

Influence of stress factors on the psycho-emotional state of military personnel

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■ **Abstract.** The aim of the study was to investigate the levels of traumatic stress, anxiety and depression, and the impact of stress factors on the psycho-emotional state of military personnel, as well as to evaluate the effectiveness of a comprehensive psychocorrectional programme. The study was conducted on a sample of 50 assault troops, divided into an experimental group (25 individuals) and a control group (25 individuals). A repeated-measures experimental design was employed. The psychocorrection programme, which consisted of eight group training sessions (90 minutes each), was based on the systemic approach developed by I. Kotenev. The instruments used included I. Kotenev's "Traumatic Stress Questionnaire, the "Short AD-PTSD Scale" and the "Stress Factors" method. The results confirmed the high effectiveness of the programme: according to the "Short AD-PTSD Scale", in the experimental group the level of anxiety decreased by 42.9% (from 14.2 to 8.1 points), the level of depression decreased by 40.8% (from 12.5 to 7.4 points), and PTSD symptoms decreased by 42.3% (from 16.8 to 9.7 points). The total average score of affirmative responses indicating the presence of disturbances decreased from 5.28 to 1.78, which moved the majority of servicemen out of the risk zone. The overall level of stress load, determined using the "Stress Factors" method, decreased by almost 30% (from 4.16 to 2.98 points). The most noticeable reduction in psycho-emotional tension was recorded in the areas of personal-psychological and emotional-physiological reactions (a decrease of 33.3% and 31.9% respectively). Positive changes were also observed in internal resources: the subjective feeling of calmness and inner balance increased by 78.5%, social cohesion increased by 36.6%, and self-control improved by 31.0%. After completion of the programme, 82% of participants reported an improvement in sleep quality, and 76% reported increased concentration of attention. In the control group, which did not receive the intervention, no significant positive changes were observed. This demonstrates that natural adaptation is insufficient to overcome the consequences of combat stress. The programme significantly increases the adaptability of military personnel, stabilises their emotional state, and may be integrated into psychoprophylactic programmes within units of the Armed Forces of Ukraine

■ **Keywords:** psychocorrection; combat stress; post-traumatic stress disorder; anxiety; adaptability; systemic approach

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■ Introduction

Military activity, particularly within assault units, is characterised by a high level of risk, unpredictable situations, significant information overload, and a lack of time for recovery. These stress factors constantly affect the psycho-emotional state of personnel. In the modern world, the prevention and correction of combat stress has become critically important for maintaining the combat readiness of troops. The relevance of this study is substantiated by the presence of a high level of emotional tension, fear and internal resistance to service among military personnel who have recently completed basic training. Ignoring these symptoms may lead to the accumulation of stress reactions, emotional instability, exhaustion, and a sharp decline in combat capability (Verba *et al.*, 2017).

An analysis of recent studies and publications demonstrates that intensive military training, which includes the simulation of extreme combat situations (imitation of assault operations, explosions, gunfire and the modelling of life-threatening situations), is itself a powerful psychotraumatic factor. It has been established that signs of post-traumatic stress disorder (PTSD) and acute stress disorder (ASD) may be observed in military personnel even before direct deployment to the line of contact. In particular, studies have shown that 35% of surveyed military personnel demonstrated signs of both PTSD and ASD, while 40% exhibited isolated ASD. This indicates the necessity of implementing systematic psychological support already at the stage of basic training (Klochov, 2023). O.A. Blinov (2019) emphasises that early detection and timely psychocorrection work are critically important for preventing more severe mental health disorders. Among the scientific approaches considered for work with military personnel, integrated methods occupy a special place. In particular, cognitive behavioural therapy (CBT) and methods of emotional and volitional stabilisation are recognised as effective in reducing psychological tension. A systemic approach that incorporates these elements makes it possible to significantly increase the adaptability of military personnel.

The problem of the influence of combat and intensive training stress on military personnel is the subject of close attention among researchers. As noted by O.P. Liashch (2021), signs of PTSD and ASD may arise in military personnel without combat experience during intensive military training in training centres. Psychotraumatic experiences arise due to the perceived threat to life, physical danger, or violations of human dignity, which are interpreted by the organism as a real threat. As indicated in the study by O.M. Kokun *et al.* (2023), in order to achieve successful adaptation to difficult conditions, psychologists working with soldiers should focus on ensuring psychological resilience, which acts as a

dynamic process of recovery and adaptation to conditions of stress, danger and traumatic events. To work with this phenomenon, a number of methods have been developed in accordance with the publication by V.M. Moroz *et al.* (2023). In particular, research applies the systemic approach to psychological assistance developed by I. Kotenev, described in the methodology by N.A. Ahaiev *et al.* (2016). This approach consists of four interrelated modules aimed at developing stable adaptive abilities among military personnel:

1. “Cognitive-analytical work”: aimed at understanding the causes of emotional reactions, identifying negative automatic thoughts, and rationally assessing circumstances.

