

SYSTEMATIC REVIEW

Forms of personal and collective influence within the framework of social and psychological support in the field of social activity

Formas de influencia personal y colectiva en el marco del apoyo social y psicológico en el ámbito de la actividad social

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ABSTRACT

Introduction: this study was relevant due to the complex socio-psychological conditions in modern Ukraine, shaped by prolonged war, economic instability, and natural disasters. These crises negatively affected physical and psychological health, leading to increased stress, anxiety, depression, and emotional instability. In such circumstances, the need for social and psychological support became critical.

Objective: to identify the key aspects of individual and group methods of social and psychological support in social work, particularly during crisis situations.

Method: a randomized systematic review of literature published between 2018 and 2025 was conducted using the scientometric databases Web of Science, PubMed, Scopus, and Google Scholar.

Results: the results demonstrated that individual and group methods encompassed a wide range of interventions. Individual methods included counseling, cognitive-behavioral therapy, coaching, psychosocial case management, and trauma-focused approaches. Group methods comprised training, role-playing, discussions, and round tables. These methods enabled social workers to address individual needs and provide effective psychological support. It was found that psychological resilience played a crucial role in adaptation during crises. Resilience, as a resource developed through life experiences, contributed to stress management, emotional regulation, and recovery without long-term harm. Coaching, in particular, positively influenced individuals' psycho-emotional well-being.

Conclusions: the study established that individual and group methods of social and psychological support were effective tools for enhancing emotional stability, resilience, and self-efficacy during crisis conditions. The findings have both scientific and practical value for improving social work practices with affected populations in wartime Ukraine.

Keywords: Psychological Support; War; Social Work; Mental Health; Individual Methods; Group Methods.

RESUMEN

Introducción: este estudio fue relevante debido a las complejas condiciones sociopsicológicas de la Ucrania moderna, marcadas por la guerra prolongada, la inestabilidad económica y los desastres naturales. Estas crisis afectaron negativamente la salud física y psicológica, provocando un aumento del estrés, la ansiedad, la depresión y la inestabilidad emocional. En tales circunstancias, la necesidad de apoyo social y psicológico se volvió crucial.

Objetivo: identificar los aspectos clave de los métodos individuales y grupales de apoyo social y psicológico en

el trabajo social, especialmente durante situaciones de crisis.

Método: se realizó una revisión sistemática aleatoria de la literatura publicada entre 2018 y 2025 utilizando las bases de datos cienciométricas Web of Science, PubMed, Scopus y Google Scholar.

Resultados: los resultados demostraron que los métodos individuales y grupales abarcaron una amplia gama de intervenciones. Los métodos individuales incluyeron asesoramiento, terapia cognitivo-conductual, coaching, gestión de casos psicosociales y enfoques centrados en el trauma. Los métodos grupales incluyeron capacitación, juegos de rol, debates y mesas redondas. Estos métodos permitieron a los trabajadores sociales abordar las necesidades individuales y brindar un apoyo psicológico eficaz. Se descubrió que la resiliencia psicológica desempeñó un papel crucial en la adaptación durante las crisis. La resiliencia, como recurso desarrollado a través de las experiencias vitales, contribuyó al manejo del estrés, la regulación emocional y la recuperación sin perjuicios a largo plazo. El coaching, en particular, influyó positivamente en el bienestar psicoemocional de las personas.

Conclusiones: el estudio estableció que los métodos individuales y grupales de apoyo social y psicológico fueron herramientas eficaces para mejorar la estabilidad emocional, la resiliencia y la autoeficacia en situaciones de crisis. Los hallazgos tienen valor tanto científico como práctico para mejorar las prácticas de trabajo social con las poblaciones afectadas en la Ucrania en tiempos de guerra.

Palabras clave: Apoyo Psicológico; Guerra; Trabajo Social; Salud Mental; Métodos Individuales; Métodos de Grupo.

INTRODUCTION

In modern society, social and psychological support is an integral part of professional social work, especially in the context of post-traumatic crises, rising anxiety levels, social isolation, and unstable living conditions. Global social challenges such as the COVID-19 pandemic, migration crises, armed conflicts, and the consequences of environmental disasters have significantly changed people's needs for psychological stability and adaptation to new social realities. These changes highlight the need to strengthen the system of social and psychological support through the effective combination of individual and group methods of assistance.^(1,2,3,4)

Nowadays, psychological rehabilitation methods are very important for restoring a person's normal psychological state, and positive social interaction is a key factor for healthy functioning. During the war in Ukraine, the percentage of civilians and military personnel with acute stress reactions, secondary traumatization, and depressive disorders has increased, as confirmed by global reports from the WHO and UNICEF. An important negative consequence of the war for the population is the development of post-traumatic stress disorder (PTSD). According to Boiko et al.,⁽⁵⁾ Kakaje et al.,⁽⁶⁾ and Mahmood et al.,⁽⁷⁾ the average prevalence of PTSD and depression among both refugees and the population remaining in the conflict zone reaches almost 30 %. The highest rates of PTSD are found among internally displaced persons (IDPs) and refugees due to war, as well as people living in areas of active combat. In particular, among IDPs and military personnel, an increase in PTSD symptoms has been noted in some regions of Ukraine to 60-70 %.⁽⁸⁾

Scientific literature shows that women who have experienced or witnessed stressful war events are twice as likely to develop PTSD as men.^(3,9,10) In addition, the level of secondary psychological trauma among people living in risk areas who have personal traumatic experiences due to the loss of loved ones has increased significantly in wartime. This prompts social workers to develop special individual and group social support programs.

Despite the growing number of studies, a significant part of scientific work focuses on individual aspects of psychosocial support, leaving out a systematic comparison of individual and group methods of psychological support in social work. This is especially true when analyzing the impact of such methods on stabilizing the psycho-emotional state of people in a post-traumatic context of military action. Therefore, it is important to analyze the main aspects of individual and group methods of social and psychological support in social work under martial law.

The aim of this work is to analyze the main aspects of individual and group methods of social and psychological support in social work. It is necessary to conduct an analysis of scientific research, critical comments, and recommendations related to the use of social and psychological support in areas of military conflict.

