



ORIGINAL RESEARCH

Program of Psychological Rehabilitation of the National Guard of Ukraine Military Personnel Participated in Combat Actions

Author's Contribution:

- A – Study design;
- B – Data collection;
- C – Statistical analysis;
- D – Data interpretation;
- E – Manuscript preparation;
- F – Literature search;
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Abstract

Background and Aim of Study:

Combat actions that have taken place over the past four years in eastern Ukraine have a negative impact on the physical and mental health of the combatants. Under these conditions, the psyche of military personnel operates on the brink of its own resources, and prolonged participation in hostilities can lead to the development of post-traumatic stress disorder. Therefore, timely measures of prevention and control of combat stress, psychological rehabilitation of military personnel after engagement in combat will significantly reduce psychogenic injuries, prevent the emergence of mental disorders from combatants.

The aim of the study: to develop, scientific ally substantiate and to test a program of psychological rehabilitation of combatants.

Material and Methods:

To determine the effectiveness of the program of psychological rehabilitation at the beginning and at the end was used by authorial diagnostic of mental disorders methodology "Psychological Safety of Personality", as well as "The Questionnaire Evaluating the Effectiveness of Psychological Training" after completing the psychological training. In total, 70 military men of the National Guard of Ukraine from all regions of Ukraine participated in the program of Psychological rehabilitation, and the practical implementation and testing of the program took place in 2017.

Results:

The program of psychological rehabilitation of combatants based on psychological training for restoring the psychological safety of a military man's personality has been developed and scientifically substantiated. The practical implementation of the program of the psychological rehabilitation of the combatants proved its effectiveness: the results of the dynamics of the components of psychological safety of a person increased on average by 16%.

Conclusions:

Proposed program of psychological rehabilitation of combatants helped to improve the mental condition of military personnel, to restore psychological resources of a person and to prevent the development of mental disorders.

Keywords:

prevention of mental disorders, psychological rehabilitation psychological training, military personnel, combat actions, combatants.

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Introduction

Combat actions that has taken place in the east of Ukraine over the past four years has a negative impact on the physical and mental health of the combatants (Prykhodko, Kolesnichenko, Matsegora, Vorobyova, and Parkhomenko, 2014). Under these conditions, the psyche of the military personnel functions on the brink of their own capabilities, and continued participation in combat actions can cause chronic stress and the development of posttraumatic stress disorder (Pasichnik et al., 2011; Prykhodko, 2015).

The experience of accomplishing combat and service tasks in such circumstances has shown that professional and psychological preparedness of the military personnel is a necessary component of professional activity (Prykhodko, 2017). Thus, it is important that the military were able to learn techniques that allow to develop the necessary professionally important qualities to ensure a psychological safety of an individual (PSI), based on not only the physical survival of a military man in extreme conditions, but also to preserve the broader functioning of the individual, the specialist – the ability to act effectively and professionally (Prykhodko, 2014). Therefore, it is extremely important to implement practically into psychological support of the combat and service activity (CSA) the program for the formation, maintenance and preservation of psychological safety of an individual in the military. In addition, timely measures of prevention and control of combat stress, psychological rehabilitation of military personnel after engaging in hostilities will significantly reduce psychogenic injuries, prevent the emergence of mental disorders from combatants.

The conducted analysis of scientific researches and authors' experience of participation in psychological support of combat and service missions (CSM) under the combat conditions showed that psychological rehabilitation of the military refers to the systems and measures of psychological activities aimed at preserving and restoring the psychological safety of the individual, correction of positive mental states necessary to ensure a high level of combat capabilities of military personnel, exposed to psycho-traumatic stress factors, as well as the creation of favorable conditions for further successful execution of CSM.

The aim of the study: To develop, scientific ally substantiate and to test a program of psychological rehabilitation of combatants.