2. “Behavioural training”: teaching effective behaviour in high-risk situations, overcoming freeze responses and acting constructively under pressure, often through the simulation of real combat situations.

3. “Psychophysiological reflection”: the use of breathing techniques, progressive muscle relaxation and neuromuscular control exercises to teach service personnel to control their breathing, heart rate and physical tension.

4. “Social-psychological support and group interaction”: focuses on developing team cohesion, mutual trust and responsibility for the psychological well-being of comrades.

Elements of cognitive-behavioural therapy (CBT) and methods of emotional and volitional stabilisation are also included in the comprehensive psychological training methodology. CBT is an effective means of reducing psychological stress and stabilising the psycho-emotional state of military personnel on combat readiness. It has been proven that body-breathing relaxation, cognitive processing of emotions and group support are highly effective integrated methods for reducing anxiety, depression and PTSD symptoms. In particular, according to S.V. Vasylenko (2020), body-oriented methods help restore the harmonious connection between “body”, “breath” and “consciousness”, which is key to enhancing adaptability. Research findings, based on the work of O.M. Kokun *et al.* (2022a), indicate that even during training, extreme factors can trigger post-traumatic reactions similar to those observed in combatants following combat operations. This highlights the need for psychotherapy as a tool to prevent the transition of acute stress disorder (ASD) into chronic PTSD.

The aim of the study was to analyse the levels of traumatic stress, anxiety, depression and the impact of stress factors on the psycho-emotional state of military personnel as well as to evaluate the effectiveness of a comprehensive psychocorrectional programme. The main objectives of the programme are to reduce the impact of distressing factors,

prevent combat stress and prevent the development of post-traumatic stress disorder.

Materials and Methods

The study was conducted in September-October 2025 among assault troops from a single military unit. The target audience consisted of soldiers undergoing basic military training who had no prior combat experience. The sample comprised 50 male service personnel. The participants were divided into two equal groups of 25 people. The age composition of the respondents in both groups was heterogeneous, though those of middle working age predominated (for example, in the first group the most common age was 44 years (18.8%), and in the second 36 years (20%). An important feature of the sample was that the military personnel were not volunteers, which led to a heightened level of emotional stress and internal resistance to service. During the study (questionnaire completion), the American Sociological Association’s Code of Ethics (1997) was strictly adhered to when working with respondents. The second group of 25 participants comprised military personnel who were assault troops and had no prior service experience. The age distribution of respondents in this group is also diverse, though there is a certain concentration of participants – they are all of working age (Fig. 1). They have varied life experiences and levels of personal maturity.

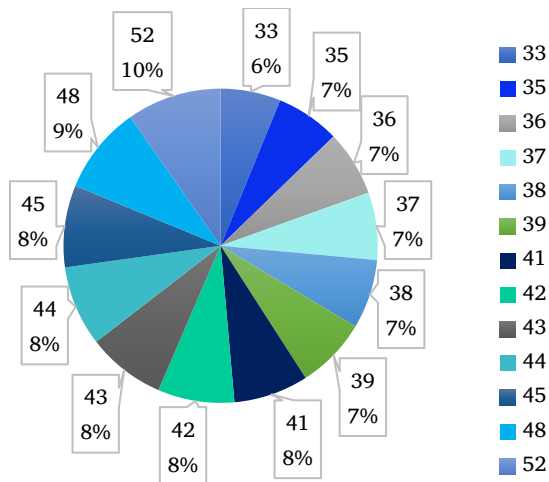


Figure 1. Age distribution of respondents in the second group

Source: compiled by the authors

The study was structured in three stages:

Stage 1: Assessment. A comprehensive assessment of mental and emotional health was carried out, including levels of anxiety, emotional exhaustion, psychological strain and social cohesion. This enabled the establishment of a baseline psychological profile.

