








ORIGINAL

Ensuring sustainable development through comprehensive psychological support and population rehabilitation

Garantizar el desarrollo sostenible mediante el apoyo psicológico integral y la rehabilitación de la población

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ABSTRACT

Introduction: the article addresses the issue of state policy aimed at comprehensive psychological support and rehabilitation of the population in the context of sustainable development.

Method: the research was conducted based on empirical experience of effective management decisions in Ukraine over the past three years of the Russian-Ukrainian war, using a comprehensive approach involving analysis, synthesis, descriptive, empirical (survey method), and structural methods.

Results: the study measured stress levels in different age categories before and after group psychological training sessions (duration - 2 months) to assess the effectiveness of group psychological support sessions for internally displaced persons using the PSM-25 Lemyr-Tessier-Fillion stress measurement methodology. The empirical study was conducted at the Resilience Centre (Ivano-Frankivsk) as a shelter for internally displaced persons during 2023-2024 and covered 120 people from various age groups of internally displaced persons. The results obtained from the PSM-25 Lemyr-Tessier-Fillion stress measurement method indicate significant effectiveness of group psychological training for all age groups. As statistics show, the high stress level of all respondents decreased by 7 %, and the low level by 6 %.

Conclusions: thus, 31 % of respondents reported a high-stress level after completing group training sessions, the lowest figure compared to the percentage of respondents with medium and low-stress levels. The highest indicator, 37 %, was observed in the adolescent age group (15-22 years), which is quite logical, as at this age, there is reduced capacity for self-regulation of emotional background.

Keywords: Global Crisis, Anthropogenic Factor; Mental Health; Mental Health Centre; Managerial Decision; Rehabilitation and Psychological Support of Military Personnel.

RESUMEN

Introducción: el artículo aborda la cuestión de la política estatal dirigida al apoyo psicológico integral y la rehabilitación de la población en el contexto del desarrollo sostenible.

Método: la investigación se llevó a cabo basándose en la experiencia empírica de las decisiones de gestión efectivas en Ucrania durante los últimos tres años de la guerra ruso-ucraniana, utilizando un enfoque integral que incluye métodos de análisis, síntesis, descriptivos, empíricos (método de encuesta) y estructurales.

Resultados: el estudio midió los niveles de estrés en diferentes categorías de edad antes y después de las sesiones de formación psicológica en grupo (duración - 2 meses) para evaluar la eficacia de las sesiones de apoyo psicológico en grupo para desplazados internos utilizando la metodología de medición del estrés PSM-25 Lemyr-Tessier-Fillion. El estudio empírico se llevó a cabo en el Centro de Resiliencia (Ivano-Frankivsk) como refugio para desplazados internos durante 2023-2024 y abarcó a 120 personas de diversos grupos de edad de desplazados internos. Los resultados obtenidos con el método de medición del estrés PSM-25 Lemyr-Tessier-Fillion indican una eficacia significativa del entrenamiento psicológico en grupo para todos los grupos de edad. Como muestran las estadísticas, el nivel alto de estrés de todos los encuestados disminuyó un 7 %, y el nivel bajo, un 6 %.

Conclusiones: así, el 31 % de los encuestados manifestó un nivel de estrés alto tras finalizar las sesiones de entrenamiento en grupo, la cifra más baja en comparación con el porcentaje de encuestados con niveles de estrés medio y bajo. El indicador más elevado, el 37 %, se observó en el grupo de edad de los adolescentes (15-22 años), lo cual es bastante lógico, ya que a esta edad existe una menor capacidad de autorregulación del trasfondo emocional.

Palabras clave: Crisis Mundial; Factor Antropogénico; Salud Mental; Centro de Salud Mental; Decisión de Gestión, Rehabilitación y Apoyo Psicológico del Personal Militar.