Material and methods

To determine the effectiveness of the psychological rehabilitation program at its beginning and after the end has been used the psychodiagnostic methodology "Diagnosis of Psychological Safety of an Individual" (the PSI Methodology) of an extreme activities expert (Prykhodko, 2014). It consists of 88 statements, which are united in 4 scales: "moral and communicative", "motivationally volitional", "value and semantic", "internal comfort". This PSI Methodology has allowed determining the individual structural components of the PSI by different scales and its integrative characteristic

– the PSI index, as well as their dynamics after the implementation of measures for the psychological rehabilitation of military service members. Upon its completion, the effectiveness of its conduct was also determined by means of the feedback form "Evaluation of the Effectiveness of Psychological Rehabilitation".

The cluster and correlation analyzes used (Student's t-criterion) have allowed to reveal the tightness and direction of interconnections between the indicators, reliable differences between them and increase the validity of the conclusions in the research of dynamics of the PSI in the military service members – participants of combat actions after the implementation of psychological rehabilitation measures.

Seventy military service members under the contract of the National Guard of Ukraine (NGU) from all regions of Ukraine with medium and lower levels of PSI took part in psychological rehabilitation program activities. During three rounds (April, May, and October) in 2017, the combatants experienced these activities in NGU Medical and Rehabilitation Center, Novi Sanzhary town.

Results

After the execution of the CSM in extreme (combat) conditions, based on the results of psychodiagnosis, all NGU military personnel – combatants were divided into four groups. The first group consisted of persons without significant deviations of mental condition, which maintained a high level of PSI, favorable family relationships, the ability of full-fledged social adaptation, labor and combat ability, able to continue to perform CSM qualitatively – these military service members did not need psychological rehabilitation measures. The second group included combatants with minor deviations in their duties and psychological state. They marked the lower (average) level of PSI by different scales, reduction of working capacity, difficulty in everyday life, but sufficient control over their own behavior was maintained with the help of mobilizing psychological and physical resources efforts. The third group consisted of military personnel who had an average and low level of PSI by separate scales, some signs of post-traumatic stress disorder (PTSD), acute or chronic somatic pathology in the stage of aggravation. They were observed to have certain violations of social and professional rehabilitation, as well as problems in their personal lives. Such military men from the second and third groups required psychological rehabilitation at the NGU Medical and Rehabilitation Center. The fourth group – the persons with acute signs of mental disadaptation and mental disorders that needed an extraordinary consultation of a psychiatrist and, if necessary, were hospitalized to a specialized psychiatric department for examination and treatment. Consequently, because of the psychodiagnosis carried out using the PSI Methodology, a group of NGU military personnel participated in combat actions in the number of 70 people (representatives of the second and third groups) who were in need of psychological rehabilitation.



A special program was developed for conducting psychological rehabilitation at the Scientific Research Center of NGU Combat and Service Activity. The purpose of the psychological rehabilitation program of the NGU combatants is to restore mental health, a sense of PSI and effective social behavior.

The main tasks of psychological rehabilitation program of combatants are as following:

- 1) psychological correction of violations of the emotional, personal and behavioral sphere of the military;
- 2) improvement of the state of mental health, restoration of levels of PSI, quality of life of military service members in order to increase their social adaptation in the family, military team and society;
- 3) prophylaxis of the early marginal disorders of the mental register (including manifestations of suicidal behavior) in the military;
- 4) training of self-regulation measures (removal of stress, anxiety, aggressiveness, control of dependent behavior, training of means of self-motivation);
- 5) formation of constructive skills of social interaction in society;
- 6) mobilization of psychological resources of military personnel in overcoming the consequences of wounds, injuries, disability, relief of pain, psychological training of victims of surgery and in the postoperative period (as necessary);
- 7) monitoring of the psychological state of military personnel participating in the psychological rehabilitation program activities.

The main types of activities included in the psychological rehabilitation program of military personnel are as follows:

1. Psychodiagnostics (monitoring of individual psychological peculiarities of personality before and after psychological rehabilitation).
2. Psychological lecture.
3. Practical training on self-regulatory means (control of anger, self-motivation, etc.).
4. Psychological training for the restoration of PSI in military personnel participating in combat actions.
5. Individual consultations with combatants, conducted simultaneously irrespective of the measures of the main psychological rehabilitation program.