Stage 2: Targeted psychotherapeutic intervention. A series of eight group sessions, each lasting approximately 90 minutes, was conducted. This stage was carried out only for the first (experimental) group.

Stage 3: Assessment of the intervention’s effectiveness. A repeat psychodiagnostic assessment was conducted for both groups to compare the results.

The study employed an experimental design using an experimental (Group 1) and a control (Group 2) group. Group 1 (n = 25): Completed the questionnaires twice (before the start and after the completion of the eight-week psychocorrectional programme). Group 2 (n = 25): Completed the same questionnaires twice at the same time intervals, but without any psychocorrectional interventions. This approach made it possible to track changes in psycho-emotional state and determine the effectiveness of the psychocorrectional programme, distinguishing the impact of the intervention from natural adaptation. Data collection, in accordance with the methodology proposed by V. Klochkov (2023), required the generalisation and systematisation of the results. Statistical analysis was carried out, including the calculation of mean ranks for stress factors. A comparative analysis before and after the intervention revealed significant positive changes. The methodology described provides a complete picture of the course of the study, enabling other researchers to replicate it.

To obtain objective comparisons of indicators before and after psychocorrectional measures, the following methods were used:

1. “Traumatic Stress Questionnaire” by I. Kotenev (Ahaiev *et al.*, 2016).

2. “Short Anxiety, Depression and PTSD Scale” (Short AD-PTSD Scale) (Ahaiev *et al.*, 2016). This scale allows rapid determination of the intensity of anxiety reactions, depressive symptoms and manifestations of PTSD (intrusive memories, hyperarousal). The threshold value indicating the presence of disturbances is four affirmative responses.

3. The “Stress Factors” method (Ahaiev *et al.*, 2016). This method was used to determine the most significant stressogenic factors in military activity (combat, physiological, socio-psychological and informational). Data were collected through an online survey using Google Forms via smartphones with Internet access.

The proposed psychocorrectional programme included psychophysiological training, elements of cognitive-behavioural therapy and methods of emotional and volitional stabilisation, as well as meditative elements from the Art of Living programme, as described in the publication “Scientific research on SKY Breath Meditation: Physical and mental health benefits” (2023). The programme’s methodological framework consisted of three parts: psychoanalysis (diagnosis); psychoeducation (expanding knowledge

of stress mechanisms); psychocorrection (the application of individual and group methods for stabilisation, the development of self-regulation, and training in deep relaxation). Body-oriented techniques, breathing, relaxation, cognitive-behavioural and socio-psychological methods were used, as presented in J. Mahour & P. Verma (2017) and M.Y. Balban *et al.* (2023). In particular, cognitive restructuring methods and visualisation tools were used.

The age groups of 33, 39, 41, 42, 43, 45 and 48 years (each accounting for 6.3%) are stable in terms of numbers. The smallest proportion among the respondents in the first group is military personnel aged 38 (3.1%). This age distribution suggests that military service was predominantly joined by middle-aged individuals, characterised by a well-established system of personal values, as noted in the work of L.A. Kitaiev-Smyk (2020), social roles and life experience in decision-making. The age characteristics of respondents play an important role in the context of military service, as age directly affects the speed of adaptation to military conditions, stress resilience, aspects of motivation, and the ability to acquire specialised skills. In particular, members of more mature age groups tend to exhibit greater responsibility and discipline. However, they require more time to adapt physiologically to intense physical demands. These characteristics, as outlined in the study by O.M. Kokun *et al.* (2022a), must be taken into account during training, the development of psychological support, and the assessment of the effectiveness of personnel training.

■ Results

The conducted empirical study, which included initial and repeated diagnostics of the psycho-emotional state of assault soldiers, confirmed the presence of pronounced signs of psychological traumatisa-tion in a significant proportion of personnel, formed

during the process of intensive basic military training. The specific features of these manifestations are discussed in Psychological support of U.S. military personnel and their families (2025). In particular, 35% of survey participants exhibited symptoms of both post-traumatic stress disorder (PTSD) and acute stress disorder (ASD), whilst 40% exhibited isolated ASD. This situation demonstrates the high psycho-emotional sensitivity of military personnel to extreme factors, including simulated assault operations and life-threatening scenarios.