Literature review

All over the world, today's challenges (wars, pandemics, hunger, natural disasters, and socioeconomic crises) are affecting people's physical and mental health. For example, the recent COVID-19 pandemic and military aggression have caused a massive humanitarian crisis and totally changed everyday life in Ukraine. In times of crisis, the disruption of negative emotions such as fear, anger, hatred, disappointment, sadness, humiliation, uncertainty, and hopelessness affect a person's mental state.^(11,12)

Researchers Chayka and Zelenin,⁽¹³⁾ Garay-Rondero et al.,⁽¹⁴⁾ Quintero et al.,⁽²⁾ Hora et al.⁽¹⁵⁾ note that targeted psychological support is necessary for the Ukrainian population to live a full life in times of crisis. With professional individual and group support, it is possible to solve personal problems and develop emotional and interpersonal skills. Thus, the ability of civilians to effectively cope with psychological difficulties is associated with the level of the body's adaptive mechanisms,⁽¹⁶⁾ resilience,⁽¹⁷⁾ and endurance.⁽¹⁸⁾ An analysis of scientific studies by Zhuravleva et al.,⁽¹⁹⁾ Nerubasska et al.,⁽²⁰⁾ and Zelenin⁽²¹⁾ indicates not only the state of psychophysiological resources but also the potential personal capabilities of individuals that are necessary to overcome stress and restore a normal psychological state.

The authors Wippich et al.,⁽²²⁾ Zelenin,⁽²³⁾ Heeren et al.,⁽²⁴⁾ Tsurkan-Saifulina⁽²⁵⁾ note that individual methods of social and psychological support are the basis for building personalized intervention strategies. These include individual counseling, cognitive-behavioral therapy, coaching, psychosocial case management approaches, trauma work, etc. They allow not only to establish trusting contact with a person, but also to develop a personal plan for stabilizing their psycho-emotional state. Studies show that such methods contribute to reducing anxiety, stress, depressive symptoms, and increasing self-confidence in social service clients.⁽²⁴⁾

At the same time, group support methods demonstrate high effectiveness in working with individuals who are maladjusted or have experienced traumatic events. These include support groups, self-help groups, art therapy, training, and cognitive behavioral therapy (CBT) groups. Group interaction reduces feelings of isolation, fosters a sense of belonging, and increases empathy and social cohesion.⁽²⁶⁾ According to Davis et al.⁽²⁷⁾ and Médecins Sans Frontières,⁽²⁶⁾ group interventions effectively influence cognitive stress coping strategies and contribute to long-term psychological resilience.

It should also be noted that the choice and effectiveness of individual and group methods largely depends on the professional training of the specialist, the context in which social work is carried out, and the level of resource availability.

In their work, Kandiuk-Lebid et al.⁽²⁸⁾ note that in order to provide effective social and psychological assistance, it is necessary to continuously develop and improve the professional skills of social workers. Competence development is particularly important in light of current challenges and constraints. Thus, finding themselves in restricted conditions due to the COVID-19 pandemic and military aggression, social workers had to change the forms of social and psychological assistance they provided. This required professional development and mastery of new methods and technologies. There are certain factors that influence personality and contribute to self-development and the acquisition of new professional competencies.⁽²⁹⁻³²⁾ In response, social workers implement various individual and group methods of social and psychological support. However, there are a number of unresolved issues that complicate the effectiveness of these methods in the context of martial law.

Aims of the study

The aim of this work is to analyze the main aspects of individual and group methods of social and psychological support in social work. It is necessary to conduct an analysis of scientific research, critical comments, and recommendations related to the use of social and psychological support in areas of military conflict.

The following tasks were set to achieve this goal:

- To study the current state of the problem based on scientific literature and identify the main aspects of social and psychological support in social work.
- To assess the impact of contemporary challenges, such as war, on the psychological state of the Ukrainian population.
- To analyze individual and group methods of social and psychological support in the context of war in Ukraine.

METHOD

Within the framework of this work, a generalized analysis of modern methods of social and psychological support implemented in social work in Ukraine under martial law was conducted. The research was carried out using comparative analysis, analysis of reports from international organizations, and thematic generalization of scientific data.

The analysis included 54 scientific works published over the last seven years. To check out the literature on the current state of the problem, it was used databases like Scopus, PubMed, Web of Science, and Google Scholar. The search terms included "psychological support," "war," "social work," "mental health," "individual methods," "group methods," and "resilience."

Research design

This study was conducted according to the design presented in Figure 1. The methodology was based on a case study approach, which includes a bibliometric analysis of individual and group methods of social and

psychological support in social work. This approach allows for an in-depth analysis of data on the problem of choosing effective interventions in social work in crisis situations, namely military operations.

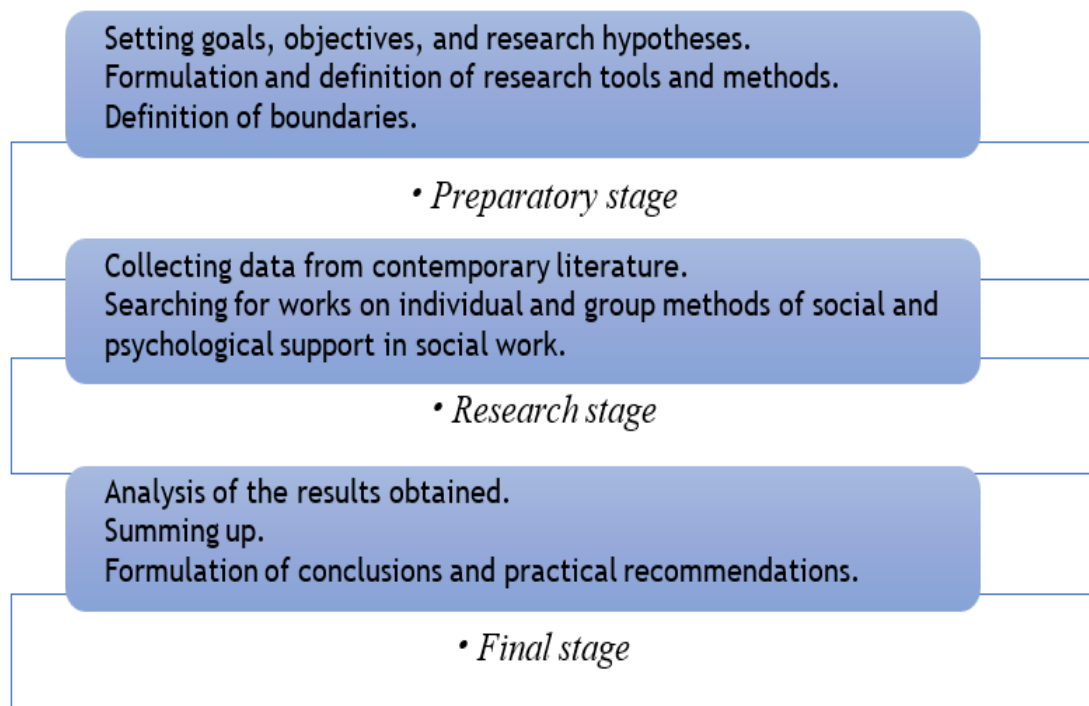


Figure 1. Research design

At the beginning of the work, an analysis of contemporary scientific literature by both Ukrainian and foreign authors was conducted, the goals and objectives of the study were set, a sample was selected, and the tools, methods, and scope of the study were determined.