Before conducting a psychological rehabilitation program of combatants, specialists are involved in the distribution of the following main functions:

- 1) Counselling Psychologist – for conducting an introductory lecture, psychodiagnosis, individual consultations and practical classes, which are aimed at forming skills of self-management and desensitization, including every day relaxation measures, except for those conducted by the psychologists-trainers.
- 2) Training Psychologist for training PSI recovery in military participating in combat actions.
- 3) Family Psychologist – for group and individual trainings, consultations.
- 4) Sexologist (sex therapist) – for the group and individual trainings, consultations.

Structure of the combatants' psychological rehabilitation program is presented in Table 1.

The main component of the psychological rehabilitation program of combatants is the psychological training for the PSI restoration. Purpose of the training: the restoration of PSI as a harmonious combination of a sense of security and ability to develop and self-fulfillment.

The tasks of the psychological training for the restoration of PSI are as following:

- restoration of the PSI feeling, feeling of safety, ability to protect themselves;
- transfer of responsibility for their own lives into their own hands, restoration of their ability to manage their own lives;
- using the traumatic situation to rethink the values of their own lives;
- the use of trauma energy for post-traumatic growth.

The psychological training is intended for military personnel participating in combat operations, which have an average and low level of PSI, signs of ASR and PTSD, disorders of rehabilitation that do not reach the clinical level. The number of participants is about 12-15 people. Possible involvement of co-coach, in addition to the main trainer. The trainer should be a male psychologist who has experience of participating in combat actions.

The psychological rehabilitation work involves the movement following the vector from the “disturbed sense of safety” to “normalizing the sense of personal safety”. This movement takes place under two main conditions: 1) the creation of a safe atmosphere, a safe environment; 2) the use of psychological techniques.

Conducting psychological training in the conditions of a Medical Rehabilitation Center meets both these conditions. The basis of the training is the developed model of the PSI (Prykhodko, 2014). It involves working with the four components that form the sensation of PSI as a harmonious state that combines a sense of safety and a desire for self-realization:

- 1) satisfaction with the situation of development of own “Me” – this component “Internal comfort” initiates movement from the change of environment or from the actualization of mechanisms of self-regulation;
- 2) “Value and semantic” component allows determining the vital priorities to overcome the traumatic situation, it implements the principle: “Everything can be experienced, if you know for what”;
- 3) “Motivational and volitional” component involves understanding of the own goals and opportunities for their achievement and, accordingly, harmonious redistribution of energy for the realization of really important things and not dispersal of forces on the secondary things (especially in conditions of danger);
- 4) “Moral and communicative” component means that following the rules of interaction adopted in the surrounding society promotes the formation of a safe social environment, reduces the probability of conflicts, creates an atmosphere of promoting the realization of the goals of the person, self-realization.