A comparative analysis of the results between the experimental group (Group 1, which underwent psychocorrection) and the control group (Group 2, without intervention) demonstrated a fundamental difference in the dynamics of change, confirming the effectiveness of the developed comprehensive programme. According to the “Short Anxiety, Depression and PTSD Scale” presented by N.A. Ahaiev *et al.* (2016), which was used for monitoring, Group 1 showed significant improvement across all key parameters (Table 1 and Table 2): Anxiety levels decreased by 42.9%. Depression levels decreased by 40.8%. PTSD symptoms decreased by 42.3%.

Measurements of the participants’ key psycho-emotional indicators were taken before and after the programme to determine how effective the psychocorrectional intervention proved to be. Table 1 contains the summary data from the questionnaires. The questionnaire data showed a significant reduction in psychological stress, anxiety and emotional exhaustion following the eight-week psychocorrectional programme. In addition, there was a significant increase in indicators of social cohesion and self-control, the importance of which is discussed in the work of N. Zhuk (2023). This indicates a strengthening of the internal resilience of military personnel and an improvement in their ability to respond effectively to stressful conditions and uncertain situations.

Table 1. Dynamics of indicators of the psycho-emotional state of military personnel (n = 50)

Indicator	Before psychocorrection	After psychocorrection	Change, %
Level of personal anxiety (points)	74.2	51.8	-30.2
Emotional exhaustion (points)	68.5	46.1	-32.7
Mental tension (points)	70.3	48.9	-30.4
Social cohesion (points)	52.4	71.6	+ 36.6
Self-control and volitional resilience (points)	60.2	78.9	+ 31.0

Source: compiled by the authors

The repeated application of the “Short Anxiety, Depression and PTSD Scale” (Ahaiev *et al.*, 2016) also showed that the total average score of affirmative responses in Group 1 decreased from 5.28 to 1.78. Considering that the threshold value indicating the presence of clinically significant disturbances is four affirmative responses, a reduction

to 1.78 indicates that the majority of military personnel were moved out of the risk zone. This conclusion was drawn in accordance with the methodology proposed in the work of I.I. Prykhodko (2021). An analysis of individual indicators according to the methodology of I. Kotenev, based on N.A. Ahaiev *et al.* (2016), confirmed this tendency.

The average level of PTSD in Group 1 decreased from 135 to 118 points (Table 2). The processed results of identifying psycho-emotional disorders in both groups can be observed more clearly through visual representations in the figures illustrating the

dynamics of changes. Comparison of the two groups allows more accurate results to be obtained. The calculations therefore demonstrate a fundamental difference in the effectiveness of overcoming PTSD symptoms.

Table 2. Main types of disorders recorded among military personnel who participated in the psychocorrection assistance programme

Type of disorder	Before psychocorrection	After psychocorrection
PTSD	135	118
ASD	166	153

Source: compiled by the authors

The PTSD indicator among military personnel in the first group before the beginning of the psychocorrection programme amounted to 135 points. After the implementation of the programme based on the author's methodology, a repeated assessment showed a decrease to 118 points. These results indicate a reduction in emotional tension among the soldiers, a decrease in the frequency of intrusive memories, anxiety reactions and manifestations of hyperarousal. As noted by N.Y. Diomidova (2021), the use of psychocorrection methods contributes to the development of internal stabilisation skills and gradually replaces acute traumatic experiences. The calculation of the PTSD level in the second group, where no psychological assistance was provided, demonstrated no changes between the two survey stages (the first and second measurements). The indicator remained at 137 points, which suggests the absence of internal mechanisms for processing stress and the accumulation of emotional tension that cannot transform independently without targeted psychocorrection methods.

Thus, based on the research of V.V. Stasiuk & V.M. Ukrainets (2023a), the psychocorrection programme in the first group made it possible to actively process intensified internal conflicts among respondents, thereby reducing the intensity of stress reactions and strengthening the psychological resilience and endurance of military personnel. In contrast, respondents from the second group maintained the previous level of emotional tension, indicating the absence of natural relief without professional support. Thus, the obtained results provide convincing evidence of the effectiveness of psychocorrection of combat stress as a tool for preventing deeper mental health disorders among military personnel and maintaining the combat readiness of the unit.

