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## THEORETICAL PRINCIPLES OF RESEARCHING THE PROBLEM OF COMBAT STRESS IN PSYCHOLOGY

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*Relevance of the research. Stress is one of the most significant factors affecting a person's mental and physical health. It is characterized by a state of severe tension that occurs under the influence of extreme conditions and creates a significant burden on the body. Today, in war conditions, the problem of combat stress and its prevention is of particular importance.*

*The Aim of the study is to theoretically substantiate the problem of combat stress in psychology.*

*Results. Analyzing the essence of the concept of "combat stress", it should be noted that from a clinical point of view, this concept should be understood as a set of mental changes (disorders) experienced by military personnel (arising in them) in the process of adaptation to specific conditions of a combat situation (combat stressors), unfavorable for life and threatening their health and life*



***Conclusions.** Today, in war conditions, the problem of combat stress and its prevention is of particular importance. Combat stress is a mental reflection of stress reactions as a result of the influence of factors of a combat situation. Combat stress appears in a serviceman in extreme conditions and is accompanied by the action of powerful external and internal stressors that threaten mental and physiological health, reduce the effectiveness of combat activities, negatively affect the social well-being of the individual or can even cost a person his life. Changes at the personal level that concern the individual characteristics of a serviceman and subsequently manifest themselves in his external behavior, combat activities, attitude towards others. The consequences of combat stress are post-traumatic stress disorder, secondary traumatic stress, mental burnout, collective trauma and a wide range of stress disorders, generalized anxiety disorder and social anxiety disorder.*

*Thus, the effects of combat stress can haunt a person for a long time and are the most important obstacle to adaptation to military service in places of permanent deployment, as well as to peaceful life after discharge from the ranks of the Armed Forces of Ukraine.*

**Keywords:** *stress, combat stress, war, military service, combatants, combat stress prevention, acute anxiety disorder, post-traumatic stress disorder.*

## **Теоретичні засади дослідження проблеми бойового стресу у психології**

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Актуальність дослідження. Стрес є одним із найважливіших факторів, що впливають на психічне та фізичне здоров'я людини. Він характеризується станом сильної напруги, що виникає під впливом екстремальних умов і створює значне навантаження на організм. Сьогодні, в умовах війни, проблема бойового стресу та його профілактики має особливе значення.

Метою дослідження є теоретичне обґрунтування проблеми бойового стресу в психології.

Результати. Аналізуючи сутність поняття «бойовий стрес», слід зазначити, що з клінічної точки зору, це поняття слід розуміти як сукупність психічних змін (розладів), які переживають військовослужбовці (виникають у них) у процесі адаптації до конкретних умов бойової ситуації (бойових стресорів), несприятливих для життя та таких, що загрожують їхньому здоров'ю та життю.

Висновки. Сьогодні, в умовах війни, проблема бойового стресу та його профілактики має особливе значення. Бойовий стрес – це психічне відображення стресових реакцій в результаті впливу факторів бойової ситуації. Бойовий стрес виникає у військовослужбовця в екстремальних умовах і супроводжується дією потужних зовнішніх і внутрішніх стресорів, які загрожують психічному та фізіологічному здоров'ю, знижують ефективність бойової діяльності, негативно впливають на соціальне благополуччя особистості або навіть можуть коштувати людині життя. Зміни на особистісному рівні, що стосуються індивідуальних особливостей військовослужбовця та згодом проявляються в його зовнішній поведінці, бойовій діяльності, ставленні до оточуючих.

Наслідками бойового стресу є посттравматичний стресовий розлад, вторинний травматичний стрес, психічне вигорання, колективна травма та широкий спектр стресових розладів, генералізований тривожний розлад та соціальний тривожний розлад.

Таким чином, наслідки бойового стресу можуть переслідувати людину протягом тривалого часу та є найважливішою перешкодою для адаптації до військової служби в місцях постійної дислокації, а також для мирного життя після звільнення з лав Збройних Сил України.

**Ключові слова:** стрес, бойовий стрес, війна, військова служба, комбатанти, профілактика бойового стресу, гострий тривожний розлад, посттравматичний стресовий розлад.