INTRODUCTION

The evolution from acknowledging risks to institutionalising sustainable development is progressing towards finding resources, methods, and models for addressing resource depletion, overcoming the effects of technological and anthropogenic factors, and preventing global crises and catastrophes. Conversations about sustainable development are often framed in the context of social and economic development. However, its impact on another critical aspect of our lives - mental health - is just as profound and merits separate academic exploration. As the world intensively grapples with climate collapses, resource depletion, the necessity for renewal, and environmental issues, the psychological consequences of these pressures on individuals and communities are becoming increasingly apparent. In this article, the authors aim to establish the complex relationship between sustainable development and mental health, exploring how psychological support for the population maintains our psychological well-being.

According to Policy Brief, issued by Mental Health Innovation Network in 2018, mental health is relevant to all the Sustainable Development Goals and is explicitly mentioned under Goal 3 ("Good Health and Well-Being").⁽¹⁾ Yet people living with mental illness are among those most likely to be excluded from development interventions, despite overwhelming evidence of the close links between mental health and virtually every major issue in development - from education and economic growth to conflict and climate change. Sustainable development cannot be achieved without the inclusion of mental health as a key global priority.⁽²⁾ In turn, to ensure that this well-being is sustainable, it is important not only to experience positive emotions but also to cope with and manage the negative and painful emotions of life.⁽³⁾

The development of modern society is a process of alternating stability and instability, in which balanced development and imbalances follow in a specific sequence according to the theory of cycles and wave-like movements, where social and natural upheavals replace periods of relative calm. In these conditions, resilience becomes a desirable mode of existence for the population. Recent scientific studies show sustainable behaviour and lifestyles are critical to mental health. Conversely, the stress and anxiety associated with the degradation of the environment highlight the risks to mental health associated with unsustainable practices. As we navigate sustainable development challenges, understanding its psychological aspects opens up new ways of creating a healthier and more resilient future for all.

This article aims to explore the ways and methods of providing psychological support to the population and conducting rehabilitation activities in the context of maintaining sustainable development. The research is based on the empirical experience of effective management decisions in Ukraine over the last three years of the Russian-Ukrainian war.

The following research objectives were set and addressed during the analysis:

- to define the concept of sustainable development and psychological support and rehabilitation as one of the critical factors of this development;
- to describe the main ways and methods of providing psychological assistance to the population and organising rehabilitation activities;

- to identify the main categories of the population that require priority psychological support;
- to investigate the specifics of contact and remote methods of providing psychological support to the population in crises, using the example of Ukrainian society during the full-scale Russian-Ukrainian war.

LITERATURE REVIEW

The issue of providing psychological support to the population became especially prominent after the COVID-19 pandemic, as individuals suffering from post-COVID syndrome required this kind of support.^(4,5) The second stage of this problem's activation was the full-scale Russian-Ukrainian war, which caused several acute psychological issues among different sections of the population and required urgent administrative decisions.

⁽⁶⁾ Psychological support was required for both internal migrants and emigrants to European countries, so the European social system also faced the challenge of maintaining and restoring mental health for individuals with trauma caused by loss.⁽⁷⁾ These social issues have prompted the actualisation of academic problems related to the training or retraining of psychologists who could work with such traumas.^(8,9,10) Most studies in this context focus on communicative aspects, particularly the formation of effective communication strategies and tactics for providing psychological support to the population.⁽¹¹⁾

The problems of psychological support and rehabilitation as factors in Ukraine's economic growth and critical elements of sustainable development are examined in the research of Bandura and Reynal.⁽¹²⁾ Researchers Barry et al.⁽¹³⁾ emphasise the creation of human resources for integration into existing healthcare, mental health, and development programmes and social policy in partnership with the health, social services, education, employment, and community sectors. This will positively impact the population's mental health, especially the most vulnerable groups, along with broad medical, social, and economic benefits for society. Cherneta et al.⁽¹⁴⁾ focused their research on contemporary social issues and their impact on the socio-psychological health of the community. Researcher Babii⁽¹⁵⁾ examines the problem of professional burnout, which, according to the scientists, has a gradual, cumulative nature. Its symptoms do not appear immediately, and often, the individual may be unable to detect and recognise them in time. The researcher also studied the problem of victimisation in psychology. According to scientists, victimised situations and behaviour are impossible without interpersonal dependency - a behavioural and relational disorder characterised by a fixation on others or on a specific person based on a strong need for a particular person or group of people.⁽¹⁶⁾