Working with a psychologist enabled the soldiers to restore a sense of internal security and master mechanisms for the gradual "release" of accumulated anxiety, which is crucial for preventing the transition of acute stress disorder (ASD) into PTSD. Real risks may arise for military personnel if symptoms

are ignored. According to the research of M.M. Kononova & T.V. Kuchma (2021), the accumulation of stress reactions over time leads to emotional instability and exhaustion, prolonged depressive states, loss of working capacity, conflicts within the team and the unit, and a sharp decline in combat capability. According to the results obtained for the two groups of surveyed military personnel, the level of ASD decreased from 166 to 153 points. This reduction can be explained by the influence of psychocorrection methods ($p = 0.000142$), which contributed to the development of internal stabilisation skills and a decrease in the frequency of intrusive memories and anxiety reactions. The psychocorrection methods were aimed at reducing emotional tension, stabilising psychophysiological reactions and developing skills for controlled responses to stress stimuli. In the second group of military personnel, where psychocorrection was not implemented, the level of ASD decreased by only 3 points – from 166 to 163. These results indicate minimal changes in the group, which may be explained by temporary adaptation to the conditions of the military unit. However, the internal tension and anxiety of the soldiers were not processed, leaving defensive mechanisms superficial and traumatic experiences unresolved. A comparison of the results for both groups demonstrates that the decrease in ASD in the first group was more pronounced and structured. This can be explained by the effect of psychocorrection, which was aimed at reducing psychological and physiological tension. In the second group, changes were minimal, leading to the conclusion that without specialised psychological assistance acute stress decreases very slowly, which is insufficient for preventing further negative consequences.

In contrast, in the control group (Group 2), where no psychocorrection was conducted, no significant positive changes were recorded. The level of PTSD remained unchanged at 137 points. The level of acute stress disorder (ASD) decreased only minimally, by 3 points (from 166 to 163). This result confirms that natural adaptation resulting solely from remaining in the stable conditions of a military unit is

insufficient for preventing more serious psychological disturbances. The comprehensive psychocorrection programme was aimed not only at reducing negative symptoms but also at developing internal adaptive resources. According to the assessment results, the following improvements were observed: social cohesion increased by 36.6%, self-control and volitional resilience increased by 31.0%, and the subjective sense of calm and inner balance increased by 78.5%. Positive changes in internal resources indicate the strengthening of psychological resilience and the ability of military personnel to respond effectively to uncertain and stressful situations. Participants also reported improvements in sleep quality (82%), increased concentration (76%), and improved mutual understanding within the group (70%). An analysis of effectiveness using the “Stress Factors” method (Ahaiev *et al.*, 2016) demonstrated that the overall level of stress load decreased by almost 30% (from 4.16 to 2.98 points). The greatest reduction in tension was observed in the areas of personal-psychological (-33.3%) and emotional-physiological

(-31.9%) reactions. These results highlight the effectiveness of body-oriented exercises and cognitive processing of emotions, which were key components of the programme.

The initial study determined that the greatest psycho-emotional tension was caused by combat-related factors: threat to life (27.8 points), death of comrades (26.9 points), and injury or mutilation (25.6 points). Physiological factors (exhaustion, lack of sleep) ranked second in significance. Data collection required the generalisation and systematisation of results, for which statistical analysis was carried out: average ranks were calculated for each factor across all respondents; the most significant stressors with a key influence on the emotional and psychological state of military personnel were identified (Table 3). The remaining factors had an average rank below 13 points and were not included in the top 20 in terms of significance. Thus, the psycho-emotional state of military personnel is most strongly influenced by factors related to risks to life and health, injuries, and the loss of comrades (Table 3).

Table 3. Average values of stress factors among 25 military personnel who participated in the psychocorrection programme

No.	Stress factor	Mean rank (0-30)	Group of factors
1	Danger to life during combat operations	27.8	Combat
2	Death of comrades	26.9	Combat
3	Injury or mutilation	25.6	Combat
4	Fear of being taken prisoner	24.7	Combat
5	Prolonged separation from family	23.9	Socio-psychological
6	Lack of clear information about the situation	22.8	Informational
7	Exhaustion due to lack of sleep	22.5	Physiological
8	Constant noise and shelling	21.4	Physiological
9	Poor nutrition, shortage of water	20.6	Physiological
10	Conflicts within the unit	20.1	Socio-psychological
11	Lack of rest	19.4	Physiological
12	Feelings of guilt for actions in combat	18.7	Moral and ethical
13	Uncertainty about the future	17.9	Informational

Source: compiled by the authors

These stressogenic elements pose a threat to psychological stability, as noted by K. Ulianov (2020). This is particularly true of military personnel who have joined the brigade following training, where combat risks were practised in conditions as close as possible to real-life assault operations. Following the psychocorrectional intervention (Group 1), it was found that the programme effectively reduced the impact of many stressors associated with sensory, everyday and emotional reactions (for example, the shock caused by the sight of corpses and destruction decreased). However, some of the highest-ranked stress factors (threat to life, injuries, and command errors) remained at a high level or even increased slightly. This phenomenon can be interpreted not as an indication of the ineffectiveness of

the correction but as a natural psychological process: the conscious processing of traumatic events (within the cognitive-analytical module) may lead to a temporary increase in the subjective perception of real threats.