During the second stage, the data on individual and group methods of social and psychological support in social work were collected. The data for this study were gathered from various sources, including scientific articles, reports, monographs, and Internet resources. In addition, the data from reports of international organizations were used in the study.

At the final stage of the work, the research data was analyzed, conclusions were drawn, and practical recommendations were formulated. The collected data was evaluated using a qualitative approach. The analysis also included a comparison of the data with the available contemporary literature on the subject and the identification of unresolved issues.

Research limitations

The study is based on literature data, without direct involvement of respondents, which limits the generalization of results regarding subjective experiences of individual and group methods of social and psychological support in the context of military operations in Ukraine. The results are also analytical rather than statistically representative in nature and are intended to provide a comprehensive overview of existing individual and group interventions.

RESULTS

The martial law in Ukraine has led to an unprecedented demand for psychosocial support among people who have experienced combat, occupation, forced displacement, loss of loved ones, and sexual violence. In these conditions, social workers and psychologists have been faced with the challenge of developing and implementing new methods of social and psychological support.⁽⁸⁾

It should be noted that social work is based on a deep understanding of various theories, models, and approaches for effectively supporting individuals, population groups, and communities. By applying effective practices and a variety of methods in their work, social workers can offer individualized, person-centered approaches that contribute to improving psychological well-being.⁽³³⁾ Along with individual methods, group support methods (psychological counseling, psychological correction, psychological rehabilitation, psychological training) are widely used; the organization of support groups enables victims to share their experiences and

receive support from others with similar problems. This approach helps strengthen social ties and reduces feelings of isolation and loneliness.⁽³⁴⁾

A social worker can create a group to support people in a particular area with serious mental health problems or veterans who are struggling to find their place in society. Group methods of social and psychological support (social and psychological training and art therapy) help people support each other in stressful situations, adapt to life changes, and effectively overcome psychological trauma and relationship changes.

The study by Poudel-Tandukar *et al.*⁽³⁵⁾ was conducted among 31 Ukrainian refugees who received interventions once a week for 5 weeks. These interventions consisted of 5 modules: stress management and physical exercises for the mind and body, strengthening communication and social networks, problem solving, and creating a healthy family environment. As a result, post-intervention scores decreased for anxiety (61,29 % vs. 22,58 %) and depression (58,06 % vs. 22,58 %). The average scores decreased significantly compared to pre- and post-intervention scores by 6,26 points for stress, 7,07 points for anxiety, and 6,29 points for depression (both $p < 0,01$). The average scores increased significantly for coping (by 15,71), emotionally-oriented engagement (4,48), problem-oriented engagement (4,80), social support (8,77), problem-oriented self-efficacy in coping (14,93), cessation of unpleasant emotions and thoughts (12,74), and establishing relationships with friends (3,48; all $p < 0,01$).

Research by Kiro *et al.*⁽³⁶⁾ confirms the effectiveness of CBT among 104 Ukrainians with PTSD: after 180 days of intervention, depression and anxiety levels decreased from $2,37 \pm 1,18$ to $1,98 \pm 1,03$ ($p=0,037$), and the quality of life on the VAS scale increased from $48,23 \pm 23,04$ to $69,76 \pm 17,91$ ($p<0,0001$). A similar effect of CBT on PTSD symptoms was found in the study by Klymenko *et al.*,⁽³⁷⁾ which demonstrated the effectiveness (60,0 %) of this method.

Social and psychological support is an integral part of social work, as it helps restore personal resources and facilitates adaptation to changes in crisis situations, strengthens social ties and support networks, and improves quality of life.

Nowadays, the main components of social and psychological support have been identified (figure 2), including emotional support, which is provided by social workers and enables individuals to control their emotions and feelings. Thanks to informational support, individuals receive important resources and information about social services, rights, and available services. In addition, educational support plays an important role, including training and seminars on developing social skills, coping with stressful situations, and providing recommendations on how to act in difficult situations. With psychological support, people can overcome mental disorders, anxiety, and depression.

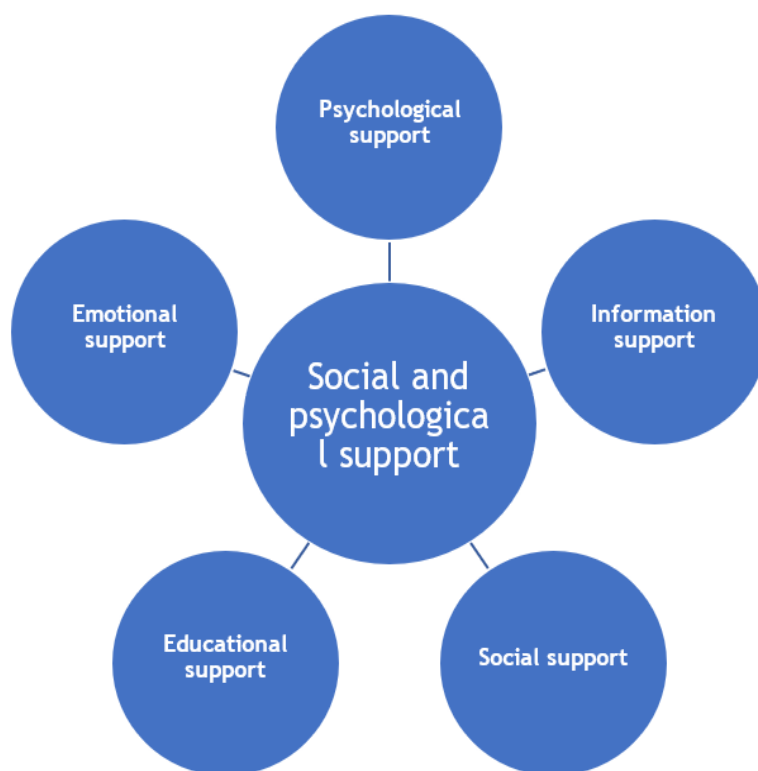


Figure 2. Main components of social and psychological support

At the same time, a person's psychological resilience plays an important role, influencing the success and effectiveness of psychological support. It is resilience that determines a person's ability to adapt their body to crises and helps them overcome stress and difficulties. This leads to personal strengthening and positive reorganization, promoting positive adaptations; a person can rethink their overall view of life, perceive challenges positively, and use them for growth.^(2,38,39) Personal anti-stress skills and the ability to control one's emotions are of great importance.^(40,41)

