehabilitation of military personnel have been highlighted in a range of works. For example, general approaches to organising the rehabilitation process are presented in the works of L. O. Vakulenko and I. R. Misula [5], T. A. Dobrovolska and E. Medvedeva [6], M. B. Frolov [7], etc. The psychological factors of the impact of combat operations on the condition of personnel have been analysed in the studies of Ukrainian scientists including O. A. Blinov [8], O. V. Boyko et al. [9], E. Yu. Litvinovskiy et al. [10] etc. Various aspects of rehabilitation work with servicemen and servicewomen are studied by national and foreign researchers, in particular L. G. Calhoun and R. G. Tedeschi [11], D. P. Hall [12], D. Kishbaugh et al. [13], C. M. Williams and T. Williams [14], and others.

The relevance of the problem in question, the insufficient level of its study in social and pedagogical theory and practice, and the need to overcome the identified contradictions led to the choice of the topic “Psychological rehabilitation of combatants in Ukraine from 2014 to 2021”. The aim of this study is to analyse the provision and conduct of psychological rehabilitation of combatants in Ukraine from 2014 to 2021. Thus, the object of the study is the process of psychological rehabilitation of combatants.

## **MATERIALS AND METHODS**

Philosophical and general scientific research methods were used in the course of the research. Philosophical methods made it possible to qualitatively determine changes in the object of research and record its dynamics. The article analysed the process of psychological rehabilitation of combatants in Ukraine from 2014 to 2021.

Among the general scientific methods of research, theoretical and empirical methods can be distinguished. For the purposes of this article, methods such as analysis, generalisation, classification, and synthesis were used from the first category. The methods of analysis and generalisation underpin the analytical method of research. An analysis is a kind of logical technique for defining a concept. It decomposes a concept into its component parts. This makes the definition more complete and clearer. In this study, “psychological rehabilitation”, “psychological state”, and “post-traumatic stress disorder” have been separated into their individual elements in order to achieve a complete definition and subdivision. The next leading method of research is the method of generalisation – the definition of a general concept in which essential, basic features of objects or phenomena are reflected, i.e., the establishment of their common properties and relations. At the same time, generalisation can be expressed in the allocation of any features of an object or phenomenon rather than essential ones. With the help of analysis and generalisation, the psychological and psychiatric problems in the Ukrainian army were considered and given. The method of synthesis – the connection of separate sides, parts of the object of research into a single whole, and the method of induction – the movement of thought from facts, from individual cases to the general position, were used in formulating the conclusions of the work.

Among the empirical level methods used in this paper are description and comparison. A description is a technique that captures the attributes of the object of study. This method was used to describe the procedure for obtaining psychological rehabilitation for a member of the armed forces, and to describe government projects and programmes to assist and support combatants. Comparison is a method that compares features that are common to two or more objects under study. These methods have been used to describe and compare the psychological portraits of military personnel during different periods of combat operations. Also, the bibliosemantic method was used to summarise the analysis

of the literature and the author's experimental data. The material for the study included the scientific literature of domestic and foreign researchers, Ukrainian regulatory documents and publications on the topic in question.

The study of the provision and implementation of psychological rehabilitation for combatants in Ukraine from 2014 to 2021 took place in the following stages:

- 1) the theoretical underpinning of the concept of psychological rehabilitation;
- 2) characterisation of post-traumatic stress disorder and its symptoms;
- 3) assessment of the psychological state of combatants in Ukraine;
- 4) an analysis of the psychological profile of ATO/JFO (Joint Forces Operation) veterans;
- 5) identifying psychological and psychiatric problems in the Ukrainian army;
- 6) a review of methods and procedures for psychological rehabilitation of combatants in Ukraine from 2014 to 2021;
- 7) consideration of state programmes and projects to support ATO/JFO veterans.

## **RESULTS**

### **Psychological rehabilitation of armed forces personnel**

War has many consequences. Everyone is aware of its economic, political, and social consequences, but few understand the psychological state of combatants during and after the war. Not many of them can return to civilian life without major problems, which is why most of them need specialist assistance. Psychological support is a particularly important component in the psychological support of combat troops. Simply put, psychological assistance is a complex of medical, organisational, and psychological measures, ensuring that the combatants overcome the psychotraumatic circumstances in combat situations, maintain and restore their fighting ability and mental health [15]. It is common knowledge that armed forces personnel who have experienced varying degrees of psychological trauma require different levels of psychological support. Therefore, it is common to distinguish two elements of support that are interrelated [16]:

- 1) psychological support;
- 2) psychological rehabilitation.

