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**PSYCHOLOGICAL REHABILITATION OF MILITARY SERVICEMEN  
WITH POST-TRAUMATIC STRESS DISORDER**

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Annotation In recent decades, scientific interest in the problem of mental post-traumatic stress disorder of servicemen who participated in military conflicts has increased. The main traumatic zone is the armed conflict in eastern Ukraine since 2014.

The consequences of military trauma can haunt a person all his life and merge into a single set of symptoms - post-traumatic stress disorder.

The prevalence of post-traumatic stress disorder among military personnel varies. Thus, according to the World Health Organization's national study of war participants, 30% of servicemen develop post-traumatic stress disorder some time after the war.

However, in a number of studies, it turns out that from 15 to 70% of war participants have symptoms of this disorder.

**Key words:** Military personnel, stress, post-traumatic stress disorder.

Post-traumatic stress disorder is a complete complex of certain symptoms of mental disorders of an individual, which is determined by the short-term or long-term impact of an extraordinary, extreme situation on the human body as a whole and entails a wide range of psychological, social, physiological, and personal changes. The impact of a stressful situation on the human body depends on many conditions, in particular: personal resources used by the individual in stressful situations, the level of physical and mental health, individual stress resistance, as well as the social

and cultural environment in which the individual was raised and lived. At this stage of the development of science, post-traumatic stress disorder was identified as an independent disease, which was the result of a long-term study of the impact of mental trauma on human health and psyche [1, p. 125].

Post-traumatic stress disorder, which occurs in military personnel and combat

It entails changes in military personnel and combatants in the personal sphere, in the sphere of social interactions with others, as well as in physical and mental health. There are peculiarities of diagnosing post-traumatic stress syndrome in military personnel.

The main factors of post-traumatic stress disorder are stressors, the social environment of the stressor and the victim, character traits and biological predisposition of the victim. The more severe the stressor, the more people it causes this syndrome and the more difficult the disorder will be [2, p. 18].

When the injury is relatively mild, fewer people develop PTSD. If the patient belongs to a group of people who have experienced the trauma with him, he sometimes copes better with it because others share his experiences [3, p. 132].

In general, the very young and the very old have a harder time coping with traumatic events than people whose trauma occurs in midlife. The impact of trauma can be increased, for example, by physical disability characteristic of the elderly, especially if they have impaired functioning of the nervous and cardiovascular systems, decreased cerebral blood flow, impaired vision, arrhythmia, etc [4, p. 89].

A strong family, an older age, a high level of education, the absence of bad habits and a longer service life have a positive effect on post-traumatic stress disorder.

The provision of social assistance may well influence the development, severity and duration of PTSD. Patients who receive fairly good social assistance are less likely to develop this disorder or it occurs in a less severe form. But more often such a disorder develops in lonely, divorced, widowed, needy or socially isolated persons [5, p. 12].

Psychotherapy, psychosocial rehabilitation, methods of psychological

influence, pharmacotherapy, physiotherapy, and non-drug methods became the main components of psychological recommendations for soldiers with post-traumatic stress disorder [6, p. 177]. One of the directions is the use of art therapy, which creates a positive atmosphere, relieves emotional and muscle tension, relaxes and soothes.

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