

## Psychological assistance to civilians in the context of the negative impact of war: The problem of improving legislation

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**Abstract.** This study was aimed at developing methods to improve the effectiveness of psychological assistance to Ukrainians affected by the Russian-Ukrainian war. For this purpose, the current legislation of Ukraine was analysed, a survey among the affected civilian population was conducted, and international experience in providing psychological assistance in war and crisis situations was considered. The findings demonstrated significant gaps in the legislation presented in the reviewed regulatory documents. The identified weaknesses related to coordination between different services, funding of programmes and specific needs of different population groups (children, women, the elderly and internally displaced persons), which led to a lack of efficiency in the provision of psychological assistance and limited access to the necessary services in the context of the Russian-Ukrainian war. A survey of respondents on the availability and quality of psychological assistance showed that 28% of respondents in Group 1 (whose participants had experienced traumatic experiences, including the occupation) highly appreciated the availability of assistance, while in Group 2 this figure was 59%. The findings indicated significant differences in the perception of the availability of assistance between different categories of the population, which is likely related to the level of trauma and the effectiveness of existing support programmes. It was found that the need for psychological assistance far exceeds the available resources, and the need to expand assistance programmes and increase their effectiveness was substantiated. International experience of providing

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psychological assistance in war and crisis situations has shown that integrated interventions that combine medical and psychosocial support are effective in reducing the level of mental disorders among refugees and victims. Recommendations for improving legislation included the introduction of information campaigns to reduce the stigma of mental disorders and raise public awareness of available services. The findings pointed to the need to integrate psychological support into the general healthcare system and to increase funding for programmes

**Keywords:** post-traumatic stress disorder; internally displaced persons; remote support; coordination of efforts; accessibility of services

## Introduction

The war in Ukraine has caused widespread destruction of infrastructure, massive displacement and civilian casualties, resulting in serious psychological trauma. Many people have faced post-traumatic stress disorder (PTSD), depression, anxiety disorders and other mental health problems, which has increased the burden on the psychological care system, especially in frontline areas and rural areas. Failure to provide victims with the necessary psychological assistance can worsen their mental health and ability to adapt to new living conditions. The social stigma of mental disorders remains a significant barrier to seeking help: many people consider seeking counselling to be a sign of weakness, especially men and veterans. If this stigma is not overcome and numerous victims continue to ignore their psychological problems, it will lead to a worsening of their condition, a decrease in the quality of life and may contribute to higher levels of domestic violence and a worsening of the crime situation in Ukraine. Research into the provision of psychological assistance in war is critical to developing effective measures to support the affected population. Without adequate attention to these issues, Ukraine may face long-term consequences for the mental health of a large part of the population, which will complicate the country's recovery and social integration.

The problem of providing psychological assistance during COVID-19 was considered by E. Minihan *et al.* (2020) and Y. Wang *et al.* (2020). The impact of the pandemic on mental health and the role of psychological care in reducing negative consequences were studied by E. Minihan *et al.* (2020). The authors found that the pandemic has significantly increased the level of anxiety, stress, and depression among the population, and that first aid is an effective tool for providing support. Y. Wang *et al.* (2020) described measures to provide psychological assistance, including hotlines, online consultations, and mobile applications. The results showed the effectiveness of these measures in reducing anxiety and stress among the population, but the long-term effects of such interventions were not investigated.

The impact of war on the mental health of the population was considered in the works of S. Fel *et al.* (2022) and R.J. Johnson *et al.* (2022). The relationship between socio-demographic factors and PTSD among civilians in Ukraine who survived the hostilities was investigated by S. Fel *et al.* (2022). The authors found that factors such as age, gender, level of education, and socioeconomic status have a significant impact on the risk of developing PTSD. The study by R.J. Johnson *et al.* (2022) aimed to determine the level of trauma and prevalence of PTSD among urban residents who did not move from their homes and internally displaced persons (IDPs) as a result of the Russian-Ukrainian war. The results showed that IDPs experience a higher level of trauma and are more likely to develop PTSD; IDPs

need targeted psychological support and adaptation of assistance programmes to meet their specific needs. The issue of developing effective mechanisms for overcoming stress among different demographic groups requires further study.

The issues of empathy, social connections, and spirituality in overcoming stress were addressed by R.A. Shalaby and V.I. Agyapong (2020), O. Ozcan *et al.* (2021), T. Shcherban *et al.* (2022). The study by T. Shcherban *et al.* (2022) revealed the positive role of empathy in negotiation and its impact on socio-economic indicators. Empathy among psychological care professionals can reduce stress levels and contribute to better adaptation of victims. R.A. Shalaby and V.I. Agyapong (2020) found that mutual support can reduce symptoms of mental disorders, improve quality of life and social integration of participants. O. Ozcan *et al.* (2021) examined faith and spirituality as coping mechanisms among women workers in humanitarian organizations. The study found that these factors help reduce stress levels, provide emotional support, and promote mental health. The issue of cultural differences and their impact on the effectiveness of support remained unexplored.

A. Kip *et al.* (2020) and J.P. Bouchard *et al.* (2023). The results of the study by J.P. Bouchard *et al.* showed that both refugees and those who stayed in Ukraine face high levels of PTSD, anxiety and depression, and effective psychological assistance should take into account the individual needs of war victims and provide long-term support. A. Kip *et al.* (2020) found that cognitive behavioural therapy and other structured forms of therapy significantly reduce symptoms of PTSD and depression in refugees and pointed to the need to introduce such interventions into refugee support programmes to improve their mental health. M. Posselt *et al.* (2019) found that access to social support, integration into local communities, employment opportunities, and access to health and psychological services are key factors contributing to refugees' mental health, while P. Schlechter *et al.* (2021) concluded that traumatic events have a significant impact on psychological distress, but that the presence of social support and religious faith can mitigate these effects.