Ukraine's experience in providing psychological assistance to the population has been institutionalised through the Coordination Centre for Mental Health.⁽¹⁷⁾ According to WHO data, one in five (22 %) people who have lived through war or other conflict in the last 10 years will have depression, anxiety, post-traumatic stress disorder, bipolar disorder, or schizophrenia. Applying these estimates to Ukraine, the WHO expects that approximately 9,6 million people in Ukraine may suffer from mental health disorders.⁽¹⁸⁾ The mental health issue has been thoroughly analysed in WHO reports,⁽¹⁹⁾ and support and rehabilitation programmes have become part of European forward-looking social-psychological support programmes for the population.^(20,21) Researchers Saxena et al.⁽²²⁾ explored the main preventive methods for maintaining psychological well-being. Researchers Anderson et al.,⁽²³⁾ Jordans et al.,⁽²⁴⁾ Wei et al.⁽²⁵⁾ substantiated the need for creating effective services for the prevention and psychological support of children and adolescents during school periods, cognitive changes, and global upheavals.

In Ukraine, since the beginning of the full-scale invasion, several administrative and legislative decisions have been made to improve the psychological condition of the population, provide assistance, and ensure rehabilitation, as reflected in the following government decrees:

1. Order of the Cabinet of Ministers of Ukraine dated December 27, 2017, No. 1018-r "On Approval of the Concept for the Development of Mental Health Care in Ukraine for the Period until 2030".⁽²⁶⁾
2. Order of the Cabinet of Ministers of Ukraine dated October 6, 2021, No. 1215-r "On Approval of the Action Plan for 2021-2023 for the Implementation of the Concept for the Development of Mental Health Care in Ukraine for the Period until 2030".⁽²⁷⁾

Resolution of the Cabinet of Ministers of Ukraine dated May 7, 2022, No. 539 "On the Establishment of the Interagency Coordination Council on Mental Health Care and the Provision of Psychological Assistance to Persons Affected by the Armed Aggression of the Russian Federation against Ukraine."⁽²⁸⁾

METHOD

The following methods were used during the research:

- The method of analysis and synthesis - for conducting a critical review of scientific literature and the regulatory legal framework governing the provision of psychological support to the population;
- Descriptive method - for describing the factors of sustainable development;
- Empirical method - for analysing the psychological and social landscape of modern Ukrainian

society in the context of a full-scale war, mainly through the survey of 120 military personnel in the Lviv hospital in 2024;

- Structural method - for identifying the main groups of methods for providing psychological assistance to the population and for differentiating vulnerable categories of the population for prioritising psychological support;
- The method of generalisation - for forming the scientific and theoretical conclusions of the research.

The empirical research was conducted at the Centre of Resilience (Ivano-Frankivsk), which served as a shelter for internally displaced persons during 2023-2024. It included a centre for providing psychological assistance to people affected by military aggression. The survey and testing covered 120 internally displaced persons of various age groups. The sample included people in the youth age group (15-21 years) (30 individuals), respondents in the early adulthood period (21-40 years) (30 individuals), respondents in the middle adulthood period (40-60 years), and respondents in the late adulthood period (61+ years) (30 individuals). During the study, the PSM-25 Lemyr-Tessier-Fillion stress measurement scale was used. The empirical research applied theoretical methods such as data systematisation, interpretation, generalisation of results, sampling methods, and statistical data processing.

Structure of the training (duration 1.5-2 hours) is presented below.

The goal is to reduce stress, develop the ability to recognise and act in stressful situations, develop relaxation skills, form self-control skills, and communication skills.