The challenges of modern life in Ukraine have changed the usual conditions and opportunities for providing social and psychological assistance. Accordingly, intervention methods have been adapted to the crisis context. For example, CBT and first psychological aid have been modified for use in field conditions: shelters, evacuation points, and mobile crisis teams. Psychoeducational programs have been simplified into short sessions held in crowded places, shelters, resilience centers, etc. Mobile psychological teams have been created to respond to incidents. In addition, psychosocial support is becoming part of comprehensive assistance in humanitarian missions and volunteer programs. Online and remote formats of assistance are widely used, especially for military personnel and their families. Video calls, chats, and mobile applications are available to support people who cannot or do not want to interact in person.

The main challenges in providing psychosocial assistance to civilians and military personnel in Ukraine under martial law include:

- limited access to services in conflict areas (many regions of Ukraine, especially those near the front line, have limited access to social and psychological services due to danger, infrastructure destruction, and a lack of specialists), which complicates the provision of both individual and group support;
- high levels of professional burnout among social workers (social workers providing assistance in war conditions often face high levels of stress and emotional burnout);
- Insufficient training to work with traumatized clients (many social workers do not have sufficient training to work with clients who have experienced traumatic events such as sexual violence, loss of loved ones, or forced displacement), which limits the effectiveness of both individual and group support methods.
- cultural and social barriers, stigmatization of mental disorders, and seeking psychological help remains common in Ukrainian society, especially for men and military personnel, who may consider seeking help a sign of weakness;
- the lack of a systematic approach and coordination, despite numerous initiatives, the absence of a unified national strategy and coordination between different organizations leads to duplication of efforts and inefficient use of resources;
- limited research on the effectiveness of methods; there is a lack of empirical studies evaluating the effectiveness of various individual and group methods of social and psychological support in wartime, which complicates the implementation of evidence-based practices in social work.

The most common strategies for overcoming contemporary challenges include individual and group social psychological methods, CBT, PFA psychological assistance, emotional regulation, social support, adaptive coping mechanisms, art therapy, and EMDR therapy (table 1).

Table 1. Comparison of methods of social and psychological support

Method	Target group	Form of implementation	Example of implementation
Cognitive behavioral therapy (CBT)	Military personnel, IDPs, women, and children	Individual sessions / online	Integrative Therapy Center, Sumy
First psychological aid (PFA)	Civilian population, IDPs, victims of violence	Mobile teams, shelters, centers	Mobile teams in Kyiv, Bucha
Art therapy	Children, wounded military personnel, IDPs	Group classes, workshops	Social Innovation Center, Lviv
Psychoeducational support groups	IDPs, women, military families	Group training sessions, webinars	UA-CARE Project, NGO Development Fund
EMDR therapy	Military personnel, victims of torture, witnesses of war crimes	Individual sessions at specialized centers	Doctors Without Borders, Lesnaya Polyana Center
Coaching	Military personnel, IDPs, women, children	Individual and group	Psychological assistance and rehabilitation centers in various cities

Source: Created by the author based on data from UNDP⁽⁴²⁾

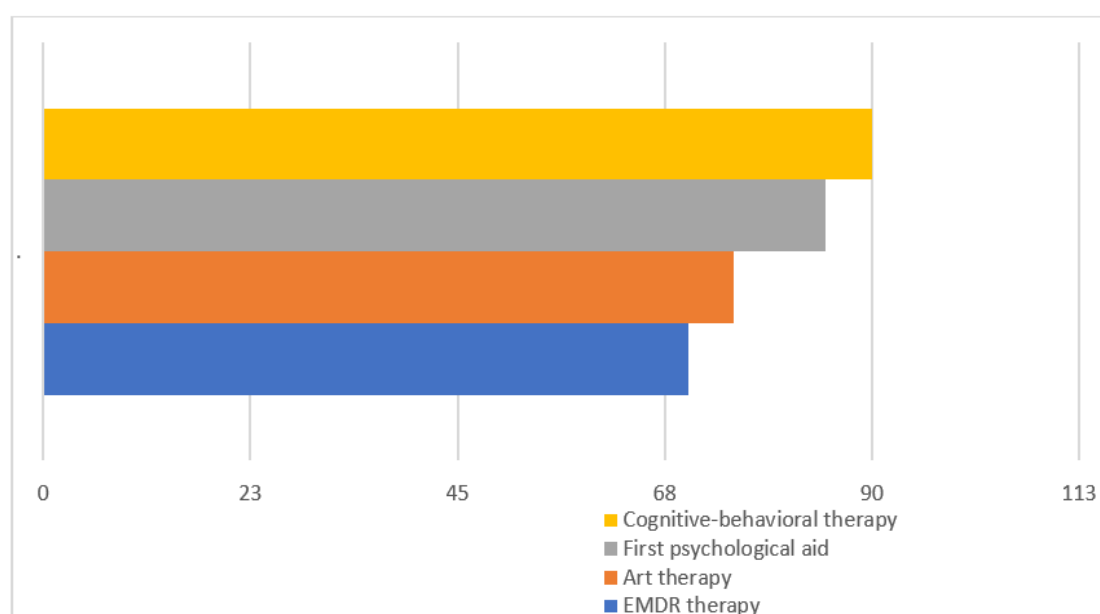
One of the most effective methods of psychological assistance to the Ukrainian population in the context of modern crises is individual and group coaching to identify the deep potential of the individual and maximize

the realization of this potential in current social crises. Coaching can take the form of self-coaching—the application of coaching techniques to help oneself. The use of coaching is advisable in the prevention of psychological instability.^(43,44)

Individual and group training and coaching optimize and develop various individual abilities. Coaching has been shown to provide emotional support and help people overcome difficulties, positively influence motivation levels, improve well-being, and increase overall work performance. According to researchers Kulichenko and Boichenko,⁽³⁸⁾ coaching allows a person to better understand their strengths and weaknesses, as well as to realize the impact of stress on their behavior and decisions. Coaching provides emotional support and helps overcome difficulties, contributing to professional and personal self-realization. Understanding one's strengths and weaknesses allows a person to better assess their capabilities, choose directions for personal development, and manage their emotions. Meanwhile, the ability to recognize and manage one's emotions, as well as those of others, helps in communication and relationship building in society.