Psychological support is aimed at actualising existing psychological resources and building supporting psychological resources to ensure that soldiers overcome the signs of combat distress and are active on the battlefield. In the preventive direction, it is provided to all combat participants, it is also applied as a means of psychological correction for a person with signs of combat distress [17]. Psychological rehabilitation refers to a range of specific activities and interventions that are designed to provide psychological care/rehabilitation, social adaptation, and the normalisation of the psychological state of a serviceman. The following objectives of psychological rehabilitation for combatants can therefore be identified:

- 1) identification and diagnosis of mental health problems in servicemen and servicewomen;

- 2) sorting soldiers according to their level of psychological trauma;
- 3) evacuating traumatised soldiers from the battlefield;
- 4) restoration of impaired (lost) mental functions;
- 5) correcting the self-awareness, self-esteem, and well-being of service personnel who have suffered mental health problems;
- 6) preventing survivors from developing chronic and delayed forms of stress;
- 7) developing effective patterns of behaviour in different situations and skills for self-regulation of mental states in those who have been exposed to combat stress;
- 8) the rapid return of soldiers to active duty [18].

Psychological support for the recovery period includes

- 1) psychological warning to personnel about possible negative psychological complications of combat operations and the possibilities for overcoming and treating them;
- 2) mental health screening/diagnosis of combatants who are in the risk group;
- 3) psychological counselling for the soldiers on psychological difficulties that have arisen during the recovery/peace adaptation period;
- 4) psychological and psychosocial support for combatants who felt difficulties during the recovery period;
- 5) the use of special psychological techniques aimed at accelerating recovery processes in the military [15].

Psychological assistance to ATO servicemen and servicewomen should contribute to the successful adaptation and socialisation of a combatant to peaceful living conditions. The main directions of psychological assistance are as follows:

- 1) diagnostics of the psychosocial syndrome;
- 2) psychological counselling;
- 3) psychocorrectional work;
- 4) training self-regulation skills;
- 5) work with thought patterns in relaxed states;
- 6) psychosocial training for adaptability improvement;
- 7) defining a life perspective.

### **What is PTSD and what are its symptoms?**

Post-traumatic stress disorder in the military appears as a reaction to situations that were threatening or catastrophic in nature. Simply put, situations that were life-threatening and could lead to the soldier's death. Because of the state of shock, soldiers may carry out bad, sometimes crazy actions. The first signs of post-traumatic stress disorder are more similar to standard depression. These signs include constant anxiety, heightened sensitivity to other events that are the same as the stress experienced, irritability, intrusive vivid memories, bad dreams, and so on. In addition, such signs can be also included as increased blood pressure, palpitations, reduced concentration, outbursts of anger, etc.[19].

The most common symptoms of PTSD include suicidal tendencies, fear of attack, mental instability, aggression towards the state and other social institutions,

outbursts of increased aggression, etc. [20]. According to official data as of 2014, about 15.000 Ukrainian military personnel served in the ATO zone. Psychiatrists estimate that 20% of them are diagnosed with chronic post-traumatic stress disorder, which has already been called "ATO syndrome" [19].

The psyche of soldiers, like that of any individual, is extremely dynamic. A mental state is a relatively stable level of mental activity that manifests itself in increased or decreased activity of the individual. In a combat environment, the psyche of a soldier is subject to a great variety of influences. Some of them contribute to the recruitment and concentration of physical and mental abilities of the person, the improvement of such mental states as concentration, confidence, determination, and combat activity. Others, on the contrary, disrupt combat activity, block access to the reserves of the organism, promote the formation and functioning of such mental states as fear, terror, timidity, doom, distraction, doubt, uncertainty, passivity, etc. Therefore, according to the nature of their impact on combat activity, there are the following mental states of soldiers:

- 1) stenic(positive) mental states contribute to the performance of the task. These include confidence, cheerfulness, elation, excitement, enthusiasm, readiness for action, etc.;
- 2) asthenic (negative) mental states make it difficult to perform the task at hand. These can include fatigue, tension, indifference, despair, fear, doubt, depression, fatigue, dread, fear, uncertainty, etc. [21].