I. Introductory part:

- Introductions.
- Statement of participants' expectations from the training.
- Introduction to the structure and rules of the training.
- Feedback.

II. The main part:

1. Theoretical block:

- Mini-lectures with elements of discussion and conversation on stress in psychology, sleep and rest hygiene, and leisure organisation.
- Survey of participants' opinions.
- Interactive presentations.
- Brainstorming sessions.
- Reflection and self-analysis.

2. Practical block:

- Work in groups to model and correct behavioural reactions (goals and topics are variable at each session: mastering the skills to control one's anger, preventing aggression, training confident behaviour, mastering empathy skills, developing resilience skills, training in adaptation to loss, preventing emotional burnout).
- Analysing stories and analysing situations (discussion of coping strategies and techniques for turning negative thoughts into positive ones based on the case method).
- Role-playing games.
- Staging.

3. Auxiliary exercises:

- Exercises to relieve muscle tension.
- Breathing exercises.
- Exercises to relieve psychological stress.

III. Final part:

- Summing up the results of the training.
- Relaxation.
- Procedures for completing the training.

RESULTS

The social criterion of sustainable development is the well-being of people living in a particular territory. This economically developed economy allows for the satisfaction of people's needs, the preservation of traditional historical and cultural values, and social and psychological security, ensuring a sense of safety and

social security guarantees. In the political sphere, stability is currently created by the authorities. Instability begins with social changes outside the established norms (laws, order). In modern science, stability is viewed as an indicator of the development of a complexly structured dynamic environment.

The stability of society as a living organism is created and organised by the actions of social actors, among whom the state plays a priority role, concentrating the primary resources and power in its hands. In a modern democratic society, the state stands alongside other actors: business structures, non-profit organisations, and various small, medium, and large social groups, coordinating their actions. The multiplicity of social actors, each acting according to their interests, needs, values, moods, and perceptions, makes it particularly problematic to form social equilibrium, which is a necessary outcome of sustainable development. Social equilibrium is achieved by balancing social statuses, wealth, poverty, and even development, ensured by the nation's social well-being growth and adherence to social justice in distributing resources and producing goods.

The path to sustainable development lies in each social actor fulfilling their role within their position, profession, or institution. Imbalances in fulfilling their functions lead to social disproportions, causing conflicts, crises, and stagnation, which may result in social upheaval or stagnation.

The new technological era introduces a new level of rationalisation, placing high demands on the functioning of the entire social organism in all its manifestations and at all levels, especially in political governance, which is integrative by definition and aimed at meeting public needs. However, as researchers note, a shift in the logic of domestic political development changes politics towards instability. Public political governance carried out through joint efforts of various levels of state institutions - central, regional, local communities, business structures, religious, and civil (public) organisations - takes particular significance. Additionally, a scientific approach to management activities and the formation of managerial culture among representatives of state and local governments are essential. Thus, effective governance is crucial for today's sustainable and progressive development.

For people who have survived a catastrophe, their value orientations change, motivational attitudes decrease, and they may develop a mindset focused on illness, often falsely, due to the psychology of the victim. They experience uncertainty, low self-esteem, and a sense of personal incapacity. For people who have experienced post-traumatic situations, there should be a unified system of psychological assistance that integrates various types of counselling and psychoprophylactic support in addition to psychologists' offices.

Psychological counselling should address both the everyday psychological difficulties and the issues and complaints of a neurotic nature, such as fears related to being in a traumatic situation. The ability to use self-help techniques is a mandatory element in traumatic situations. These skills are essential for psychologists who assist military personnel and civilians affected by military actions. To work with the population affected by the war, there should be a unified system for training specialist psychologists, enabling assistance from a unified methodological perspective. The consequences of a person's stay in a post-traumatic situation vary; some may be weakened, while others may be mobilised and strengthened.