The reviewed studies have shown that scientists are interested in various aspects of the psychological health of the population in crisis conditions, but the issues of long-term effects of the proposed methods of psychological assistance, as well as specific cultural and individual factors that affect the effectiveness of psychological support, remain unexplored. The purpose of the study was to find ways to improve the quality and accessibility of psychological assistance to civilians affected by the Russian-Ukrainian war. The tasks included analysing the current legislation of Ukraine, conducting a survey and developing specific proposals for improving the current legislation, taking into account the results of the survey.

## Materials and methods

This empirical study analysed the current legislation of Ukraine that regulates the provision of psychological assistance to civilians. The sources reviewed included the Constitution of Ukraine (1996), Law of Ukraine No. 1489-III “On Psychiatric Care” (2000), Law of Ukraine No. 2801-XII “Fundamentals of Ukrainian Healthcare Legislation” (1993), Decree of the Cabinet of Ministers of Ukraine No. 1338 “Some Issues of Providing Psychological Assistance to War Veterans, Members of their Families and Some Other Categories of Persons” (2022), Convention on the Rights of the Child (1995), Law of Ukraine No. 2145-VIII “On Education” (2017).

Statistical data provided by the Ministry of Health of Ukraine (Yulia Laputina took..., 2022), the National Institute for Strategic Studies (2023) and the Mental Health Centre in Lviv (Demchina, 2022) on the need for psychological assistance among Ukrainians were also considered. The study of non-governmental organization (NGO) initiatives included an analysis of the Doctors Without Borders

psychosocial support programme in Donetsk and Luhansk regions (2024) and the Ukrainian Helsinki Union’s free legal and psychological assistance to IDPs and victims of the conflict (National Agency of Ukraine..., 2024).

A survey of citizens was conducted to determine the effectiveness of psychological assistance in Ukraine. The respondents were divided into two groups: the first (survivors of hostilities, occupation, and IDPs from the temporarily occupied territories) and the second (those who were in the territories where no hostilities were taking place during the full-scale war). The sample was formed randomly from 531 Ukrainian citizens who had not travelled abroad as refugees. The first group consisted of 269 people (including 142 women) with an average age of 46.2 years. The second group consisted of 262 people (151 women) with an average age of 43.9 years. The questionnaire on the needs and satisfaction with psychological assistance included 23 questions divided into 5 blocks, which respondents answered on a scale from 1 to 5, where 1 – strongly disagree and 5 – strongly agree (Table 1).

**Table 1.** The questionnaire

|   |   |
|---|---|
| I. Needs for psychological assistance:                              | 1. I feel the need for psychological support.   |
|   | 2. It is important for me to have access to qualified psychologists.                  |
|   | 3. I need regular psychological counselling sessions.                                 |
|   | 4. I need group support (self-help groups, sessions with other victims).              |
|   | 5. I need individual sessions with a psychologist.                                    |
|   | 6. I feel that my psychological support needs remain unmet.                           |
| II. Availability of psychological assistance:                       | 1. Psychological help is easily accessible to me.                                     |
|   | 2. I know where to go for psychological help.   |
|   | 3. I can get help at a time that is convenient for me.                                |
|   | 4. I have access to online consultations with a psychologist.                         |
|   | 5. I have access to mobile teams of social and psychological assistance.              |
| III. Satisfaction with the quality of psychological assistance:     | 1. I am satisfied with the quality of psychological assistance I receive.             |
|   | 2. The psychological help meets my expectations.                                      |
|   | 3. The psychologists I work with are qualified and experienced.                       |
|   | 4. I feel that my mental state has improved since receiving help.                     |
|   | 5. I receive sufficient emotional support from psychologists.                         |
|   | 6. Psychological help helps me to cope with the consequences of trauma.               |
| IV. Satisfaction with the organization of psychological assistance: | 1. The process of making an appointment with a psychologist is convenient and simple. |
|   | 2. The waiting time for a session with a psychologist is acceptable.                  |
|   | 3. I am provided with information about available psychological assistance services.  |
|   | 4. I feel that my needs and requests are taken into account when providing care.      |
| V. General assessment of psychological assistance:                  | 1. In general, I am satisfied with the psychological help I receive.                  |
|   | 2. I recommend others to seek psychological help.                                     |

The Student’s t-test was used to compare the mean scores between the first and second groups. Formula (1) was used to calculate the t value:

$$t = (\bar{X}_1 - \bar{X}_2) / \sqrt{((s_1^2/n_1) + (s_2^2/n_2))}, \quad (1)$$

where  $\bar{X}_1$  and  $\bar{X}_2$  – the average values in the first and second groups, respectively;  $s_1^2$  and  $s_2^2$  – standard deviations;  $n_1$  and  $n_2$  – sample sizes. After calculating the t value, the level of statistical significance was determined using standard tables of critical values of the Student’s t-test. The decision on the statistical significance of the differences between the groups was made on the basis of the obtained p-value ( $p = 0.05$ ). The study was conducted in accordance with the recommendations of the American Sociological Association’s Code

of Ethics (1997) and the European Commission’s guidance note on ethics and data protection (2021). All participants were fully informed about how their anonymity was guaranteed, why the study was being conducted, and how the data would be used.

## Results

**Analysis of the current legislation on psychological assistance to civilians. The effectiveness of psychological assistance in wartime.** Ukrainian legislation on the provision of psychological assistance to civilians in times of war is an important aspect of ensuring the mental health and well-being of citizens. The main legislative acts that regulate this area are the Constitution of Ukraine, the Laws of Ukraine, decrees of the President of Ukraine, resolutions

of the Cabinet of Ministers of Ukraine and orders of the Ministry of Health.