According to the results of multicenter studies covering countries in Europe, Canada, the US, and Australia, the use of a combination of individual and group approaches has a synergistic effect that has a positive impact on a person's psychosocial state.⁽⁴⁵⁾ In the context of psychosocial work with IDPs, combat veterans, and people who have experienced loss or prolonged isolation, combined methods show significantly higher levels of intervention effectiveness compared to mono-models.

The diagram below shows a conditional assessment of the effectiveness and level of application of the five main support methods in social work during martial law in Ukraine (figure 3).



Source: Created by the author based on data from UNDP⁽⁴²⁾

Figure 3. Assessment of the level of application of methods (conditional scale %)

A comparative analysis shows that PFA (85 %) and CBT (90 %) have the highest coverage thanks to the support of international programs and flexibility in implementation formats. Group support forms—psychoeducational sessions and art therapy—are particularly effective for IDPs and women. Specialized methods (EMDR) are gradually being integrated into the support system, covering people with severe traumatic experiences who have suffered the loss of loved ones, violence, and physical injury. The spread of these practices is the basis for the sustainable development of the social and psychological support system in Ukraine under martial law.

Particular attention should be paid to social and psychological training for military personnel, aimed at developing communication skills, promoting military team spirit, stimulating personal growth, developing creative abilities, adaptive skills, conflict-free and positive communication, relieving emotional tension, relaxation, etc. Work with military personnel is carried out using specific methods that can be successfully applied in the course of social and psychological training. These include role-playing games, case studies, brainstorming, relaxation exercises, feedback techniques, and art therapy. The above data indicate the extraordinary diversity of forms and methods of training work. Thus, the use of training is a guarantee of the effectiveness of social work with military personnel and their families.⁽⁴⁶⁾

Stepwise interventions aimed at eliminating self-organization disorders using skill-based strategies, combined with trauma-focused interventions, represent one of the most promising approaches to emotional

dysregulation and interpersonal problems in veterans. Trauma-focused cognitive behavioral therapy has been the most effective approach to psychological work with Iraq veterans in the US.^(25,47,48,49) In addition, group support methods and virtual reality techniques are used as a means of exposure therapy (VRET).^(50,51)

Military personnel and veterans in the US with complex psychological disorders, including PTSD, depression, sleep apnea, and chronic pain, experienced positive changes after CBT.⁽⁴⁷⁾ A recent meta-analysis by Liu et al. (48) also found a significant effect of CBT on PTSD and depression symptoms ($g = 0,54$, $SE = 0,04$, 95 % CI (0,45; 0,62), $Z = 12,32$, $p < 0,001$). In another study, Monson et al.⁽⁴⁹⁾ found a positive effect of CBT in US veterans and military personnel on PTSD symptoms, which was 1,71 (1,01, 2,36) (Hedges' effect size).

In studies by Beidel et al.,⁽⁵⁰⁾ individual VRET was compared with conventional group psychotherapy in an intensive outpatient setting. PTSD symptoms, sleep quality, levels of depression, anger, guilt, and social isolation were assessed after treatment and at 3 and 6 months of follow-up. VRET resulted in a significant reduction in symptoms, and 65,9 % of combatants no longer met the diagnostic criteria for PTSD. However, VRET did not provide optimal treatment outcomes for all PTSD-related problems. Reductions in depression and anger were significant, but none of the interventions improved sleep, and reliable reductions in social isolation occurred only in participants who received group therapy. The positive effects of treatment were maintained during the 6-month follow-up.

The effects of VRET are mainly observed for depressive symptoms, with a dose-response relationship: the more VRET sessions, the more often patients reported improvement. A sustained reduction in PTSD symptoms was demonstrated 3 and 6 months after completion of the VRET course.⁽⁵¹⁾

DISCUSSION

It should be noted that economic crises, rapid technological development, pandemics, and wars require people to be flexible in their thinking, adapt quickly to new living conditions, have a high level of motivation and life values, and engage in continuous self-development.^(28,52) The war in Ukraine has triggered negative processes that have led to an economic crisis, financial instability, accelerated inflation, and intensified destructive processes in many sectors. As a result, people experience stress and depression, feelings of fear, anxiety, negative emotions, and uncertainty about the future.^(11,1,2) In addition, the war has disrupted the normal rhythm of life and the social environment conducive to personal socialization, creating new categories of people in need of psychological and social support. This category includes civilians affected by the hostilities, as well as military personnel and their families. This raises the critical issue of improving social work methods. At the same time, great attention is paid to the possibility of psychological support and the prevention of psychological disorders in various social groups.⁽⁴⁶⁾

The results of the analysis indicate the active implementation of various methods of social and psychological support in Ukraine under martial law. In particular, methods such as CBT, first psychological aid, coaching, art therapy, and EMDR therapy have been adapted to the needs of various target groups, including military personnel, IDPs, women, and children.

Individual social and psychological support methods, such as CBT and EMDR, have been shown to be effective in reducing PTSD symptoms and anxiety among military personnel and IDPs. Group methods, including art therapy and CBT, have been found to be particularly beneficial for children and women affected by war. Art therapy, in particular, helps children express their emotions and reduce anxiety through creativity.^(53,54)

CBT is an important tool in providing psychological assistance to war victims in Ukraine. It helps people cope with traumatic experiences, improve their emotional state, and find internal resources to overcome life's challenges. Group therapy reduces feelings of isolation, improves social connections, and creates a supportive environment that promotes stress and trauma recovery. An important aspect is the development of effective communication and interpersonal skills, which increases clients' ability to build healthy and supportive relationships.^(55,56)

However, despite the positive results, there are challenges and limitations in implementing these methods. One of the main challenges is the lack of qualified professionals, especially in rural and frontline areas. In addition, limited resources and infrastructure make it difficult for everyone who needs it to access quality psychosocial support.⁽²⁶⁾

International experience also plays an important role in shaping effective support strategies. For example, programs implemented in other countries that have experienced conflict can be adapted to the Ukrainian context, taking into account cultural and social characteristics.^(57,58)

Based on the analysis, the following practical recommendations are proposed to improve social and psychological support in social work under martial law in Ukraine:

1. *Integration of mixed approaches.* It is recommended to combine individual and group support methods, as their synergistic effect contributes to a more comprehensive coverage of the needs of different target groups (military personnel, IDPs, women, children).
2. *Wider use of digital technologies.* To ensure access to assistance in frontline and remote areas,

telemedicine platforms, mobile applications, and online counseling should be used.