After analysing the need for psychological support in Ukrainian society over the past three years, we can identify the following critical social groups with priority access to psychological assistance and rehabilitation:

1. Military personnel and their families;
2. Children and adolescents affected by military aggression;
3. Families of prisoners of war and missing persons;
4. Internally displaced persons.

Emergency psychological assistance is often needed for the individuals mentioned above, including psychotherapy (both individual and group), prevention of acute conditions, and enhancement of individual psychological resilience. Such psychological assistance should focus on addressing symptoms rather than syndromes. Additionally, psychological assistance should be provided in two main directions:

1. Preventive psychological support for the healthy population;
2. Psycho-prevention and psychotherapy for individuals with existing neuro-psychological disorders and urgent needs for emergency therapy.

After analysing the process of providing psychological assistance in Ukraine over the past three years, we can describe it in the following details: first, most people seeking such assistance have been under the influence of a traumatic situation for an extended period and are, therefore in an acute affective state; second, both group and individual work with individuals is equally important. Most people seeking psychological support are experiencing feelings of loss (loss of loved ones, home, social connections, jobs, hobbies), which significantly worsens the overall picture of traumatic stress and leads to a state of depression. Continuous stress exacerbates existing neuroses and psychoses, so it is essential to approach the rehabilitation issue comprehensively, especially if traumatic stress is closely intertwined with other psychological stressors or pre-existing neurotic disorders.

Overall, providing psychological assistance and rehabilitation to the population can be schematically

presented as a diagram demonstrating the logical sequence of actions and measures in this complex and long-term process (figure 1).

When providing psychological assistance to the population in crises, the following factors of extreme situations should be considered: suddenness, lack of prior experience, moral uncertainty, lack of control, losses, constant changes, and the proximity of death. In our opinion, psychological assistance to the population should be based on the following principles:

1. The principle of preparedness for destabilisation (continuous shelling, destruction of the energy system and frequent power outages, the possibility of losing loved ones);
2. The principle of prevention (it is always more appropriate to act ahead of a stressful situation than to neutralise the consequences of stressors afterwards);
3. The principle of implementing management decisions at the central and local council levels (implementing global and local programmes to improve mental health).

Children, especially during war, require exceptional psychological support. They are a particular group within the population that urgently needs special assistance in mass disasters, where, due to tragic circumstances, they are deprived of shelter and parental care.^(29,30)

When providing psychological support and rehabilitation to the population, remote and in-person express diagnostic methods are appropriate. Immersive observation in a post-disaster situation is a remote express diagnostic method. The psychologist should be near the people, helping to meet emerging needs situationally but not acting as an active party. The psychologist should maintain distance, avoid physical contact, and slowly observe the behaviour and condition of the victims. Maintaining this distance allows the psychologist to identify absolute deviations from normal behaviour across all age stages without causing additional trauma to children and adolescents.