Article 49 of the Constitution of Ukraine (1996) guarantees the right of every citizen to health care, medical assistance and medical insurance. This article provides a basic right to receive medical care, including psychological support. Law of Ukraine No. 2801-XII (1993) defines the basic principles of state policy in the field of healthcare, including ensuring mental health of the population; this law lays down fundamental provisions for the organization and provision of medical care, including psychological care. The Law of Ukraine No. 1489-III (2000) regulates in detail the provision of psychiatric care, including the rights of patients, the organization of psychiatric services and the protection of the rights of persons with mental disorders. Although this law is mainly concerned with psychiatric care, it also contains provisions for mental health care in emergency situations. Decree of the Cabinet of Ministers of Ukraine No. 1338 (2022) establishes the procedure for providing psychological assistance to victims of the Russian-Ukrainian war. This document defines the procedure for organizing psychological assistance, its scope and mechanisms of interaction between different services. In addition to national legislation, it is worth noting Ukraine's participation in international treaties and conventions governing human rights and the provision of medical care in war. For example, Ukraine is a party to the Convention on the Rights of the Child (1995), which obliges states parties to provide psychological support to children affected by conflicts.

The current Ukrainian legislation includes a number of regulations governing the provision of psychological assistance to civilians in times of war. However, there are certain gaps and shortcomings that need to be improved to ensure effective mental health support for affected citizens. The main shortcomings and gaps in Ukrainian legislation on psychological assistance to civilians in wartime relate to the fact that the current legislation does not always ensure sufficient coordination between different agencies and services responsible for providing psychological support (Law of Ukraine No. 2801-XII, 1993). This leads to fragmentation of care and inefficiency in the interaction between medical, social and other institutions. In addition, existing regulations often do not provide for clear mechanisms for funding and resource provision of psychological assistance programmes. For example, the Decree of the Cabinet of Ministers of Ukraine No. 1338 (2022) does not contain specific provisions on financial support for these programmes, which limits the ability to implement the planned activities and creates dependence on external funding and grants.

Legislation does not always take into account the specific needs of different categories of the affected population, including children, women, the elderly, and IDPs. The regulatory documents under review do not take into account the unique requirements of these groups, which may reduce the effectiveness of the assistance provided. The general absence of a system for monitoring and evaluating the quality of psychological assistance is also a significant drawback: The Law of Ukraine No. 1489-III (2000) does not provide for clear mechanisms for monitoring compliance with standards and evaluating the effectiveness of services provided, which makes it difficult to identify problems and implement corrective measures. Legislation also insufficiently regulates the issues of professional training and advanced training of

specialists providing psychological assistance. Despite the provisions of Law of Ukraine No. 2145-VIII (2017), which provides for advanced training of specialists, there are no specialized programmes and courses for psychologists working in war. This leads to insufficient preparation of specialists to work with the affected population.

The current legislation of Ukraine plays a significant role in determining the quality and accessibility of psychological assistance to civilians affected by war. The impact of this legislation can be assessed from several perspectives. On the one hand, basic legislation, such as Law of Ukraine No. 2801-XII (1993), provides the legal framework for the provision of psychological assistance. They define general principles and approaches to mental health care, which is a positive factor in ensuring access to necessary services. However, the absence of clearly defined mechanisms for financing these services leads to limited resources. This, in turn, has a negative impact on the availability and quality of psychological assistance, especially in times of war, when the need for such assistance increases significantly. In addition, existing legislation does not always take into account the specific needs of different categories of affected populations, such as children, women, the elderly, and IDPs. The Convention on the Rights of the Child (1995) requires special attention to the psychological health of children, but national legislation does not always fully implement these requirements. This leads to a situation where vulnerable groups do not receive the necessary assistance in full.

Resolutions and orders, such as Decree of the Cabinet of Ministers of Ukraine No. 1338 (2022), regulate the provision of psychological assistance, but often contain general provisions without specifying methods and procedures, which creates difficulties in the practical application of the norms and leads to heterogeneity in the quality of services provided. The Law of Ukraine No. 1489-III (2000) provides a legal framework for the protection of the rights of persons with mental disorders, but does not sufficiently regulate the issue of psychological support in times of war. The lack of clear standards and protocols complicates the work of professionals and reduces the quality of care. There is a need for specialized programmes for psychologists working with war-affected people at the level of professional training and in-service training. The Law of Ukraine No. 2145-VIII (2017) provides for the possibility of advanced training, but the actual offer of such programmes is limited. This situation reduces the level of professional training of specialists and, as a result, the quality of services provided.

The effectiveness of psychological assistance in Ukraine largely depends on the geographical location and intensity of hostilities in specific regions. The need for psychological support is higher in the frontline areas due to constant threats to life, destruction of infrastructure and loss of loved ones. Living in such conditions leads to high levels of stress and PTSD among the local population. According to the Ministry of Health, more than 60% of Ukrainians need psychological help (Yulia Laputina took ..., 2022), and according to a survey by the National Institute for Strategic Studies (2023) – up to 50%. In the central regions, where many IDPs are located, the situation is also difficult. The largest share of IDPs is recorded in Dnipro, Kharkiv, and Kyiv (with the city of Kyiv) oblasts (International Organization for..., 2023), which places additional strain on local health and social services. According to the Mental Health

Centre in Lviv, many of the displaced face difficulties in adaptation and need psychological support (Demchina, 2022). In large cities, such as Kyiv, Dnipro, Kharkiv and Lviv, there are more opportunities to receive quality psychological assistance due to the availability of specialized centres and support from international organizations. However, even in these cities, there are problems with access to services, primarily due to the high cost of consultations with private specialists and long waiting times for free consultations with specialists (in public clinics or sponsored by specialized organizations) due to high demand or insufficient number of qualified specialists. In rural areas, the situation is even more complicated due to the lack of sufficient medical and social facilities. Residents of rural areas are forced to travel to the nearest towns to receive psychological help, which creates additional difficulties and costs, or they may refuse to visit a specialist at all.