Table 1. Structure of the combatants' psychological rehabilitation program

Day of training	Group work	Individual work
1 st day	<p>1. Lecture (1.0 hour): "The Consequences of Mental Traumatism". The goal is to form conscious participation in psychological events. Provide overview of the types of consequences of trauma, clinical picture of acute stress reaction (ASR) and PTSD, the possibility of psycho correctional intervention. To promote awareness of members of their current condition, eliminating the halo of exclusivity existing psychological problems, establishing a connection between psychogenic factors, the emergence and persistence of the PTSD symptoms. To acquaint with the schedule of work of the Counselling Psychologist. Answer the questions.</p> <p>2. Psychological diagnostics (1.5 hours) (the Methodology "Diagnostics of PSI").</p> <p>3. Relaxation, exercises to improve sleep (exercise "Safe Place") (0.5 hours).</p>	Individual consultations on general topics
2 nd day	1. PSI recovery training in the military along with symptoms of PTSD (3.0 hours) (lesson No. 1). The purpose – acquaintance, definition of the individual situation of development, the state of well-being.	Individual consultations on general topics
3 ^d day	<p>1. Group self-regulating classes – learning ways to overcome stress and injury.</p> <p>2. Mastering the Aliyev Keys (Keys) technique.</p>	Individual consultations on general topics
4 th day	<p>1. Group lessons with a family psychologist (2.0 hours). Goal – improvement of readaptation to the family after a long separation and the formation of a motivation for consulting a Family Psychologist.</p> <p>2. Development of anger control means (0.5 hours).</p> <p>3. Relaxation, exercises to improve sleep, the Keys technique exercises (0.5 hours).</p>	<p>1. Individual consultations on general topics</p> <p>2. Family Psychologist consultations</p>
5 th day	<p>1. Group lesson (lecture) of a sexologist / sex therapist (2.5 hours). The goal is to determine the ways of solving typical sexual problems of military personnel having stress and being after a long separation from spouses, the formation of the motivation for consulting a sexologist / sex therapist.</p> <p>2. Relaxation, exercises to improve sleep, the Keys technique exercises (0.5 hours).</p>	<p>1. Individual consultations on general topics</p> <p>2. Consultations of sexologist / sex therapist</p>
6 th day	<p>1. Training for the restoration of the PSI in military service members having signs of PTSD (3 hours) (lesson No. 2). The purpose is to work with the value-semantic part of the PSI.</p>	Individual consultations on general topics
7 th day	<p>1. Group classes on self-regulation (2.5 hours) – work with losses.</p> <p>2. Relaxation, Keys technique exercise (0.5 hours).</p>	Individual consultations on general topics
8 th day	<p>1. Group self-regulating lessons (2.5 hours) – work with dependencies.</p> <p>2. Relaxation, Keys technique exercise (0.5 hours).</p>	Individual consultations on general topics
9 th day	Training for the restoration of the PSI in military personnel having signs of PTSD (lesson No. 3) (3.0 hours). The purpose is to work with the motivational-volitional part of the PSI.	Individual consultations on general topics
10 th day	<p>1. Group lessons with a Family Psychologist (2.5 hours). The goal is to improve rehabilitation for the family life after a long separation and to formulate a motivation for consulting a Family Psychologist.</p> <p>2. Relaxation, exercises to improve sleep, Keys technique exercise (0.5 hours).</p>	<p>1. Individual consultations on general topics</p> <p>2. Family Psychologist consultations</p>
11 th day	<p>1. Group lesson (lecture) of a sexologist / sexologist (2.5 hours). The goal is to identify ways to solve typical sexual problems of military service members having stress and being after a long separation from their spouses, and to motivate for consulting a sexologist / sex therapist.</p> <p>2. Relaxation, exercises to improve sleep, Keys technique exercise (0.5 hours).</p>	<p>1. Individual consultations on general topics</p> <p>2. Consultations of sexologist / sex therapist</p>
12 th day	<p>1. Group sessions on self-regulation (2.5 hours) – a means for self-motivation.</p> <p>2. Relaxation, Keys technique exercise (0.5 hours).</p>	Individual consultations on general topics
13 th day	<p>1. PSI recovery training in the military having symptoms of PTSD (lesson No. 4) (3.0 hours). The purpose is to work with the moral and communicative part of the PSI.</p>	Individual consultations on general topics
14 th day	<p>1. PSI recovery training in the military having symptoms of PTSD (last lesson No. 5 – drawing of future life paths in-group) (3.0 hours).</p> <p>2. Psychological diagnostics (1.0 hour) ("PSI Diagnostics" Methodology).</p>	Individual consultations on general topics



All components are interconnected and act as a single mechanism. Of course, the outer layer of the mechanism – “moral and communicative component” – is the most heavily used; it provides safety, beginning with common everyday situations of interaction. The central component is the “inner comfort” or the satisfaction with the situation of the development of its own “Me” – is actualized when a productive and safe life under the old “scheme” becomes impossible (most people are able to endure significant “inconveniences” for a long time before making a major change in their lives).