3. *Standardization of professional training.* Professional training programs for social workers on trauma, PTSD, and crisis counseling should be introduced. Such programs should include practical case studies and self-regulation elements to prevent professional burnout.

4. *Support for employees themselves.* The introduction of support groups and supervision for social workers should become part of the assistance system. This will help preserve the psychological and emotional resources of staff.

5. *Development of a national strategy.* It is recommended to develop a unified national strategy for coordinating psychosocial assistance in order to avoid duplication of efforts and increase effectiveness.

6. *Institutional partnership.* Promote active interaction between government agencies, international agencies, and volunteer teams to implement large-scale psychosocial support programs based on best international practices.

7. *Effectiveness monitoring.* Introduce a system for monitoring the results of interventions using validated psychometric tools and periodic reassessment (after 3, 6, and 12 months). This will help identify effective interventions to address the challenges of war for specific social groups in Ukraine.

The results of this study can be used as a basis for strategic planning, developing standards for providing assistance, training specialists, and forming a system for evaluating the quality of mental health services during and after military conflicts.

Prospects for further research

Further quantitative assessment of the effectiveness of the implemented methods using standardized psychometric scales is necessary. Study of the subjective experience of aid recipients through qualitative interviews and focus groups with representatives of different target groups. Assessment of the sustainability of the impact of social and psychological support through repeated measurements of the state after 6-12 months.

CONCLUSIONS

The analysis revealed that, in the context of full-scale war in Ukraine, social and psychological support has become a critically important component of the social work system. The main task of social and psychological support is to restore a person's emotional orientation in difficult life situations, to acquire experience of emotional self-regulation at a deep personal level, and to actualize internal resources for harmonious relationships with oneself and one's environment. A study of the practices implemented has identified five main methods that have proven to be the most adapted to the needs of the population during wartime: cognitive-behavioral therapy, first psychological aid, art therapy, coaching, and EMDR therapy.

REFERENCES

1. Lass-Hennemann J, Sopp MR, Ruf N, Equit M, Schäfer SK, Wirth BE, et al. Generation climate crisis, COVID-19, and Russia-Ukraine war: global crises and mental health in adolescents. *Eur Child Adolesc Psychiatry*. 2024;33(7):2203-16. <https://doi.org/10.1007/s00787-023-02300-x>
2. Quintero R, Pertuz L, Mosalvo J, Amador E, Portnoy I, Acuña-Rodríguez M, Córdova A. Analysis of self-efficacy and attitude-mediated inclusivity in higher education: a case study on the Colombian North Coast. *Procedia Comput Sci*. 2024;231:539-44. <https://doi.org/10.1016/j.procs.2023.12.247>
3. Myroniuk I, Slabkyi H, Shcherbinska O, Bilak-Lukianchuk V. The consequences of the war with the Russian Federation for public health in Ukraine. *Womens Reprod Health*. 2022;8:26-31. <https://doi.org/10.30841/2708-8731.8.2022.273291>
4. Koliadenko NV, Zhyvaho KS, Bursa AI. Provision of medical-psychological and psychiatric care to patients with post-COVID syndrome in telemedicine conditions. *Bangladesh J Med Sci*. 2022;21(4):719-30. <https://doi.org/10.3329/bjms.v21i4.60256>
5. Boiko DI, Shyrai PO, Mats OV, Karpik ZI, Rahman MH, Khan AA, et al. Mental health and sleep disturbances among Ukrainian refugees in the context of Russian-Ukrainian war: A preliminary result from online-survey. *Sleep Med*. 2024;113:342-8. <https://doi.org/10.1016/j.sleep.2023.12.004>
6. Kakaje A, Al Zohbi R, Hosam AO, Makk L, Alyousbash A, Alhaffar MBA. Mental disorder and PTSD in Syria during wartime: a nationwide crisis. *BMC Psychiatry*. 2021;21(1):2. <https://doi.org/10.1186/s12888-020-03002-3>