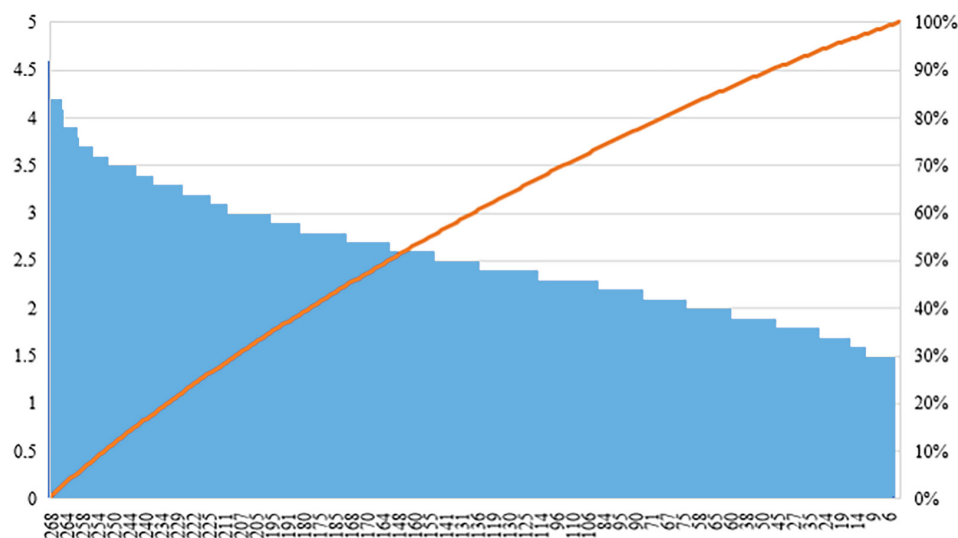
A study of the activities of governmental and non-governmental organizations providing psychological support in Ukraine has shown that there are a significant number of initiatives aimed at helping the affected population. The Ministry of Health of Ukraine has developed a number of programmes and activities aimed at providing psychological support. These include mobile teams of social and psychological assistance that operate in the frontline areas and help ensure access to services for residents of remote areas. In addition to government initiatives, non-governmental organizations that provide psychological support play an important role. Organizations such as Médecins Sans Frontières, the Red Cross and local NGOs are active in the conflict-affected regions, providing not only psychological assistance but also humanitarian support. Médecins Sans Frontières runs psychosocial support programmes in Donetsk and Luhansk oblasts, where it organizes support groups and individual counselling (Doctors Without Borders, 2024). An important role in providing psychological assistance is played by the Ukrainian Helsinki Human Rights Union, which provides free legal and psychological assistance to IDPs and victims of the conflict. Representatives of the organization carry out trainings for psychologists and social workers to improve the quality of service provision (National Agency of Ukraine..., 2024). The accessibility and quality of psychological care for different categories of the population in Ukraine can vary significantly depending on age, social status and place of residence. For children, especially those living in frontline areas or who are IDPs, access to psychological assistance is critical. Research shows that children who have experienced traumatic events often face PTSD and other psychological problems (Vibhakar *et al.*, 2019; Uppendahl *et al.*, 2020).

Adults also need psychological assistance, especially those who have been directly affected by hostilities or are IDPs. Research shows that many adults who have experienced traumatic events related to war face adjustment problems, anxiety, and depression (Kakaje *et al.*, 2021; Hoppen *et al.*, 2021; Lim *et al.*, 2022). They often do not receive adequate psychological support due to a lack of qualified specialists and an insufficient number of psychological assistance centres. Older people, especially those living in rural areas or in frontline zones, have limited access to psychological assistance. They often face isolation,

loss of loved ones and general deterioration in health. Older people are one of the most vulnerable categories, and access to psychological assistance for them remains low due to physical limitations and lack of transport infrastructure. Furthermore, IDPs face particular challenges due to the loss of their homes, the severance of social ties and the need to adapt to new living conditions. Many of them need comprehensive psychosocial support, including psychological assistance, legal advice and social integration. However, there can be significant inequalities in the availability of such services depending on the region and the availability of local resources.

**The results of the survey of respondents on their needs and satisfaction with psychological assistance.** Participants in the first group demonstrated a higher level of trauma compared to participants in the second group, which was reflected in a greater need for specialized psychological assistance. The survey results showed that the need for psychological support was high among both groups. In the first group, 86% of respondents rated the need for psychological support at 4 or 5, while in the second group, the number of such respondents was 72%. This indicates that people who have experienced immediate danger have a greater need for psychological support. The average score for the block of questions about the need for psychological assistance was 4.4 for the first group and 3.9 for the second. It is important to note that the same psychological assistance resources can be perceived and used differently by these groups. In the first group, 28% of respondents rated the availability of psychological assistance as 4 or 5, while in the second group this figure was 59%. This indicates that participants in the second group had better access to psychological assistance due to lower levels of trauma, better infrastructure and access to resources (including financial) in regions that were not affected by the hostilities. In terms of the quality of assistance provided, 40% of respondents in the first group and 61% of respondents in the second group rated the quality of psychological assistance at 4 or 5. This indicator may indicate a critical lack of funding for relevant programmes for IDPs, as well as difficulties for citizens from the temporarily occupied territories or combat zones to establish a life in other regions of Ukraine due to social stigma, economic problems, lack of state support.