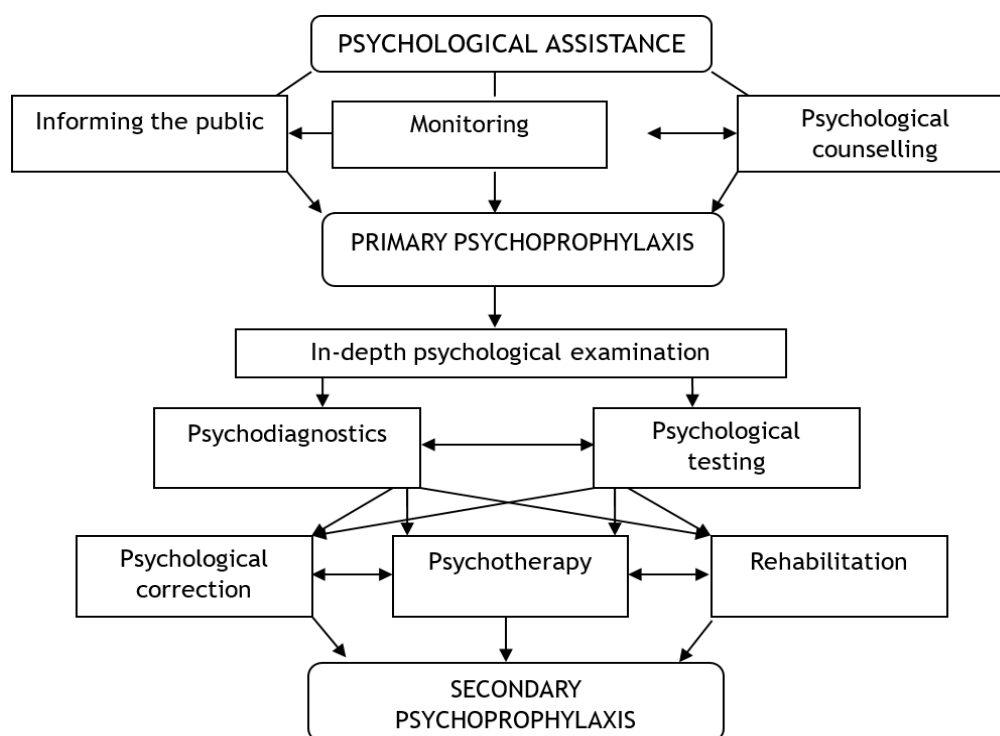


Figure 1. Schematisation of psychological assistance to the population

The in-person method involves engagement in communication through suggested activities. The ultimate goal is to engage in dialogue and collaborative activity. This method allows for more accurate identification of psychological deviations. Considerations include the form and stage of the stress response, individual characteristics of the child's social reactions and their position toward themselves and others, gender, age, and the damage caused by the disaster. It is appropriate to use techniques accepted in global psychology for engaging in communication (trust-based verbal contact, contact through joint activities, tactile contact).

The main methods of providing psychological assistance to the population during wartime conditions are as follows:

1. Prevention of acute mental states through group and individual consultations at Resilience Centers,

through the 24/7 psychological support service “Zaporuka”, and the online platform “Tell Me”;

2. Social advertising in the media of the national professional hotline for suicide prevention and mental health support, “Lifeline Ukraine”;
3. Building an effective social policy, for example, reintegrating ex-military personnel and veterans into society through retraining at regional employment centres;
4. Training and retraining of professional psychologists to work with collective trauma experienced by the population during the war.

An empirical study was conducted at the Resilience Center (Ivano-Frankivsk) as a shelter for internally displaced persons during 2023-2024, which includes a centre for providing psychological assistance to people affected by military aggression. The survey and testing covered 120 internally displaced persons from various age categories. The sample included 30 youth aged 15-21, 30 respondents in the early adulthood period (22-40 years), 30 respondents in the middle adulthood period (41-60 years), and 30 respondents in the late adulthood period (over 61 years).

Each respondent attended both group psychological rehabilitation training and individual consultations. At the beginning of the empirical study, the need for psychological assistance and the types of psychological support prioritised by the respondents were identified. In response to the question “Which types of psychological support are most effective for you?”, 48 % of respondents indicated the effectiveness of individual consultations with a psychologist, 22 % noted group sessions with a psychologist, 21 % saw psychological support in family support, and only 9 % did not feel the need for psychological assistance (figure 2).

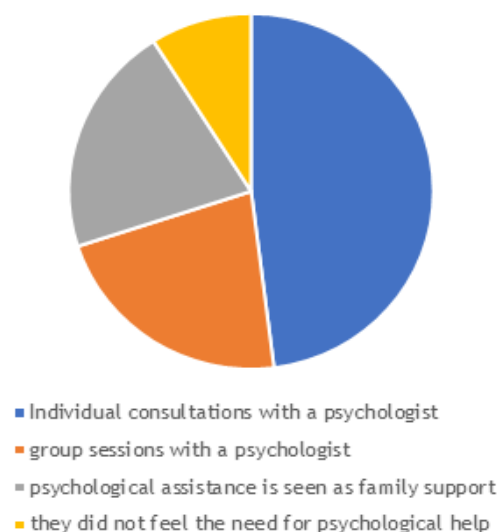


Figure 2. Results of a survey of internally displaced persons on the most effective types of psychological support