**Introduction.** Stress is one of the most significant factors affecting a person's mental and physical health. It is characterized by a state of severe tension that occurs under the influence of extreme conditions and creates a significant burden on the body. The consequences of stress are not temporary, as it can cause the development of serious diseases of both physical and psychological nature (Mostovoy, Parkhomenko, 2015). The concept of stress, developed by Hans Selye in 1936, defines it as a nonspecific reaction of the body to any external demands. However, due to the diversity of perceptions of the concept of "stress" by different people, its exact definition remains difficult. Despite this, the role of stress in the development of health problems emphasizes the importance of studying its impact and developing methods for its effective management (Brewin C.R., Andrews B., Valentine, 2000). Today, in war conditions, the problem of combat stress and its prevention is of particular importance.

The **Aim** of the study is to theoretically substantiate the problem of combat stress in psychology.

**Results.** Analyzing the essence of the concept of "combat stress", it should be noted that from a clinical point of view, this concept should be understood as a set of mental changes (disorders) experienced by military personnel (arising in them) in the process of adaptation to specific conditions of a combat situation (combat stressors), unfavorable for life and threatening their health and life (Kravchenko, Timchenko., Shirobokov, 2017). Ideally, combat stress should lead to the formation of adaptive stress reactions and, in general, to an increase in the body's adaptability to extreme influences (including factors of a combat situation). However, combat stress often leads to pathological manifestations (combat

stress disorders), as well as various forms of behavioral abnormalities (Lashch, 2021).

O. V. Kudrenko (2018) notes that combat stress includes the expected and predicted emotional, intellectual, physical and behavioral reactions of individuals who were exposed to the stress-producing effects of events and factors of military operations or peacekeeping and stability operations. According to the definition of I. I. Prykhdoko (2021), combat stress is considered to be a constant tension of all resource systems of the human body: immune, nervous, mental systems. All this is aimed at overcoming a stressful situation. By combat stress, S. Sukiasyan (2020) understands a type of negative psychological impact on a specialist when performing his professional activities.

L. L. Tyutyunyk (2020) defines the concept of “combat stress” as a type of stress that is formed as a result of the influence of a complex of psychogenic factors of a combat situation. Among them are: a long-term and poorly predicted, direct and empirically evident threat to the life and well-being of an individual and his loved ones, significantly exceeding the everyday level in duration and intensity. In the complex, all of the listed factors lead to the depletion of mental activity resources, the onset of characteristic temporary or persistent changes in mental processes and disorders of social adaptation.

Combat stress is a mental reflection of stress reactions as a result of the influence of factors of a combat situation. Combat stress appears in a serviceman in extreme conditions and is accompanied by the action of powerful external and internal stressors that threaten mental and physiological health, reduce the effectiveness of combat activities, negatively affect the social well-being of the individual or can even cost a person his life. Changes at the personal level, which concern the individual characteristics of a serviceman and subsequently manifest themselves in his external behavior, combat activities, attitude towards others, in his socialization, can cause



problems for both servicemen and their commanders (Tyutyunnyk, Popuyk, 2025).

O. A. Blinov (2019) characterizes “combat stress” as a mental reflection of the stress reaction in military personnel as a result of the influence of combat factors. Combat stress induces radical changes in the affective, cognitive and behavioral spheres of the military, has a significant impact on the success of their professional activities, and thus requires psychological protection from its influence (Kostyuchkov, 2020).

As noted by L. E. Kuznetsova (2018), the concept of “combat stress” includes a normal reaction to mental and emotional stress, which can lead to decreased sensitivity, slowed reaction to external stimuli, impaired coordination of movements, weakening of attention and memory, which certainly reduces or jeopardizes the performance of combat missions. Combat stress is often confused with post-traumatic stress disorder or combat mental trauma, which can occur after someone has experienced a traumatic event. Post-traumatic stress disorder is a more severe phenomenon and can often prevent a person from performing everyday duties and requires more intensive treatment.

O. B. Platynyuk (2020) proposed a definition of the concept of "combat stress" as a systemic reaction of the body to the influence of a complex of factors of armed conflict and the accompanying social and everyday conditions. Changes from this reaction occur at the personal, psychophysiological, emotional-vegetative and somatic levels.