The organization of care provision also received low scores: only 25% of respondents in the first group and 35% in the second group rated the convenience and efficiency of the organization at 4 or 5. Overall satisfaction with psychological care was rated at the higher level by 35% of respondents in the first group and 40% in the second group. This indicates that a significant proportion of the population, both survivors and those who were relatively safe, are not satisfied with the level of psychological assistance. Figures 1 and 2 show the general results of the surveys of the first and second groups of citizens using a Pareto curve. Figure 1 shows the cumulative percentage of respondents in the first group who rated the availability of psychological help with an average score of 1.5 to 4.6. The majority of respondents (70%) rated the accessibility of care at 3 and below, which indicates general dissatisfaction with the availability of services and points to significant problems with the accessibility of psychological care in the first group.

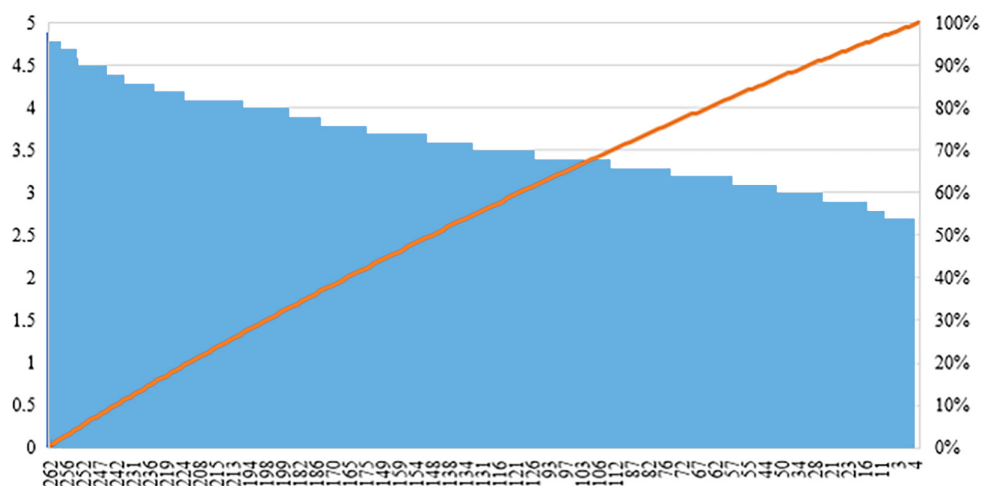


**Figure 1.** Results of the survey of the first group of citizens

Source: compiled by the authors

Figure 2 shows the cumulative percentage of respondents in the second group who rated the availability of psychological help with an average score of 2.5-4.9. It was found that almost 90% of respondents rated the accessibility of care above 3, indicating satisfaction with the availability of services. The survey results showed a high need for psychological assistance among both groups of respondents. Accessibility and quality of care remain problematic issues that need to be improved. Organizational aspects of psychological support also need to be improved to ensure greater

efficiency and accessibility of services. Victims of the Russian-Ukrainian war face many problems and challenges that complicate their psychological recovery and adaptation to peaceful life. One of the main problems is the high level of PTSD among the population, especially among those who have experienced active hostilities or occupation. According to research, about 70% of these individuals experience PTSD symptoms, including intrusive memories, nightmares, and a constant state of anxiety (Greene-Cramer *et al.*, 2020; Riad *et al.*, 2022).



**Figure 2.** Results of the survey of the second group of citizens

Source: compiled by the authors

Access to psychological care is a serious problem for many victims. The war has severely damaged infrastructure, making it difficult to access medical and psychological services, especially in rural areas and frontline zones. Financial hardship is also a significant barrier to accessing psychological assistance. Many people have lost their jobs and housing and cannot afford paid psychological services. State support programmes often do not have sufficient funding to cover

all the needs of victims, resulting in long waiting lists and insufficient sessions for effective treatment. The social stigmatization of mental disorders remains an important barrier to receiving help. Many victims, especially men, consider going to a psychologist a sign of weakness and try to cope with their problems on their own, which often leads to a worsening of their condition. Lack of information is also an important challenge: many people simply do not know

where and how they can get psychological help. The lack of effective information campaigns and insufficient cooperation between government agencies and NGOs means that victims do not receive the support they need. In addition to these problems, family conflicts and problems with adaptation to new living conditions create additional stress for victims. IDPs often face hostility or indifference from the local population, which complicates their integration and adaptation.

**International experience and its adaptation to Ukrainian realities.** International experience in providing psychological assistance in war and crisis situations shows the effectiveness of an integrated approach that includes both medical and social aspects of support. For example, the programmes implemented by Doctors Without Borders (2024) use mobile teams of psychologists who provide assistance directly in conflict zones. This allows them to respond quickly to the needs of victims and provide timely support. In Israel, where the population often faces terrorist attacks, an effective system of crisis centres has been created that operate around the clock and provide both emergency and long-term support to victims (Grossman, 2024).

Ukrainian practices of providing psychological assistance have some common features with international approaches, but also significant differences. In Ukraine, as in many other countries, mobile teams of social and psychological assistance are used, but their number and coverage are much smaller. In addition, Ukrainian programmes are often underfunded and lack resources, which limits their effectiveness. International experience shows that the integration of psychological support into the overall health and social services system is a key success factor. For example, in the United States and Canada, integrated care approaches are actively used, where psychological support is part of general medical care, which allows for a comprehensive approach to the treatment of victims (Remien *et al.*, 2019; Moroz *et al.*, 2020; Daly & Robinson, 2021).