The next step in the empirical study was to measure the stress level in different age groups before and after group psychological training (2 months, 8 sessions) to determine the effectiveness of group psychological assistance sessions for internally displaced persons. For this purpose, the PSM-25 Lemyr-Tessier-Fillion stress measurement tool was used (annex 1), table 1 presents the stress level (PSM-25) before the start of group psychological training.

Level / respondents	High level of stress	Average level of stress	Low level of stress
All respondents	37	33	30
Respondents aged 15-21 years	42	31	27
Respondents aged 22-40 years	38	28	34
Respondents aged 41-60 years	30	42	28
Respondents aged 61 and over	39	31	30

Table 2. Stress level (PSM-25 scale) (%) after group psychological training (3 months)

Level / respondents	High level of stress	Average level of stress	Low level of stress
All respondents	31	33	36
Respondents aged 15-21 years	37	38	25
Respondents aged 22-40 years	28	32	40
Respondents aged 41-60 years	26	35	39
Respondents aged 61 and over	34	25	41

The results obtained using the PSM-25 Lemyr-Tessier-Fillion stress measurement methodology indicate the significant effectiveness of group psychological training for all age groups. As the statistics show, the high-stress level of all respondents decreased by 7 %, and the low-stress level by 6 %. Only the average stress level remained unchanged, which suggests that group psychological training for internally displaced persons affected by the war has the most significant impact on reducing high and low levels of stress. Regarding age groups, the highest stress level before the training was observed in two age categories: respondents aged 15-21 (41 %) and respondents over 60 (39 %). The most excellent effectiveness of group psychological training was demonstrated in the 22-40 age group (-10 %).

Overall, after the group psychological training for internally displaced persons, 36 % of respondents exhibited low stress levels, with the highest percentage in the 22-40 age group, indicating a positive dynamic in this category. Respondents with low stress levels after forced migration felt confident, had faith in their abilities and positive changes in the future, and maintained strong confidence in their ability to overcome all the challenges of war. They were oriented toward an optimistic scenario of events, demonstrating positivity, optimism, and an active life position.

The average stress level was characteristic of 33 % of respondents, with the highest percentage in the 15-22 age group (38 %) and the lowest in the over-61 age group (25 %). These individuals exhibited heightened anxiety, a strong sense of responsibility, an overly serious attitude toward life, fear of failure, and worry, oriented toward the worst-case scenario. However, they retained the ability to realistically assess the situation, which often allowed them to reduce anxiety and tension. They had sufficient potential for adaptation to adverse situations and internal resources to lower their emotional state independently. Respondents with moderate stress levels could reframe the relocation situation, initially perceived as destabilising, and independently find ways to overcome it.

31 % of respondents exhibited high stress levels after undergoing group training, the lowest percentage compared to respondents with moderate and low stress levels. These respondents' psychological state was accompanied by fear, lack of self-confidence, an inability to understand the dynamic nature of the situation, and a decrease in life energy spent on constant worry and difficulty in adapting. At the same time, the stressful situation, perceived as a problem, could not be resolved due to high levels of neuro-psychological tension, which could lead to emotional burnout and subsequent personality destruction. The highest percentage (37 %) was observed in the youth age group (15-22 years), which is quite logical since this age group tends to struggle with reduced capacity for emotional self-regulation.