7. Mahmood HN, Ibrahim H, Goessmann K, Ismail AA, Neuner F. Post-traumatic stress disorder and depression among Syrian refugees residing in the Kurdistan region of Iraq. *Confl Health*. 2019;13:51. <https://doi.org/10.1186/s13031-019-0238-5>
8. Ben-Ezra M, Goodwin R, Leshem E, Hamama-Raz Y. PTSD symptoms among civilians being displaced inside and outside the Ukraine during the 2022 Russian invasion. *Psychiatry Res*. 2023;320:115011. <https://doi.org/10.1016/j.psychres.2022.115011>
9. Shalev AY, Gevonden M, Ratanatharathorn A, Laska E, van der Mei WF, Qi W, et al. Estimating the risk of PTSD in recent trauma survivors: results of the International Consortium to Predict PTSD (ICPP). *World Psychiatry*. 2019;18(1):77-87. <https://doi.org/10.1002/wps.20608>
10. Frankova I, Chaba O, Burlak O. Gender specifics of stress-associated disorders in military servicemen during the war in Ukraine. *Psychosom Med Gen Pract*. 2019;4(3):e0403-04214.
11. Cosic K, Kopilas V, Jovanovic T. War, emotions, mental health, and artificial intelligence. *Front Psychol*. 2024;15:1394045. <https://doi.org/10.3389/fpsyg.2024.1394045>
12. Levchenko VO, Podolyaka AM, Zelensky SM. Economic and psychological aspect of legal support of probation. *Soc Leg Stud*. 2022;5(4):64-9. <https://doi.org/10.32518/2617-4162-2022-5-4-64-69>
13. Chayka R, Zelenin V. Exploring the relationship between Personality and Subjective Career Success: A Study of the Big Five Traits Among Ukrainian IT Specialists. *Conhec Divers*. 2024;16(41):347-75. <https://doi.org/10.18316/rcd.v16i41.11504>
14. Garay-Rondero CL, Caratozzolo P, Membrillo-Hernández J, Busciantella-Ricci D. Framework for inclusive design: an interdisciplinary, experiential learning approach in engineering education. In: 2022 IEEE Global Engineering Education Conference (EDUCON); 2022 Apr 28; Tunis, Tunisia. p. 2071-6. <https://doi.org/10.1109/EDUCON52537.2022.9766517>
15. Hora A, Kalinin A, Lebedev O. Economic legal and psychological aspects of the introduction of social entrepreneurship in Ukraine. *Soc Leg Stud*. 2023;6(1):17-24. <https://doi.org/10.32518/sals1.2023.17>
16. Ghosn F, Chu T, Simon M, Braithwaite A, Frith M, Jandali J. The journey home: violence, anchoring, and refugee decisions to return. *Am Polit Sci Rev*. 2021;115:982-98. <https://doi.org/10.1017/S0003055421000344>
17. Mao W, Agyapong VIO. The role of social determinants in mental health and resilience after disasters: implications for public health policy and practice. *Front Public Health*. 2021;9:658528. <https://doi.org/10.3389/fpubh.2021.658528>
18. Slezackova A, Malatincova T, Millova K, Svetlak M, Krafft AM. The moderating effect of perceived hope in the relationship between anxiety and posttraumatic growth during the Russian-Ukrainian war. *Front Psychol*. 2024;15:1440021. <https://doi.org/10.3389/fpsyg.2024.1440021>
19. Zhuravleva LP, Baranova AV. Emotional needs and coping strategies of adult Ukrainians in wartime. *Slobozhanskyi Sci Bull Ser Psychol*. 2024;2:20-6. <https://doi.org/10.32782/psyspu/2024.2.4>
20. Nerubasska A, Palshkov K, Maksymchuk B. A systemic philosophical analysis of the contemporary society and the human: new potential. *Postmod Open*. 2020;11(4):275-92. <https://doi.org/10.18662/po/11.4/235>
21. Zelenin VV. Psychological aspects of self-development and self-fulfillment of teachers in the system of higher education in a European country through coaching. *Sci Notes VI Vernadsky Taurida Natl Univ Ser Psychol*. 2024;35(74)(2):72-80. <https://doi.org/10.32782/2709-3093/2024.2/13>
22. Wippich A, Howatson G, Allen-Baker G, Farrell D, Kiernan M, Scott-Bell A. Eye movement desensitization reprocessing as a treatment for PTSD in conflict-affected areas. *Psychol Trauma*. 2023. Advance online publication. <https://doi.org/10.1037/tra0001430>
23. Zelenin V. Coaching in the development of leadership qualities of heads of Ukrainian business organizations

in the conditions of war. *J Law Sustain Dev.* 2023;11(3):e817. <https://doi.org/10.55908/sdgs.v11i3.817>

24. Heeren A, Bernstein EE, McNally RJ. Bridging maladaptive social self-beliefs and social anxiety: a network perspective. *J Anxiety Disord.* 2020;74:102267. <https://doi.org/10.1016/j.janxdis.2020.102267>

25. Tsurkan-Saifulina YV. Social and psychological rehabilitation of war veterans. *Sci Bull Mukachevo State Univ Ser Pedagog Psychol.* 2022;8(4):96-104. [https://doi.org/10.52534/msu-pp.8\(3\).2022.96-104](https://doi.org/10.52534/msu-pp.8(3).2022.96-104)

26. Médecins Sans Frontières. Mental health and psychosocial support in Ukraine: operational roadmap. 2023. <https://mhpsshub.org/wp-content/uploads/2024/03/ARQ-desk-review-2024-MHPSS-in-Ukraine.pdf>

27. Davis RS, Meiser-Stedman R, Afzal N, Devaney J, Halligan SL, Lofthouse K, et al. Systematic review and meta-analysis: Group-based interventions for treating posttraumatic stress symptoms in children and adolescents. *J Am Acad Child Adolesc Psychiatry.* 2023;62(11):1217-32. <https://doi.org/10.1016/j.jaac.2023.02.013>

28. Kandiuk-Lebid S, Mazur V, Oleksiuk O, Starieva A, Chumachenko O, Shevchenko O. Developing inclusive competence of future socionomic specialists to meet modern challenges and constraints. *Multidiscip Rev.* 2024;7:2024spe043. <https://doi.org/10.31893/multirev.2024spe043>

29. Tadimalla SY, Latulipe C, Maher S, Mejjas M, Payton J, Rorrer A. Enabling investigation of impacts of inclusive collaborative active learning practices on intersectional groups of students in computing education. 2023 IEEE Frontiers in Education Conference (FIE); 2023 Oct 18-21; College Station, TX, USA. p. 1-10. <https://doi.org/10.1109/FIE58773.2023.10343317>

30. Paulmani G. Improving research skills with lean-agile-based instruction: lean-agile led, analytics oriented platform for flexible, self-regulated, inclusive learning. 2020 IEEE 20th International Conference on Advanced Learning Technologies (ICALT); 2020 Jul 6-9; Tartu, Estonia. p. 387-9. <https://doi.org/10.1109/ICALT49669.2020.00122>

31. Kozlovskiy Y, Ievliev O, Mykytyuk O, Tiurina T, Say D. Características da formação da competência pedagógica de um professor universitário nos principais países do mundo. *Rev Tempos Espaço Educ.* 2022;15(34):e17033. <https://doi.org/10.20952/revtee.v15i34.17033>

32. Bernarto I, Bachtar D, Sudibjo N, Suryawan IN, Purwanto A, Asbari M. Effect of transformational leadership, perceived organizational support, job satisfaction toward life satisfaction: Evidences from Indonesian teachers. *Int J Adv Sci Technol.* 2020;29(3):5495-503. <http://serisc.org/journals/index.php/IJAST/article/view/6057>

33. Methods of Social Work. A comprehensive guide to social work practice theories, approaches, and models. 2020. <https://www.portmanrecruitment.com/methods-of-social-work/>

34. Jukic M, Malenica L, Duricic V, Talapko J, Lukinac J, Jukic M, et al. Long-term consequences of war captivity in military veterans. *Healthcare (Basel).* 2023;11(14):2-325. <https://doi.org/10.3390/healthcare11141993>

35. Poudel-Tandukar K, Davis C, Mosijchuk Y, Poudel KC. Social and emotional well-being intervention to reduce stress, anxiety, and depression among Ukrainian refugees resettled in Massachusetts. *Int J Soc Psychiatry.* 2024;70(8):1461-9. <https://doi.org/10.1177/00207640241270870>