For the successful adaptation of international standards and practices to the Ukrainian context, it is necessary to take into account the specifics of Ukrainian realities and limited resources. The number of mobile social and psychological assistance teams should be increased and provided with adequate funding and resources. This will help to expand coverage and ensure accessibility of assistance even in remote and frontline areas. It is also important to integrate psychological support into the general healthcare system, in particular by training medical staff to work with psychological trauma and creating multidisciplinary teams that can provide comprehensive care. Remote forms of support, such as online counselling and telephone hotlines, should be developed to provide access to help for people who cannot visit a psychologist in person. It is important to implement information campaigns to reduce the stigma of mental disorders and raise public awareness of available services.

**Recommendations for improving the legislation.** In order to improve the provision of psychological assistance to civilians in wartime, several important changes to the current legislation of Ukraine are needed. First, it is necessary to increase funding for psychological assistance programmes, including both state and local budgets, and to attract international grants and assistance. Additional resources would allow for better training of specialists, purchase of necessary equipment and expansion of the network of mobile teams of

psychologists. Second, psychological support should be integrated into the general healthcare system. This can be done by amending the Law of Ukraine No. 2801-XII (1993), in particular, by adding provisions on mandatory psychological assistance as part of primary healthcare. This approach will ensure comprehensive treatment of victims and increase the effectiveness of care.

The survey results showed that affected citizens often face problems with the availability and quality of psychological assistance. In particular, the study found that 86% of respondents who experienced immediate danger feel the need for psychological support, but only 28% of them have access to it. Since mobile teams of psychologists working in the frontline areas are one of the most effective forms of assistance in the context of destroyed infrastructure, but their number and funding are insufficient, it is recommended to expand the programmes of mobile teams and provide them with adequate funding. New legislative initiatives need to be developed that take into account the specifics of psychological assistance in war. One such initiative could be the creation of a National Psychological Support Programme, which would involve coordination between different levels of government, international assistance and sustainable funding. This programme should include the development of remote forms of support, such as online counselling and hotlines, to ensure access to assistance even in remote areas.

Another important initiative is the introduction of mandatory refresher courses for psychologists working with war victims. This can be done by amending the Law of Ukraine No. 2145-VIII (2017) to include provisions on specialized training for working in crisis situations. Taking into account the results of research and analysis, the proposed legislative changes and new initiatives aim to create a more effective system of psychological assistance that will take into account the specific needs of the affected population and provide timely support. The first step in implementing the proposed changes in the provision of psychological assistance should be the development and adoption of relevant legislation that provides for increased funding for psychological support programmes, integration of psychological assistance into the general healthcare system and development of remote forms of support, including amendments to the Law of Ukraine No. 2801-XII (1993) and the creation of the National Programme of Psychological Support. The second stage should be the training and education of specialists. This involves the introduction of mandatory refresher courses for psychologists working with war-affected people through amendments to the Law of Ukraine No. 2145-VIII (2017). The third stage includes the deployment of mobile teams of social and psychological assistance and the creation of infrastructure to provide remote support, such as online consultations and hotlines.

There may be certain obstacles to implementing change that need to be considered. One of the main obstacles may be limited funding, which can be overcome by attracting international grants and assistance from organizations such as the World Health Organization (WHO) and the United Nations Children's Fund (UNICEF). It is also important to establish a transparent system for allocating funds and monitoring their use to ensure that programmes are funded effectively. Another obstacle may be the lack of qualified professionals, which can be addressed by introducing the specialized training courses described above and by engaging international

experts to train local psychologists. Stakeholder engagement is a critical step for the successful implementation of change. The main stakeholders are government agencies such as the Ministry of Health and the Ministry of Education, which will be responsible for developing and implementing new legislative initiatives. International organizations, such as WHO, UNICEF, and Médecins Sans Frontières, can provide financial and technical support, as well as help with training of local professionals. Civil society organizations and local NGOs have an important role to play in providing direct assistance to victims and informing the population about available services. It is also important to engage local communities and opinion leaders to raise awareness of the need for psychological support and reduce the stigma of mental disorders.

Identifying the main steps and stages of implementation of the proposed changes, taking into account possible obstacles and ways to overcome them, as well as engaging stakeholders are key elements for the successful reform of the psychological assistance system in Ukraine to ensure more effective and accessible support for all war-affected people, improving their mental health and quality of life.

### Discussion

The study of the psychological health of Ukrainians in the context of the Russian-Ukrainian war revealed significant gaps in current legislation and practices of assistance. It was found that the main problems relate to insufficient coordination between different agencies and services, lack of funding and resources, and the absence of specialized programmes for different categories of affected population. It was also determined that the legislation does not provide adequate training for specialists working with war victims. Based on the data obtained, recommendations were made to improve the legislation: it was proposed to increase funding for psychological assistance programmes, integrate psychological support into the general healthcare system, develop specialized programmes to improve the skills of specialists and create a National Psychological Support Programme to ensure coordination between different levels of government and attract international assistance.

The study found that the main problems are insufficient coordination between different bodies and services responsible for providing psychological support, as well as the lack of clear mechanisms for funding and resource provision of programmes. The findings highlighted the importance of a comprehensive approach to addressing these issues, including the integration of psychological support into the general healthcare system and the development of remote forms of support. A study of psychological and socio-cultural adaptation of Syrian refugees in Turkey A. Şafak-Ayvazoğlu *et al.* (2021) found that refugees face limited access to medical and psychological services, as well as psychological stress related to fleeing war and losing loved ones. The authors concluded that social support and adaptation programmes (language courses, vocational training and social integration) that are culturally sensitive can significantly improve the psychological well-being and integration of refugees into a new society. Both studies pointed to the importance of a comprehensive approach to psychological assistance, taking into account the cultural and social characteristics of the affected populations. As in the case of Syrian refugees in Turkey, affected Ukrainians need to integrate psychological support into the general healthcare system, specialized

programmes and courses, and adequate funding for the effective implementation of these programmes.