The following is a closer look at the main mental states of armed forces personnel, which have their own characteristics in a combat environment:

1. A state of combat readiness is a short-lived state that arises under the influence of powerful social stimuli on the mind of the soldier. These stimuli directly affect the evaluation of the soldier's internal psychological resources and provoke certain activities.
2. A state of engagement that reveals itself in the form of internal and external manifestations. It is conditioned by a number of indicators, e.g., the extent to which the combatant has been tasked by the commander-in-chief; the extent to which the combatant is anxious about the task; the degree of mental, physical, moral, and psychological effort required; the duration of persistence in the circumstances of the combat situation, and some others.
3. A state of pre-combat passivity is a condition that often occurs when nervous excitement processes become vulnerable, i.e., when soldiers are sedentary.
4. A state of elation is a momentary state that arises due to the influence of powerful sociogenic stimuli on the soldier's mind, which, in turn, provoke them to mobilise internal energy and psychological reserves.
5. A state of decline is a condition that is caused by a severe decrease in volitional and mental processes, often occurring when there is a decrease in activity levels.
6. A state of tension is almost always present in military personnel in extreme situations and has a powerful effect on their performance.



7. A state of focus is a state that results from the concentration of activity of a soldier on a particular issue, the successful resolution of which affects his or her life, the success of the combat mission.
8. A distracted state is a “general decline in attention”. This condition is accompanied by a “fixation” of the psyche on one idea, question, or task only.
9. The state of pre-fight “fever” is a complex formation that accumulates components and states of mental tension, anxiety, and restlessness [21].

In their work, S. V. Abramov et al. conducted a study on psychological portrait and stress-associated disorders using Minnesota Multiphasic Personality Inventory (MMPI) techniques, Spielberger-Hanin anxiety scales, Beck depression, posttraumatic stress disorder (CES), traumatic stress questionnaire for diagnosis of psychological consequences, etc. [22]. Based on this work, it can be stated that following a comprehensive clinical psychological examination of 147 servicemen, 71% of soldiers had excessive situational anxiety, a need for group support, and a decreased ability to control their emotions, suspiciousness, and wariness. Somatisation of anxiety (53%) and mood swings (61%) were observed in the personality structure, rising even to the level of pathology. The common symptoms of stress-related disorders were depression (29%), lack of interest in anything (17%), recurrent suicidal thoughts (27%), ability to cry easily (21%), apathy (34%), decreased activity (34%), pessimism (39%), and feelings of depression (45%). In the structure of mental processes, conversion defence reactions were noted in 34% of the soldiers and manifested with symptoms that had no physiological basis in the clinical medical examination. The displacement mechanism (striving to forget) of a trauma, contusion, or war event led to intrapsychic tension and an increase in unpleasant manifestations (42%). The examination revealed tendencies towards aggression in 40% of those examined; anxiety in 33%; positive emotions in 27%; defence of detection in 27%; alienation in 13%; sociability in 73%; and orientation towards the future in 67%.

A significant psychoemotional characteristic was found to be a reduced threshold of sensitivity to societal influences. This implies that the state of the psychoemotional sphere in 70% of individuals requires psychological correction and accompaniment at all stages of the military service in and out of the army.

## **DISCUSSION**

### **Psychological and psychiatric problems in the Ukrainian army: statistics and facts**

Awareness of specifics of psychological activity and functioning of an individual's psyche in difficult, extreme conditions is significantly necessary when investigating offences in the military sphere, identifying the causes and circumstances of all kinds of non-combat losses. In 2017, the Ministry of Defence published a scientific manual entitled “Psychological work with soldiers participating in the ATO during the recovery phase”.

At first glance, it might seem that the psychological state of soldiers is affected by their participation in active hostilities, but this is not entirely true. The psychological state of the military is affected not only by incidents on the battlefield but also in the back/in the military unit. Between 2014 and September 2018, the Chief Military Prosecutor's Office received reports of more than 2.700 non-combat casualties among military personnel from military authorities. Among them are suicides – 615 cases, murders – 228 [23]. In addition, the horror stories that end in death or severe beatings by fellow soldiers are horrifying. There are many such examples. Based on materials of criminal proceedings, mental phenomena such as disorganisation of behaviour and social functioning, decreased self-control, inadequate perception of the negative attitude of others, unrestrained reactions, impulsiveness, and excessive irritability are emphasised in the behaviour of individuals who were under combatants' stress. When military personnel leave the armed forces, there is a discord between unmet needs and the constraints of society. In such situations, depression, which is reinforced by groundless self-blaming, a "take it out" replacement reaction, aggression and violence to overcome any obstacles are extremely common psychoemotional reactions. All of this can later develop into suicide attempts. This also applies to the emergence of mass disorder and social conflicts.