The obtained results support the idea that a systemic approach to stress management (the concept proposed by I. Kotenev), presented in the methodology of N.A. Ahaiev *et al.* (2016), which combines cognitive-behavioural methods, psychophysiological practices, meditative elements of the Art of Living programme, and group mutual support described in Art of Living Research (2023), is a highly effective tool for the prevention of PTSD and ASD. The integrated methods used in the programme (deep relaxation, body-breathing techniques, cognitive

restructuring and meditative elements of the Art of Living programme) demonstrated their capacity to mobilise internal mechanisms of self-regulation and restore the harmonious connection between the “body”, “breath” and “consciousness”, which is critically important for increasing adaptability. This approach ensured a deep and sustainable restoration of psycho-emotional balance.

The study demonstrates that psychological assistance enabled military personnel to restore a sense of internal safety and to master mechanisms for the gradual “release” of accumulated anxiety. As noted by V.V. Stasiuk & V.M. Ukrainets (2023b), this is crucial for preventing the transition of ASD into chronic PTSD, since ignoring symptoms of combat stress leads to emotional instability, exhaustion and a sharp decline in combat effectiveness. Because symptoms of traumatic stress were detected among soldiers already during the training stage, the results of the study have particular practical significance for the development of a system of psychological support for the Armed Forces of Ukraine.

■ Discussion

The obtained results confirm that intensive basic military training can act as an independent psycho-traumatic factor, which is consistent with the conclusions of O.A. Blinov (2019), who emphasised the formation of symptoms of combat psychological trauma even before direct participation in combat operations. A similar position is expressed by O.P. Lishch (2021), who points to the destructive impact of combat stress on the emotional sphere of military personnel even during the training period. In the present study, 35% of participants demonstrated signs of both PTSD and ASD, which correlates with the tendencies described by these authors. At the same time, the conducted analysis demonstrates a different perspective regarding possibilities for prevention. While the works of O.A. Blinov (2019) and K. Ulianov (2020) primarily emphasise the severity and duration of the consequences of combat stress, the results of this study indicate that timely and systematic psychocorrection intervention can reduce indicators of anxiety, depression and PTSD by 40-43%. Thus, the thesis regarding the danger of accumulating traumatic experience is supported, while also being supplemented with empirical evidence of the effectiveness of early psychocorrection.

The conclusions of O.M. Kokun *et al.* (2022b) regarding the necessity of ensuring psychological resilience as a dynamic process of adaptation to combat conditions are also confirmed by the findings of this research. In particular, the increase in indicators of social cohesion (+ 36.6%) and self-control (+ 31.0%) corresponds with their statement regarding the importance of team interaction and the development

of internal resources. However, unlike these authors, who consider resilience mainly as an integral characteristic of personality, the results demonstrate its plasticity and the possibility of purposeful development during an eight-week programme. The differences in interpretation may be explained by variations in the sample and research design.

The provisions of I.I. Prykhodko (2021) concerning the need to systematise measures for the prevention of combat stress are also supported by the obtained data. The author emphasises that without targeted intervention acute stress tends to become chronic. This fully corresponds with the results observed in the control group, where natural adaptation proved insufficient for a significant reduction in symptoms. The findings of M.Y. Balban *et al.* (2023) regarding the positive influence of structured breathing practices on reducing physiological arousal and improving mood are also supported by the results of this study, in which improvements in sleep quality (82%) and concentration (76%) were recorded. Body-breathing techniques demonstrated a significant contribution to reducing emotional and physiological tension (-31.9%). At the same time, unlike J. Mahour & P. Verma (2017), who primarily focus on physiological indicators of autonomic regulation, the present study demonstrates a comprehensive psycho-emotional effect, which may be explained by the combination of breathing, cognitive and group-based methods.

Overall, the results are consistent with the principles of contemporary psychological science regarding the nature of combat stress, while also expanding them in terms of the proven effectiveness of a systemic approach to psychocorrection. A comprehensive programme combining cognitive-behavioural, psychophysiological and socio-psychological components can be regarded as an effective tool for preventing the chronicity of acute stress reactions in military personnel during basic training.