The integration of psychological support into the general healthcare system is a key aspect of improving the quality of care provided to civilians in times of war. As the number of psychosocial support teams in Ukraine is insufficient, there is an urgent need to increase funding. It is important to integrate psychological support into the general healthcare system by training medical staff to work with psychological trauma and creating multidisciplinary teams. Integrated mental health and psychosocial support interventions for refugees in humanitarian crisis settings have been studied by I. Weissbecker *et al.* (2019). The main problems were identified as high levels of PTSD, anxiety, depression, and other mental disorders among refugees fleeing violence and conflict. The study found that integrated interventions that combine medical and psychosocial support are effective in reducing mental disorders among refugees; the authors concluded that coordination between different organizations and access to comprehensive support programmes for refugees in humanitarian crisis settings is needed. P.D. McGorry *et al.* (2022) focused on the development and scaling up of integrated mental health programmes for young people. The study showed that programmes that include both medical and psychosocial support are effective in reducing mental disorders among young people, and confirmed the importance of providing funding and training for scaling up these programmes. Comparison with the Ukrainian experience has shown that a comprehensive approach to psychological care should take into account the cultural and social characteristics of affected populations, and be supported by sustainable funding to help sustain and scale up these programmes.

The results of the survey revealed significant differences in the perception of the availability and quality of psychological assistance among different categories of the population. In the first group, 28% of respondents rated the availability of psychological assistance at 4 or 5, indicating low accessibility and ineffectiveness of existing support programmes for this category. In the second group, accessibility of services was found to be much better, with 59% of respondents from less affected regions giving this parameter higher scores. In terms of the quality of assistance, 86% of respondents in the first group felt the need for psychological support, but only 40% said that the assistance they received was adequate. This indicates a significant gap between the needs and capacities of the psychological assistance system. In the second group, these figures were 72% and 61%, respectively, indicating a smaller gap and higher quality of services provided. In the study by B. Simo *et al.* (2018) revealed the factors that influence the use of mental health services among people with high levels of psychological distress and mental disorders. The main problems were identified as low utilization of mental health services among the population with high psychological needs. The researchers found that the main predictors of mental health service use are the level of social support, awareness of available services, financial accessibility and destigmatization of mental disorders. M. Kamali *et al.* (2020), for their part, revealed the problem of providing mental and psychosocial support to women and children in conflict settings. The interventions are effective in reducing PTSD, anxiety and depression, and the most effective approach was called a comprehensive approach that would include both individual and group therapy, as well

as social support. The significant gap between the need for psychological help and the actual availability and quality of services is not unique to Ukraine. The low accessibility of psychological assistance in areas of active hostilities means that even those who are most in need of support are often unable to receive it. The studies reviewed have confirmed the importance of raising public awareness of available services, reducing the stigma of mental disorders, and ensuring financial accessibility to improve the use of mental health services. It is also important to develop a comprehensive approach that includes social support and informing the population about available mental health resources.

Victims of the Russian-Ukrainian war often face numerous psychological problems, including PTSD, anxiety, and depression. A large part of the population is under constant stress, which negatively affects their daily lives and psychological well-being. As noted earlier, about 70% of people who have experienced active hostilities or occupation experience symptoms of PTSD, which indicates the seriousness of the problem and the need for qualified psychological assistance (Greene-Cramer *et al.*, 2020; Riad *et al.*, 2022). Access to psychological care remains problematic due to damaged infrastructure, especially in rural areas and front-line zones, meaning that many victims are unable to receive the necessary assistance in a timely manner, which hinders their psychological recovery. Financial difficulties are also a significant barrier, as many people have lost their jobs and homes and cannot afford paid psychological services. The impact of wartime stress on sexual health among the Israeli population was studied by A. Lazar *et al.* (2024). The study showed that this factor significantly affects sexual health, reducing satisfaction and increasing the frequency of dysfunctions. It is important to keep in mind that psychological stress has a broad impact on various aspects of a person's life, which emphasizes the importance of psychological support to improve the quality of life of victims. H. Comtesse *et al.* (2019) studied the long-term psychological consequences of the war in Bosnia and found that even 11 years after the end of the war, former refugees, IDPs and those who stayed in the country continue to experience high levels of psychological distress, while V. Rozanov *et al.* (2019) concluded that in order to effectively overcome the psychological consequences of war, it is necessary to implement comprehensive psychological support programmes that include individual and group forms of therapy, early intervention and long-term support. Long-term psychological support and rehabilitation is critical to improving the mental health of affected Ukrainians, and it is necessary to integrate such programmes into the healthcare system to ensure sustainable improvements in mental well-being.

The study found that the majority of Ukrainians faced high levels of stress, anxiety and depression, and the vast majority of respondents (86%) from the first group highly rated their need for psychological support. Such a high level of need indicates the ineffectiveness of existing support programmes, and it was concluded that new programmes need to be developed and existing ones improved. Similarly, the availability and quality of psychological assistance remains a problem – only 28% and 40% of respondents respectively rated them as high, meaning that most victims cannot receive the support they need. The study by M. Shaheen *et al.* (2020) analysed the impact of traumatic stress on the mental state of

adolescents in the context of the Israeli-Palestinian conflict. The main problems were identified as high levels of trauma, PTSD, anxiety, and chronic stress. D. Bürgin *et al.* (2022) studied the impact of war and forced displacement on children's mental health. The researchers found that children who survived war and forced displacement demonstrate high levels of psychological distress, and suffer from PTSD, anxiety, and depression. It was recommended to introduce multi-level approaches to support children's mental health, including individual therapy, group support and integration of psychosocial support into educational programmes. In all cases, it was confirmed that traumatic stress has a significant negative impact on the mental health of all age groups. In the context of Ukraine, the impact of war on children and adolescents needs to be studied in detail, as the psychological health of new generations is an important aspect of the country's post-war development. Future research should focus on the development and implementation of comprehensive psychological support programmes that take into account the specifics of the traumatic experience of children and adolescents, and special attention should be paid to studying the long-term effects of mental stress and developing early intervention strategies that will help reduce the risk of developing mental disorders in the future.