It should be noted that the peculiarity of working with military who have expressed signs of ASR and PTSD is that the leader (coach) or the participants do not interpret the feelings, statements of military men, which imparts special requirements to the stage of “reflection” – the discussion of exercises. When organizing classes it is necessary to avoid excessive activity (very shortly used exercises for “warm-up”, open confrontation), each session and complicated relaxation exercises are over. Classes have a relatively short duration of 3 hours (and not 6-8, as in the deep immersion training (Lefterov, 2008). In exercising the imagination, you must constantly monitor the course of what the participant has to imagine (the coach continuously guides the participant’s imagination by the verbal commands); it is not need to require closing eyes for those whose exercises are aimed at working with imagination (do not insist if some participants refuse to close their eyes). The trainer briefly announces the content of the presentation exercises so that participants can feel their control over the process. The trainer tells the content and meaning of the classes at the beginning of the psychological training and each lesson in an accessible, concise form. Such awareness reduces stress and increases the effectiveness of training (Lefterov, 2008).

The use of unusual for everyday activities of the military personnel of drawing during the training, work with tales, with cards, meditation is explained to participants as a means that allows faster development of new forms of behavior, views on problem solving, which allows to bypass acquired, habitual habits.

Exercises that under psychological training aimed at self-regulation in stress should relate to situations of insignificant or moderate severity (traumatism). If a participant considers that an exercise suits him for the self-regulation of heavier classes, he may use it during individual consultations under the supervision of a counseling psychologist who fully possesses all exercises that are mastered by the participants during the training.

In addition, the training is intensified by group lessons on the development of other methods of self-regulation, conducted by a counseling psychologist, and which correspond to the sequence of training sessions. Such a division allows to keep in mind of the participants the structure of the training and to understand better the various ways of self-regulation, which reinforces the individual approach and improves the assimilation of the material.

Group classes determine the direction of development, actualize the need for change, and promote awareness of the existence of problems and the need for assistance in overcoming them.

Individual consultations, which are conducted in parallel (simultaneously) with group sessions, are intended for more profound working out of problems, work with more intimate questions, which participants of the training for one reason or another cannot make during group discussion.

Psychological training is carried out in a relatively small room, with proper form, with good lighting (participants should have the opportunity to be arranged in the circle in such a way so that their back is protected by the walls of a room). The window must be relatively small or make it possible to provide distance from it (if the training participants avoid places near the window, then the coach takes that place). Chairs should be reliable (with a high back and no wheels), there should be no deaf cubes (uncontrolled for the sight of the space), shadows, extra furniture, etc.

During the training, the leader should determine the status of the participants visually, with the help of verbal self-descriptions and Luscher techniques. To remove negative states use relaxation exercises, “H.M. Aliyev Key”, “Safe place” and “Change of seasons” (see Tables 1, 2; including instructions for the current, not traumatic situation). The trainer should use active listening and support techniques. If available, participants of the training should discuss the issue of providing support to comrades who describe their traumatic experiences (it is necessary to voice support methods that are acceptable for this group).

The psychological training for the restoration of the PSI of military service members-participants of combat operations contains five classes for three hours each. The training rules are as follows: the group should not have complete confidentiality, so it is necessary to speak only about what they are ready to share; do not criticize; do not give advice; respect others; you can be angry with the words you hear at the training, but you will take from the training exactly that you need.

Simultaneously with the training in the organization of recreation of military men were held master classes on painting fingers, folk painting, pottery (work with clay), dancing, yoga, animal therapy (horseback riding).

The results of the psychodiagnosis carried out using the PSI Methodology before and after the activities of the psychological rehabilitation program of military service members-participants in combat operations are presented in Table 3.

As we can see from the given data, the indicators of PSI dynamics after the implementation of psychological rehabilitation measures are statistically significantly higher among military servicemen than on individual scales, as well as in general, according to the PSI index, on average they have improved by 16% (see Figure 1).

In addition, to assess the feedback on the effectiveness of the combatants’ psychological rehabilitation program activities, a questionnaire was developed and questioning had been performed (see Table 4).

Table 2. Structure of the program of psychological training to restore the psychological safety of the personality of the combatants.