In 2017, 26% of warriors showed signs of post-traumatic stress disorder [24]. In 2020, up to 30% of former military personnel will suffer from post-traumatic stress disorder [25]. Ksenia Voznitsyna is the chief physician of the State Institution Hospital for War Veterans "Forest meadow" of the Ministry of Health of Ukraine. She was interviewed by ASPI on the subject of psychological rehabilitation of ATO veterans. According to her out of 380.000 combat veterans, 60% of them need psychological help/rehabilitation and some need psychiatric care. Unfortunately, it was noted that Ukraine lacks statistics on the psychological state of the military, who often have "a range of psychological illnesses". All of them take place against a background of aggression, asocialisation, inability to establish family and work relationships, unemployment, addictions, and so on. Interestingly, Ksenia Voznitsyna has even created a separate term "mental health triangle", which includes psychotraumas, post-conflict syndrome, and addiction. However, earlier in 2017, the chief psychiatrist of the Ukrainian Ministry of Defence, Oleg Druz, was stripped of his post for calling 93% of ATO veterans dangerous and requiring treatment [24]. But according to experts, in 93% of offences committed by combatants, their unlawful actions were associated with aggression, which was accompanied by inadequacy, temper tantrums, and unpredictability using automated combat skills. Most worryingly, this type of post-traumatic stress disorder has a rather long-term, cumulative nature. In the mind of the person in such a condition, there is a devaluation of own life and the life of another, the fear of death weakens, and personal responsibility for consequences of the actions committed is not felt. The minimum duration of the manifestation of post-traumatic stress disorders in combatants is between one and six months [23].



### **Psychological rehabilitation of combatants in Ukraine**

One in four soldiers who have returned from the ATO zone to civilian life needs psychological help. When a soldier returns home, he or she finds himself in a completely different world without gunfire, explosions, or premature death. A. G. Karayani and I. V. Syromyatnikov explain in their book “Applied Military Psychology” that it is psychological rehabilitation that contains a wide range of goals, which are reflected in the key tasks of psychological aid to combatants [16]. In the first place these are:

- 1) providing assistance in establishing constructive relationships with referent individuals and groups;
- 2) harmonisation of the self-image of war veterans with their social and personal situation (injury, disability, etc.);
- 3) the resumption of impaired (lost) mental functions;
- 4) normalising the mental state [26].

Thus, the task of psychological rehabilitation is to restore mental health and highly effective social behaviour in the military. A holistic approach should be used in the rehabilitation of Ukrainian soldiers. The most natural methods of coping with illness and disorder are:

1. Art therapy through engaging in art. For example, drawing, listening to music, etc. There are now a significant number of types of art therapy [27].
2. Hippotherapy, which consists of horse riding, as it has a positive effect in increasing psychological resilience, reducing manifestations of depression and anxiety, and increasing general levels of functioning [28].
3. Occupational therapy – the use of various occupational activities to treat physical and mental illnesses, one of the stages of rehabilitation. It is carried out through the targeted involvement of the patient in the work process [29].

Until 2018, veterans were rehabilitated by the AFU, the Ministry of Social Policy, the Ministry of Health, and other agencies. In the period between 2014 and 2017, over 13.000 soldiers underwent psychological rehabilitation, and another 15.000 received health resort treatment. Taking into consideration that more than 330.000 soldiers served in the war, only up to 3.6% of them received help [30]. Today, the Ministry of Veterans’ Affairs of Ukraine, which acts as the main body in the system of central executive authorities, is in charge of this issue. The Ministry is supposed to implement the state policy in the field of social protection of war veterans, persons who have rendered special services to the homeland, the injured participants of the Revolution of Dignity, family members of veterans, and persons covered by the Law of Ukraine on the Status of War Veterans and Guarantees of their Social Protection [31].

Returning to civilian life is not easy for many fighters. Many are learning to rebuild relationships with their loved ones. In 2017, the Cabinet of Ministers agreed on a procedure to provide psychological rehabilitation to combatants in the ATO [32]. By 2022, it was planned to open counselling centres that would specialise in psychological assistance, and it was also agreed to open modern psychological and medical rehabilitation centres, emphasising the importance

of creating hotlines, organising group support and, of course, improving the information on psychological health for combatants [30]. And so it happened: now on the website of the Centre for Assistance to ATO Participants and their Families one can find contact details of regional centres for assistance to ATO participants. In addition, since October 14, 2019, the Lifeline Ukraine hotline providing psychological assistance to ATO/JFO veterans and members of their families over the phone has started operating. Professional psychologists and trained veterans on a peer-to-peer basis provide urgent support to those in need 24/7. Lifeline's social advertisement on 7333 has increased significantly on TV and the Internet since March when quarantines were introduced [33].