36. Kiro L, Urbanovych A, Zak M. Intervention impact on quality of life in Ukrainians with post-traumatic stress disorder. *BMC Psychol.* 2024;12:601. <https://doi.org/10.1186/s40359-024-02109-6>

37. Klymenko I, Reva M, Lobanov S, Lahodzinskiy V, Zaichykova T. A scoping review of the effectiveness of cognitive-behavioral therapy in reducing PTSD symptoms in military personnel. *Amazonia Investiga.* 2024;13(83):112-25. <https://doi.org/10.34069/AI/2024.83.11.9>

38. Kulichenko A, Boichenko M. Origins of medical education on the territory of modern Ukraine. *AD Alta.* 2021;11(1):157-61. <https://doi.org/10.33543/1101157161>

39. Filonenko L, Demchenko I, Shakhina I, Klochok O, Borozentseva T, Bieloliptsev V. Developing a values-

based attitude towards people in adolescent rehabilitation centres: Neurophysiological patterns. *BRAIN Broad Res Artif Intell Neurosci*. 2022;13(2):76-96. <https://doi.org/10.18662/brain/13.2/333>

40. Hossain ANMZ. Educational crisis of Rohingya refugee children in Bangladesh: Access, obstacles, and prospects to formal and non-formal education. *Heliyon*. 2023;9:e18346. <https://doi.org/10.1016/j.heliyon.2023.e18346>

41. Prib HA, Beheza LE, Markova MV, Raievska YM, Lapinska TV, Markov AR. Psycho-emotional burnout of the personality in the conditions of war. *J Intellect Disabil Diagn Treat*. 2023;11(1):36-46. <https://doi.org/10.6000/2292-2598.2023.11.01.5>

42. United Nations Development Programme (UNDP). Social services management in war conditions. 2024. <https://www.undp.org/sites/g/files/zskgke326/files/2023-03/>

43. Lee MCC, Idris MA, Tuckey M. Supervisory coaching and performance feedback as mediators of the relationships between leadership styles, work engagement, and turnover intention. *Hum Resour Dev Int*. 2018;22(3):257-82. <https://doi.org/10.1080/13678868.2018.1530170>

44. Hryshchenko M, Zelenin V. Self-realization strategies and their impact on mental health in the context of professional development. *Salud Cienc Tecnol Conf Ser*. 2025;4:688. <https://doi.org/10.56294/sctconf2025688>

45. Shapiro CJ, Watson MacDonell K, Moran M. Provider self-efficacy in delivering evidence-based psychosocial interventions: a scoping review. *Implement Res Pract*. 2021;2:2633489520988258. <https://doi.org/10.1177/2633489520988258>

46. Logvinova O, Rasskazova O. Social work with military personnel and their families in the context of the protracted conflict in eastern Ukraine. *Soc Work Soc Educ*. 2021;2(7):61-71. [https://doi.org/10.31499/2618-0715.2\(7\).2021.244086](https://doi.org/10.31499/2618-0715.2(7).2021.244086)

47. Kelly MR, Robbins R, Martin JL. Delivering cognitive behavioral therapy for insomnia in military personnel and veterans. *Sleep Med Clin*. 2019;14(2):199-208. <https://doi.org/10.1016/j.jsmc.2019.01.003>

48. Liu JJ, Ein N, Forchuk C, Wanklyn SG, Ragu S, Saroya S, et al. A meta-analysis of internet-based cognitive behavioral therapy for military and veteran populations. *BMC Psychiatry*. 2023;23(1):223. <https://doi.org/10.1186/s12888-023-04668-1>

49. Monson CM, Pukay-Martin ND, Wagner AC, Crenshaw AO, Blount TH, Schobitz RP, et al. Cognitive-behavioural conjoint therapy versus prolonged exposure for PTSD in military service members and veterans: results and lessons from a randomized controlled trial. *Eur J Psychotraumatol*. 2024;15(1):2330305. <https://doi.org/10.1080/20008066.2024.2330305>

50. Beidel DC, Frueh BC, Neer SM, Bowers CA, Trachik B, Uhde TW, et al. Trauma management therapy with virtual-reality augmented exposure therapy for combat-related PTSD: A randomized controlled trial. *J Anxiety Disord*. 2019;61:64-74. <https://doi.org/10.1016/j.janxdis.2017.08.005>

51. Volovik MG, Belova AN, Kuznetsov AN, Polevaia AV, Vorobyova OV, Khalak ME. Use of virtual reality techniques to rehabilitate military veterans with post-traumatic stress disorder (Review). *Contemp Technol Med*. 2023;15(1):74-85. <https://doi.org/10.17691/stm2023.15.1.08>

52. Weierstall-Pust R, Schnell T, Heßmann P, Feld M, Höfer M, Plate A, et al. Stressors related to the Covid-19 pandemic, climate change, and the Ukraine crisis, and their impact on stress symptoms in Germany: analysis of cross-sectional survey data. *BMC Public Health*. 2022;22(1):2233. <https://doi.org/10.1186/s12889-022-14682-9>

53. Wired. For kids fleeing Ukraine, wartime trauma may leave lasting wounds. 2022. <https://www.wired.com/story/ukraine-children-refugees-war-trauma>

54. Jaimes Contreras Y, Coronado Castro AM, Pulido MA, Rincón Romero MK. Impact of Chronic Wounds on

Quality of Life: A Review from the Perspective of Humanized Care. *Nursing Depths Series*. 2025; 3:101. <https://doi.org/10.56294/nds2024101>

55. Matos Matos A. Algorithmic biases in mental health diagnoses and their impact on vulnerable populations: a documentary review of advances and challenges. *EthAlca*. 2022; 1:20. <https://doi.org/10.56294/ai202220>

56. Pylypenko N. Psychological assistance and support to victims. *Bull Natl Def Univ Ukr*. 2022;70(6):42-8. <https://doi.org/10.33099/2617-6858-2022-70-6-142-148>

57. Chaves Cano AM. The gentrification of health: an analysis of its convergence. *Gentrification*. 2024; 2:54. <https://doi.org/10.62486/gen202454>

58. Inter-Agency Standing Committee (IASC). Guidelines on mental health and psychosocial support in emergency settings. Geneva: WHO; 2021. <https://www.who.int/publications/i/item/iasc-guidelines-on-mental-health-and-psychosocial-support-in-emergency-settings>

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