Module name	The purpose of the lesson, the name of the exercise	Time
Psychodiagnosics of peculiarities of PSI of combatants		
Module 1	Lesson No. 1	3 hours
Correction of negative psychic reactions and states that arise during the performance of the CSM in extreme conditions, improvement of sleep quality, increase of the value of life.	<p>The purpose is to actualize the component of the PSI “internal comfort” as a satisfaction with the development of its own “Me”. Forming of an active position to overcome the danger situation, actualization of available means of self-regulation or the development of new ones, the need for which a person feels.</p> <p>A sequential implementation of the following exercises is previewed:</p> <ol style="list-style-type: none"> 1. “Acquaintance” – is aimed at identifying with the social group and understanding their own peculiarities. 2. “Life way” – is intended for awareness of the individual situation of development. 3. “Change of seasons” – is aimed at representing the traumatic situation in which participated the soldier, the presentation of the seasons and their successive changes (autumn, winter, spring, summer). 4. “Recommendation” – designed to find own strengths, training confidence in the situation of the public presentation, increase self-esteem. 	
Module 2	Lesson No. 2	3 hours
Development of value-semantic sphere in combatants.	<p>The purpose is to actualize the value-semantic component of the PSI.</p> <p>Awareness of the desire to achieve in their own lives, the guidelines for the sake of what it is worth living, the transfer of all the difficulties of military service, put their lives at risk. Definition, for which it is necessary to undergo psychological rehabilitation, to change the ways of behavior, which during the service became familiar, comfortable. Sequential exercise:</p> <ol style="list-style-type: none"> 1. “Understanding of Goals” – is intended to help understand the relationship between their own goals and daily activities, prioritizing priorities. 2. “Epitaph” – aimed at discussing and determining the life goals, values of the combatants. 3. “The meaning of life” – designed to withdraw from the subconscious goals, which soldiers seek. 	
Module 3	Lesson No. 3	3 hours
Increase of resistance to stress, formation of productive coping strategies, activation of professional motivation, acquisition of skills for setting real professional goals, their achievement, obtaining skills of self-regulation of behavior in extreme conditions.	<p>The purpose – actualization of the motivational and volitional component of the PSI. Forming of flexibility in military men's achievement of goals, redistribution of energy in favor of more important goals, training on the use of productive copings. Sequential exercise:</p> <ol style="list-style-type: none"> 1. “Good in bad” – designed to identify positive moments in negative events, an attempt to correct failure in terms of utility. 2. “Steps of Achievements” – aimed at identifying and correcting the purpose of life, further professional growth. 3. “Non-book problems” – is intended for studying the solution of life problems using the symbolic field. 	
Module 4	Lesson No. 4	3 hours
Improvement of the process of adaptation to the extreme conditions associated with performing of the CSM, the development of moral and communicative, volitional qualities.	<p>The purpose – actualization of the moral and communicative component of the PSI.</p> <p>Forming of conditions for self-realization through understanding the rules for organizing interaction in a social group reduces the conflict of behavior. As a result, people have the opportunity to spend mental energy on their own goals rather than overcoming conflicts. Sequential exercise:</p> <ol style="list-style-type: none"> 1. “Internal justification” – manifests the character of the creative representation of the combatant, stimulates the development of creativity and imagination, the ability to emotional (impulsive) perception, improvisation, observation, development of a sense of humor. 2. “Qualities that irritates in other people” – helps each participant of the training to understand why these or other qualities can annoy him. 3. “Plasticine” – improves communication, interaction with people, joint activities, reduces aggressiveness, and identifies leaders. 4. “Rules of Civil Life” – based on the 8 basic specific rules of survival and skills required in the battle, but which complicate the civil life of Pucelik (Pucelik and Mcbee, 2017): security; trust and definition of the enemy; devotion of the goal; decision-making; tactics of response; predictability and control; control of emotions; difficulty talking about the war. 	
Final lesson	Lesson No. 5	3 hours
Summarizing the training.	<p>The purpose is to update plans for the future of life.</p> <p>Forming of ideas for the future is a positive attitude towards your life, your loved ones, as well as your professional activities. Sequential exercise:</p> <ol style="list-style-type: none"> 1. Exercise “Map of the Future” – designed to determine the ways of personal development and aspirations in professional activities. 2. Exercise “Sharing drawing of the future” improves the correction of personal goals in life and activities, modeling human behavior in society. 	
Psychodiagnosics of the PSI dynamics of combatants		1 hour

Table 3. Indicators of PSI of combatants before and after the activities of the psychological rehabilitation program (in standard units).