Regarding rehabilitation centres for ATO soldiers, unfortunately, they are set up based on hospitals. Here patients can be treated and rehabilitated at the same time. The main goals of rehabilitation are to resume musculoskeletal activity after injuries and amputations, to maintain physical fitness, and to provide psychological assistance. Military psychologist Andriy Kozinchuk assessed the state-run rehabilitation centres in an interview and said that, unfortunately, they are not fully up to date: "I don't like the idea of creating rehabilitation centres based on hospitals. This is how we show the soldier: you are sick, we are society, and we will treat you. Instead, we should say: you have won the war, let's win the peace. This is much harder" [34].

The official website of the Ministry of Veterans' Affairs of Ukraine [35] provides information on the process of psychological rehabilitation. There one can see in detail who is eligible for psychological rehabilitation, where to apply for services, what is the procedure for receiving services, what is the term for providing psychological rehabilitation services, and so on. According to the information on the site, psychological rehabilitation services are provided free of charge. To receive them, it is necessary to apply with a free application form to the body of social protection of the population at the place of registration, or the place of actual residence. In terms of the procedure for receiving services, it can be noted that the combatant will be offered a list of entities (centres, organisations, etc.) that specialise in psychological rehabilitation. Soldiers must choose a suitable subject for themselves. After that, within one working day from the date of receipt of the documents, the application will be registered in the register and a decision will be made to conclude an agreement on psychological rehabilitation services with the service provider chosen by the service recipient. The district social protection body sends a request to the service recipient's chosen service recipient for readiness to provide psychological rehabilitation services, agrees on a date for the start of the service, and concludes an agreement on the provision of psychological rehabilitation services. After the selected facility (service provider) sends a written confirmation in which it states that it is ready to accept the patient, the dates are agreed upon. After this, the district social welfare body concludes a contract with the service provider and the service recipient in three copies (one for each party).

### **State assistance to ATO veterans from 2014 to 2022: projects, programmes, online resources, etc.**

Mental rehabilitation of ATO fighters takes place in different directions. In addition to the work of specialised centres, the state launches thematic projects and programmes, develops relevant online platforms, etc.

Many of the projects are unique to Ukraine. The work in peer groups is very popular, both in Ukraine and in other countries. There are a couple of such associations in Ukraine. The essence of psychological rehabilitation is that the soldiers go through all the stages together. At the same time, at each stage, they have the support and assistance of psychotherapists. These sessions are conducted in medium-sized groups of 15-20 people. The programme consists of 4 modules, i.e., 16 days of work over six months. After each module, a month and a half are offered to assimilate the information and test it in real life. Here is a brief introduction to the components of the modules:

1. During the first module, soldiers get the explanation of their physiology, in particular, what happens to their brain, nervous system, and body when they return to civilian life.
2. The second module focuses on finding internal resources: former military personnel are given the tools and motivation to build security outside of war, learning how to build security.
3. In the third module, there is an exploration of one's life story. The point is to talk to each other and to listen.
4. During the fourth module, the combatants, together with the trainers, make plans for 5 years and work out in detail what the former wants to do in the next 3 months [30].

Much military personnel have serious problems with employment upon their return to civilian life. Therefore, the Ministry of Veterans' Affairs of Ukraine launched a special project called "Cyber Defenders". As part of it, since May 2021, combat veterans were trained in professional development programmes in the field of cyber security. Thirty veterans participated in the project and were selected from 460 applications [36]. After completing the training, the veterans receive a nationally recognised certificate in cyber security. This enables former military personnel to take the CISCO Academy certification exam free of charge. After that, they will be assisted in finding a job in their new profession. The first stream has already been trained. According to Igor Bezkaravainyi, Minister of Veterans' Affairs, more training streams are planned.

In 2021, news about a modern, effective neurorehabilitation centre for ATO fighters with nervous system injuries and post-traumatic damage to the musculoskeletal system appeared in Ukraine. Anna Starostenko, deputy head of the Kyiv City State Administration, said that the centre will provide water treatment. According to Starochtenko, a ward with 14 double and 12 single rooms with private bathrooms and balconies for each room will be built at the centre. The treatment department itself is to be equipped with a swimming pool, gyms with training rehabilitation equipment, physical therapy, and massage rooms. In ad-

dition to this, Starostenko stressed that since the centre is designed for veterans with the nervous system and post-traumatic locomotor injuries, the premises will be equipped with ramps, lifts, and a transition between the units [37].