DISCUSSION

We agree with the position of researchers Tsybuliak et al.⁽³¹⁾ regarding the importance of psychological assistance for internally displaced persons who have experienced deep traumas due to the loss of their homes, identities, contacts. This has intensified the building of invisible internal borders within the country itself and increased discrepancies, contributing to heightened levels of anxiety, depression, and post-traumatic stress disorder. To overcome this fear and alienation, it is necessary to engage specialists who are knowledgeable and experienced in dealing with such psychological traumas. We fully agree that this should become one of the priority principles of state policy in the current conditions for Ukrainian society. One such initiative has been the creation of resilience centres. However, these centres must focus on providing emergency psychological support and work toward long-term recovery, social cohesion, and fostering resilience. Only by understanding the impact of displacement on mental health and implementing comprehensive support strategies can Ukraine better navigate the long path to recovery and national unity.

In our view, a positive public initiative has been the development of the "Target Model of the Mental Health and Psychosocial Support System", developed within the framework of the All-Ukrainian Mental Health Programme, launched by Olena Zelenska. This initiative has promoted psychological awareness through the All-Ukrainian communication campaign "HOW ARE YOU?" in cooperation with the professional community of psychologists and volunteers. The implementation of this programme is centrally ensured by the Coordination

Center for Mental Health under the Cabinet of Ministers of Ukraine, with expert partnership and support from WHO. The creation of this target model was driven by the need to define a long-term approach and a unified vision for changes in state policy: the adoption of a mental health law involving a wide range of ministries, updating the roles of ministries in regulatory documents governing the activities of the government; and supporting mental health initiatives and programmes with an understanding of their indirect impact on the economy and the country's resilience.

In the modern conditions of the Ukrainian reality, it is important to form and implement a long-term programme of rehabilitation and mental support of the military. We believe that this programme should have a legislative basis and a scientifically based system for restoring the mental health of military personnel. It is clear that such work should be comprehensive, i.e. aimed both at the military man himself and his family members, as well as at forming a separate image place of the military man in Ukrainian society. This problem requires further development in scientific research.

CONCLUSION

Thus, based on the above, we can conclude that several practical decisions have been made in Ukraine during 2022-2024 to support the mental well-being of the population and sustainable development. In particular, a unified system of psychological assistance has been created, combining various types of consultative and psycho-preventive support. Mental health centres have been opened in every region, where psychological consultations are oriented both toward the psychological difficulties of everyday life and the problems and complaints of a neurotic nature in various segments of the population. Priority social categories for receiving primary psychological assistance and rehabilitation include children and adolescents affected by military aggression, military personnel and their families, internally displaced persons, military personnel who have returned from captivity, and the families of deceased or missing military personnel as the most psychologically vulnerable categories of the population.

In providing psychological support and rehabilitation to the population, it is appropriate to use both remote and face-to-face methods of express diagnosis. Psychological support for the population is multi-faceted, as it is carried out as public policy management within the competence of various levels of government institutions: central, regional, local communities, business structures, religious, and civil (community) organisations. The main ways of providing psychological assistance to the population in wartime conditions are as follows: prevention of acute mental states through group and individual consultations, social advertising in the media of the national professional hotline for suicide prevention and mental health support "Lifeline Ukraine"; building an effective social policy, for example, the reintegration of former military personnel and veterans into society through retraining at regional employment centres, and the training and retraining of professional psychologists to work with collective trauma experienced by the population during the war.

The stress level results measured using the PSM-25 Lemyr-Tessier-Fillion stress measurement method indicate the significant effectiveness of group psychological training for all age groups. Firstly, the high stress level of all respondents decreased by 7 %, and the low level by 6 %. Secondly, only the average stress level remained unchanged, which suggests that group psychological training for internally displaced persons affected by the war has the most significant impact on reducing high and low levels of stress. Thirdly, 31 % of respondents exhibited high stress levels after completing group training, the lowest percentage compared to the number of respondents with average and low stress levels. The highest percentage (37 %) is observed in the youth age category (15-22 years), which is quite logical, as this age group faces a reduced ability for emotional self-regulation.

Prospects for further research include exploring effective psychological practices for overcoming long-term stress in wartime conditions differentiated by age and belonging to a particular social group.

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