Scales of the method “Diagnostics of psychological safety of an individual”	Study groups (n=70)		Significance of discrepancies	
	Before implementation	After implementation	t	p
Morally communicative	94.00 ± 14.39	99.62 ± 16.11	0.94	–
Motivational and volitional	106.85 ± 10.95	114.85 ± 14.53	1.71	0.10
Value and semantic	104.54 ± 13.05	113.77 ± 15.81	1.74	0.10
Internal comfort	103.15 ± 14.69	114.23 ± 13.71	2.14	0.05
PSI index	408.00 ± 41.70	440.46 ± 57.57	1.77	0.10

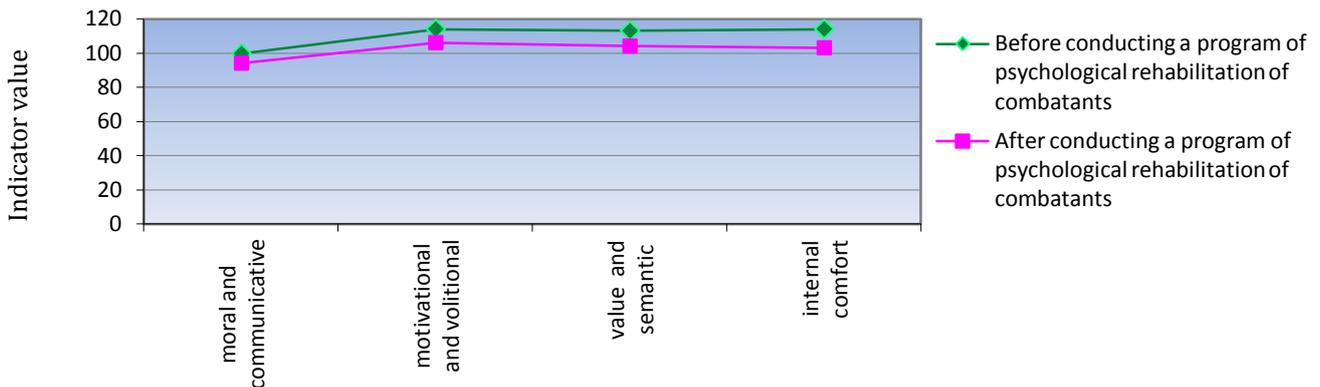


Figure 1. Dynamics of indicators of psychological safety of an individual of combatants because of the program of psychological rehabilitation.

Table 4. Profile “Evaluating the effectiveness of the psychological rehabilitation program”.

No.	Question	Scale of evaluation
1	How important for you were the program topics?	1 2 3 4 5 6 7 8 9 10
2	Did you know something new to yourself?	1 2 3 4 5 6 7 8 9 10
3	Will you be able to apply the acquired knowledge in practice?	1 2 3 4 5 6 7 8 9 10
4	Measure how much the program is provided with new information.	1 2 3 4 5 6 7 8 9 10
5	How consistent and logical was the material presented?	1 2 3 4 5 6 7 8 9 10
6	Evaluate the volume of the material outlined.	1 2 3 4 5 6 7 8 9 10
7	How comfortably did you feel yourself during the presentation of the material?	1 2 3 4 5 6 7 8 9 10
8	How difficult was it for you to perceive the material?	1 2 3 4 5 6 7 8 9 10
9	Evaluate the pace of material presentation.	1 2 3 4 5 6 7 8 9 10
10	How much are you satisfied with trainers?	1 2 3 4 5 6 7 8 9 10

Note. Instruction: “Dear participants of the psychological rehabilitation program! We ask you to answer the questionnaire. Your opinion about the events is very important for us. Your evaluations will help us to make our joint work more effective. All your thoughts will be taken into account when drawing up the program for its further use”.