A. V. Shidelko (2022) understands combat stress as a multilevel process of adaptive activity of the human body and personality in a combat situation, accompanied by mental and physical stress significantly exceeding the everyday level in duration and intensity, psychogenic effects of wounds, injuries and diseases, experiencing observed cases of human deaths, accompanied by tension of reactive self-regulation mechanisms and consolidation of specific adaptive psychophysiological and personal changes.

N. Zhigailo (2022) understands the concept of “combat stress” as a special form of stress that occurs through a general adaptation syndrome. Combat stress in most cases is of the nature of distress, and is characterized by a very high, often excessive for the body, intensity of impact, and is accompanied by mental disorders with pre-pathological and pathological consequences.

Analysis of modern research (Blinov, 2017; Zborovsky, 2016; Prykhodko, 2018) allows us to define combat stress as mental stress that occurs in servicemen during their adaptation to the conditions of combat activity and is caused by the use of their resource potential.

There are other points of view on the phenomenon of combat stress, which are expressed by various experts. For example, in the study of I.I. Prykhodko (2018), combat stress is considered as a process that occurs as a result of the influence of factors of the combat situation on the psyche of a serviceman.

This process is accompanied by a decrease in the level of psychological security of the individual and the manifestation of non-specific preclinical psychological symptoms. Taken together, these manifestations form the concept of combat psychological trauma of the individual or can lead to specific mental disorders, which are combined into the category of combat psychological trauma.

The conclusions of O. Zbarovsky (2016) indicate that the experience of combat operations indicates that servicemen suffer not only physical, but also significant psychological losses associated with receiving combat mental trauma. It should be noted that these injuries lead to disorders of mental activity and can cause complete or partial loss of combat capability.

Combat stress reactions occur during combat or preparation for combat. They are persistent survival reactions that involve physiological, behavioral, emotional, cognitive, and other changes in the body. Life-threatening situations activate the autonomic nervous system, which is regulated by two opposing divisions: the sympathetic, which is responsible for arousal, and the

parasympathetic, which is responsible for calming. This has been shown to result in a sequential series of automatic responses, called the “defense cascade,” that include extreme but temporary changes in body functioning, such as increased attention/arousal, changes in behavior, emotions, cognition, speech, and motor skills. Such reactions are intense and can result in moderate to severe impairment, but their duration is limited to a few hours or, at worst, a few days.

O. Blinov (2018), O. Zborovsky (2016) note that examples of combat stressors include bodily injuries and wounds that limit the physical capabilities of a serviceman; killing an enemy; witnessing the death of a person; death or wounding of a serviceman of a unit.

Some of the combat stress reactions that soldiers may experience include anxiety, panic, irritability, rage, confusion, memory problems, fatigue, insomnia, rapid heartbeat, shortness of breath, and dissociation. Their severity may vary depending on various factors, such as the intensity, duration, and frequency of combat, and command and unit morale (Stress Symptom Checklist).

The results of domestic and foreign modern studies (Blinov, 2017; Zborovsky, 2016; Prykhodko, 2018) allow us to assert that the impact of combat stress on the psyche of a serviceman can lead to changes in his character traits, as well as the manifestation of accentuations that were not previously inherent. It has been determined that this can also lead to a deepening of personality traits that are already present, as well as cause the emergence of stress-associated disorders and increase the risk of suicidal manifestations. In the fight against the psychotraumatic impact of stressors in a combat situation, depending on the strength and duration of their impact, the functioning of the intellectual component of the personality is first disrupted, and then problems arise in the social and emotional spheres.

According to a study conducted using the Stress Symptom Checklist developed by the University of Texas, more than half of military personnel experience physiological symptoms such as

headaches, back, neck and shoulder pain, high blood pressure, upset stomach, fatigue, alcohol and/or cigarette use, and changes in appetite. Among the psychological symptoms, the most common are anxiety, confusion or disorientation, forgetfulness, feelings of overload, mood swings, restlessness, frequent boredom, outbursts of anger, weight changes, overeating, and sexual problems.