Since February 2021, the online system E-Veteran, a modern information and referral system designed specifically for war veterans, has been in operation in Ukraine, with information on psychological support services, sanatorium, and health resort treatment [38]. The website of the Ministry of Veterans' Affairs of Ukraine provides details of the resource [39]. For example, among the services there is information on sanatorium treatment, psychological rehabilitation, and professional adaptation; an electronic service, E-services, is under development. On the website one can also find:

- 1) 146 institutions in the registry of verified providers of psychological rehabilitation services;
- 2) 25 territorial units of the Ministry of Veterans' Affairs of Ukraine;
- 3) 52 establishments in the catalogue of health resort treatment providers;
- 4) 29 recommended institutions for the provision of vocational adaptation and training services;
- 5) 659 bodies ensuring the implementation of state policy in the field of social protection;
- 6) 3 services for which requests are accepted and followed up online [40].

The Ministry of Veterans' Affairs of Ukraine aims to highlight veteran sport as a separate activity. This is reported by the Ministry's press service [41]. Minister Yulia Laputina believes that it is time to break the stereotype that veterans can be perceived as a burden. She emphasises that the designation of veteran sports as a separate sport will boost the morale of former combatants. In addition, such status for veteran sports will make it possible to qualify for government funding. Today Ukraine is already selecting the national team for the "Warriors' Games", which will take place in the US from September 12 to September 22. They are open to ATO/JFO veterans who have been wounded or otherwise injured in a combat zone. A total of 40 veterans will be recruited for the national team. The Ukrainian team will take part for the first time while becoming the 8th participating country [42].

## **CONCLUSIONS**

Hence, the study carried out a theoretical summary of the problem of psychological rehabilitation and social adaptation of Ukrainian combatants from 2014 to 2021. The aim of this paper was to analyse key aspects of the psychological rehabilitation of combat participants. Before contextualising the research, the concept of psychological rehabilitation, its components and methods for carrying it out were analysed. This was followed by an analysis of the psychological states of Ukrainian servicemen and servicewomen. These included states of readiness, activity, passivity, elation, decline, tension, focus, distraction, and pre-combat "fever". Further, considering other research, the psychological portrait of participants in military actions of Ukraine was created which shows that the state of

psychoemotional sphere of 70% of soldiers needs psychological correction and support at all stages of military service and life out of it. This is confirmed by statistics because, in 2017, 26% of soldiers were found to have signs of the post-traumatic syndrome, and in 2020 up to 30% of former servicemen faced post-traumatic disorder.

Psychological and psychiatric problems in the Ukrainian army and statistics on suicides and murders both on the “front line” and in civilian life were examined and analysed to identify the root causes. In addition to the physical manifestations which include headaches, dizziness, and insomnia, there are also psychological components: aggression, anti-socialisation, inability to establish family and work relationships, unemployment. In addition to these problems, there are an infinite number of addictions. Further, the most common methods for psychological rehabilitation have been identified as art therapy, hippotherapy, and occupational therapy. In addition, there is the Ministry of Veterans Affairs in Ukraine, which website provides a lot of useful information, specialised psychological rehabilitation centres, a telephone support line, and other useful resources. There is also a range of state programmes to support combatants, such as the “Cyber Defenders” programme, the introduction of veterans’ sports, the operation of the Internet resource “E-Veteran”, etc. However, these actions are not enough, and Ukraine should improve the regulatory framework for psychological rehabilitation of the military, improve personnel, start keeping statistics on psychological disorders and problems of soldiers and veterans, etc.

Hence, the obtained results clearly proved that rehabilitation of only the physical state of patients is no longer relevant since without taking into consideration the psychological status of the individual, and their social adaptation, it is impossible to achieve the full functioning of the personality. Lack of adapted national algorithms of psychological aid rendering to ATO participants, post-traumatic stress disorder, and lack of qualified psychiatrists and psychologists with specialisation in military-tactical psychology, does not include the peculiarities of the present, which requires the creation of a high-quality individual program of rehabilitation of each soldier according to the principle “timeliness, comprehensiveness”. The system of psychological assistance and rehabilitation of ATO participants in terms of logistics and personnel should be considered a component of the national security of the state.

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