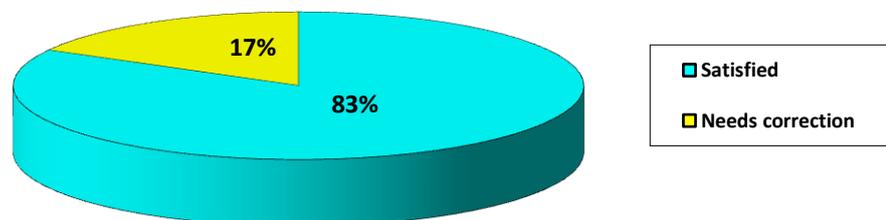


Figure 2. Satisfaction (subjective assessment) by carrying out measures for the psychological rehabilitation of combatants.

The results of the anonymous survey showed that 83% of participants in psychological rehabilitation were satisfied with the program, 17% of respondents expressed their wish for further correction (Figure 2).

Discussion

The problem of psychologic rehabilitation of the military service members participating in combat actions always was relevant in any country of the

world, where local military conflicts had taken place (Smith, Ryan, Wingard, Slymen, Sallis, and Kritz-Silverstein, 2008; Rona, Jones, Iversen, and Hull, 2009; Wittchen et al., 2012). It acquired special importance after the “Vietnam War”, in which US troops participated, as well as other military conflicts on the territory of Afghanistan and Iraq (Browne et al., 2007; Milliken, Auchterlonie, and Hoge, 2007; Rona, Jones, Sundin, Goodwin, Hull, Wessely, and, Fear, 2012; Sundin et al., 2014). According to American and British scientists, after the fighting ended, tens of thousands of veterans committed suicide; various forms of PTSD often began to appear in other combatants, many of which broke up families, various manifestations of addictive behavior appeared (alcoholism, drug addiction, etc.) (Rona, Jones, French, Hooper, and Wessely, 2004; Schnurr, Lunney, and Sengupta, 2004; Sareen, Cox, Afifi, Stein, Belik, Meadows, and Asmundson, 2007; Hunt, Wessely, Jones, Rona, and Greenberg, 2014). As the results of the conducted research showed, such effects began to arise in connection with the failure to conduct or poor-quality conduct of measures for psychological recovery and rehabilitation (Sundin, Fear, Iversen, Rona, and Wessely, 2010; Schulte-Herbruggen and Heinz, 2012). In connection with this, veterans of combat operations and active military personnel began to develop hidden and deployed mental disorders, in particular PTSD (Andrews, Brewin, Philpott, and Stewart, 2007; Brailey, Vasterling, Proctor, Constans, and Friedman, 2007; Brewin, Andrews, Hejdenberg, and Stewart, 2012; Marx et al., 2012). Following the development of appropriate psychological rehabilitation programs, foreign scientists point out that after their practical implementation, the percentage of people who experience significant personal psychological problems and mental disorders is significantly reduced (Solomon and Mikulincer, 2006; Sundin, Fear, Hull, Jones, Dandeker, and Hotopf, 2010).

Thus, timely development and implementation of the program of psychological rehabilitation of military personnel – participants in combat operations, veterans will be able to prevent the development of severe mental disorders (PTSD, depression) or significantly reduce their number, as well as improve the process of reapplication of combatants to a peaceful life.

Conclusions

The proposed program of psychological rehabilitation of military servicemen-combatants allows to restore emotional self-regulation of an individual and to improve the neutralization of aggressive manifestations, to create higher tolerance to others, to reduce the risk of maladaptation during extreme conditions, to increase neuro-psychological stability, to improve communicative qualities and control of consciousness over behavior.

As a result of the activities of the psychological rehabilitation program, not only personal and professional qualities of the military servicemen develop, but a well-differentiated professional image of the world is being developed; in the future it is possible to predict the events of one's own life; to avoid

unwanted situations for self-realization; to develop the socio-psychological environment according to their own plan and to play a leading role in relations with others.

After conducting a psychological training for restoration of the psychological security of an individual, military service members become more open to new experiences, new ways of interaction, they are not afraid of new tasks, difficult life situations. The constructed relationship with the surrounding environment will not only allow the use of external resources in extreme situations, but will also contribute to the continuous enrichment of the soldier's personality.

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