The authors of all the studies reviewed agreed on the need for state involvement in overcoming the consequences of war for the psychological health of the population, which confirmed the conclusion that funding for psychological support and rehabilitation programmes is key. Without active involvement of state resources and coordination of efforts of various organizations, it is impossible to effectively address the mental health problems of victims, so to ensure long-term improvement of the mental well-being of the population, it is necessary not only to develop and implement specialized programmes, but also to create a sustainable infrastructure for their implementation.

## Conclusions

This study on psychological assistance to the civilian population of Ukraine in the context of the Russian-Ukrainian war has identified that the current Ukrainian legislation on psychological assistance, while containing important and useful provisions, has significant shortcomings. These shortcomings include insufficient coordination between different agencies, lack of clear mechanisms for funding psychological support programmes, and limited attention to the specific needs of different categories of the population. The current Ukrainian legislation does not fully take into account the specifics of the military conflict and its consequences for the mental health of Ukrainians.

A survey of two groups of citizens revealed that respondents in the first group (those who had experienced hostilities or occupation) had a higher level of trauma than those who had been in relative safety (the second group). The findings pointed to the need to create and develop large-scale specialized support programmes that would take into account the depth of trauma and provide more intensive and long-term psychological assistance. General psychological support programmes, which may be effective for less traumatized individuals, often fail to meet the needs of IDPs and combat survivors. According to the survey, 28% of respondents in the first group rated the availability of the psychological

assistance they needed at 4 or 5, while 59% of respondents in the second group gave the same rating. These figures indicate that participants in the second group had better access to psychological assistance due to lower levels of trauma, better infrastructure and access to resources in regions that did not experience hostilities.

There is also a significant difference in the needs and perceptions of psychological assistance between the two groups of respondents: people who have directly experienced hostilities or occupation have experienced much greater mental trauma, which is why they need more intensive and specialized psychological assistance, including individual therapy, long-term medication support, and the use of specialized therapies, such as trauma therapy or cognitive behavioural therapy. In contrast, citizens who were relatively safe during the war, although they may experience stress or anxiety, do not have such deep psychological trauma. For them, general psychological support programmes, including group sessions, counselling, and other less intensive forms of assistance, can be quite effective. The information obtained helped to reveal the need for a differentiated approach to providing psychological assistance, taking into account the level of trauma and the specific needs of each population group.

The results of the study pointed to the need to reform the system of psychological assistance in Ukraine by introducing legislative changes that would increase funding for programmes, integrate psychological support into the general healthcare system, develop remote forms of support and specialized training programmes for psychologists working with war victims.

A limitation of the study was the lack of long-term follow-up of respondents, which prevented us from taking into account possible changes in psychological well-being due to improvements in the psychological assistance system, external factors and psychological adaptation of the civilian population. Further research is recommended to focus on the long-term effects of psychological trauma on different categories of the population and the effectiveness of different approaches to psychological support, which will help improve understanding of psychological well-being and develop effective approaches to improving the mental health of the population in the context of Ukraine's post-war recovery.

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### Conflict of interest

None.

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## Психологічна допомога цивільному населенню в контексті негативного впливу війни: проблема вдосконалення законодавства

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**Анотація.** Дане дослідження було спрямоване на розробку методів підвищення ефективності надання психологічної допомоги українцям, постраждалим внаслідок російсько-української війни. Для цього було проаналізовано чинне законодавство України, проведено опитування серед постраждалого цивільного населення та розглянуто міжнародний досвід надання психологічної допомоги в умовах війни та кризових ситуацій. Отримані результати продемонстрували значні прогалини в законодавстві, поданому в розглянутих нормативних документах. Виявлені слабкі місця стосувалися координації між різними службами, фінансування програм та специфічних потреб різних груп населення (дітей, жінок, літніх людей та внутрішньо переміщених осіб), що призвело до недостатньої ефективності у питанні надання психологічної допомоги та обмеженому доступі до необхідних послуг в умовах російсько-української війни. Проведене опитування респондентів щодо доступності та якості психологічної допомоги показало, що 28% респондентів групи 1 (учасники якої пережили травматичний досвід, зокрема окупації), високо оцінили доступність допомоги, тоді як у групі 2 цей показник склав 59%. Отримані дані вказали на значні відмінності в сприйнятті доступності допомоги між різними категоріями населення, що, ймовірно, пов'язано з рівнем травматизації та ефективністю наявних програм підтримки. Було виявлено, що потреби в психологічній допомозі значно перевищують доступні ресурси та обґрунтовано необхідність розширення програм допомоги та підвищення їхньої ефективності. Міжнародний досвід надання психологічної допомоги в умовах війни та кризових ситуацій показав, що інтегровані інтервенції, які поєднують медичну та психосоціальну підтримку, є ефективними у зниженні рівня психічних розладів серед біженців та постраждалих. Рекомендації щодо вдосконалення законодавства включали впровадження інформаційних кампаній для зниження стигматизації психічних розладів та підвищення обізнаності населення про доступні послуги. Отримані результати вказали на необхідність інтеграції психологічної підтримки в загальну систему охорони здоров'я та збільшення фінансування програм

**Ключові слова:** посттравматичний стресовий розлад; внутрішньо переміщені особи; дистанційна підтримка; координація зусиль; доступність послуг