■ Conclusions

The comprehensive psychocorrection programme, based on the systemic approach of I. Kotenev and incorporating elements of cognitive behavioural therapy together with meditative components from the Art of Living programme, demonstrated high effectiveness in work with military personnel experiencing combat stress and undergoing intensive training. The study confirmed that signs of post-traumatic stress disorder (PTSD) and acute stress disorder (ASD) may develop during training exercises even before direct involvement in combat operations.

The results of the assessment using scales of traumatic stress, anxiety and depression showed a significant improvement in the psycho-emotional state of the experimental group. Symptoms of anxiety,

depression and PTSD decreased by approximately 40-43%. At the same time, no significant positive changes were recorded in the control group, which did not receive psychological intervention, emphasizing the necessity of targeted psychocorrection work. The programme contributed to a substantial strengthening of the internal resources of military personnel: the subjective sense of calmness and inner balance increased by 78.5%, while indicators of social cohesion and self-control increased by more than 30%. This indicates the restoration of a harmonious connection between the “body”, “breath”, and “consciousness”, which forms the basis of stress resilience. It was also established that the intensity of the influence of the main stress factors among programme participants decreased by almost 30%. The greatest reduction in psycho-emotional tension was achieved in the areas of personal-psychological and emotional-physiological reactions, which confirms the effectiveness of body-oriented and relaxation techniques in developing self-regulation skills.

Prospects for further research on this topic include the integration of the developed psychocorrection programme into the system of psychological support for military units on a permanent basis; the implementation of long-term monitoring in order to assess the sustainability of the obtained results and prevent recurrence of symptoms; as well as the development of additional modules aimed at addressing the most persistent stress factors, particularly those related to the perception of life-threatening danger and trust in command leadership.

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■ Conflict of Interest

None.

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■ **Анотація.** Метою статті було вивчення рівня травматичного стресу, тривоги, депресії та впливу стрес-факторів на психоемоційний стан військовослужбовців, а також оцінювання ефективності комплексної психокорекційної програми. Дослідження здійснено на вибірці з 50 військовослужбовців-штурмовиків, поділених на експериментальну (25 осіб) та контрольну (25 осіб) групи. Застосовано експериментальний дизайн із повторним вимірюванням. У програмі з психокорекції, яка тривала вісім групових тренувань (90 хвилин кожне), за основу було взято системний підхід І. Котеньова. Було використано «Опитувальник травматичного стресу» І. Котеньова, «Коротку шкалу тривоги, депресії та ПТСР» (Short AD-PTSD Scale) та методика «Стрес-фактори». Результати засвідчили високу ефективність програми: за шкалою Short AD-PTSD в експериментальній групі рівень тривожності знизився на 42,9 % (з 14,2 до 8,1 балів), рівень депресії – на 40,8 % (з 12,5 до 7,4 балів), а симптоми ПТСР зменшилися на 42,3 % (з 16,8 до 9,7 балів). Сумарний середній бал схвальних відповідей, що засвідчують наявність порушень, знизився з 5,28 до 1,78, що вивело більшість військових із зони ризику. Загальний рівень стресового навантаження, визначений за методикою «Стрес-фактори», знизився майже на 30 % (з 4,16 до 2,98 балів). Найбільш помітне зменшення психоемоційного напруження зафіксовано у сферах особистісно-психологічних та емоційно-фізіологічних реакцій (зниження на 33,3 % та 31,9 % відповідно). Позитивні зміни зафіксовано у внутрішніх ресурсах: суб'єктивне відчуття спокою та внутрішньої рівноваги підвищилося на 78,5 %, соціальна згуртованість зросла на 36,6 %, а самоконтроль підвищився на 31,0 %. Після завершення програми у 82 % учасників покращилася якість сну, а в 76 % – підвищилася концентрація уваги. У контрольній групі, яка не отримувала корекції, значних позитивних змін не відбулося. Це доводить, що природної адаптації недостатньо для подолання наслідків бойового стресу. Програма суттєво підвищує адаптивність військовослужбовців, стабілізує їхній емоційний стан і може бути інтегрована в психопрофілактичні програми підрозділів Збройних Сил України

■ **Ключові слова:** психокорекція; бойовий стрес; посттравматичний стресовий розлад; тривожність; адаптивність; системний підхід