Mental trauma in combat conditions is a common phenomenon that can lead to mental disorders of varying severity in servicemen. This usually leads to partial or complete loss of combat capability. According to the degree of severity, military mental traumas are distinguished as follows: 1) Mild (I degree), characterized by excessive excitement and irritability, desire to isolate, loss of appetite, rapid fatigue and the presence of headaches. 2) Moderate (II degree), which include mild hysterical reactions and manifestations of aggression, temporary amnesia, depression, hyperesthesia (increased sensitivity to bright light, loud sounds and smells) and fear. 3) Severe (III degree), when there is a violation of auditory and visual functions, imbalance of motor skills and coordination of movements, as well as the presence of psychomotor disorders from senseless actions to a state of stupor (Blinov, 2017 p. 86).

The main psychologically traumatic factors of hostilities are the following events: heavy and prolonged battles; death of comrades under enemy fire; serious bodily injuries and wounds; suicides and murders; significant destruction and natural disasters that cause suffering to the civilian population; death of civilians as a result of military operations (Blinov, 2017).

Combat stress disorders primarily manifest as an inability or refusal to perform one's duties. Such manifestations occur at the earliest stages and occur due to a whole complex of stress factors and an increase in the intensity of combat operations. Such symptoms may include: inability to engage in active resistance, avoidance of contact, apathy. Servicemen who experience combat fatigue develop a high probability of recurrence of the above symptoms. Negative



personality traits can complicate or slow down medical rehabilitation after the manifestation of these symptoms. Psychoemotional lability, mood disorders with various cognitive and physical problems are conditions that doctors and commanders are likely to encounter in combat conditions (Puzyryov, Izvekov, 2023).

The long-term consequences of combat stress (at least in 40–80% of cases) are transformed into post-traumatic stress disorders and can last for years and decades, and in some cases a psychopathological state is formed associated with combat mental trauma. Combat activities in extreme natural and climatic conditions are accompanied by the depletion of compensatory resources, the risk of developing mental disorders increases and their course is complicated. Taken together, this leads to an increase in somatic morbidity. Exposed to stress in a combat environment, the individual becomes open and vulnerable to all psychosocial stressors of ordinary life (Puzyryov, Izvekov, 2023).

I. Prykhodko (Prykhodko, 2018) emphasizes that most servicemen, as a rule, adapt well to combat stress of moderate intensity. At the initial stage, certain positive changes are even observed, such as concentration of attention, clarity of thinking, improved memory, increased combat activity and purposefulness of actions.

However, combat stress of excessive force can cause significant changes that have various forms of manifestation. At the individual level, it can take the following forms: a sharp inadequate increase or decrease in combat activity; a sharp increase in emotionality or numbness; a destructive form of motivation or demotivation for combat activity; a sharp unusual decrease in discipline and responsibility for completing assigned tasks; violation of moral norms of communication with others; disorientation in space and time; a feeling of unreality of the situation; anger, irritability and aggressiveness; depression and apathy; hopelessness; loss of meaning in life and the appearance of suicidal thoughts; panic moods, etc.

At the group level, such negative manifestations as a significant deterioration in the socio-psychological climate and a decrease in cohesion and mutual assistance, increased conflict, the spread of panic moods and a negative attitude towards completing the task are observed.

Domestic researchers (Blinov, 2017; Zborovsky, 2016; Prykhodko, 2018) determine that under the influence of combat stress of excessive force, various forms of stress effects can be observed, including neurotic and psychotic disorders. Particularly dangerous during combat operations are manifestations of group panic and hysteria, which maladapt a large number of servicemen and deprive them of the ability to adequately assess the situation and the ability to functionally perform combat missions.

As a result, there is a lack of effective joint activity, motivation and belief in victory. However, under the influence of combat stress, certain servicemen can also observe positive post-traumatic tendencies, such as increased resilience; self-confidence and self-reliance; improved self-discipline, self-control and communication skills; increased personal maturity; increased sense of self-worth; rethinking the role of the family, categories of moral values and the value of various aspects of human life; purposefulness and perseverance in achieving the goal; expansion of plans for the future; increased level of group cohesion, psychological and functional readiness for joint combat operations, intra-group and intergroup interaction, etc. (Prokofiev, 2024).

The quality of combat mission performance, the number of casualties among personnel, and their future adaptation to civilian life depend significantly on the psychological state of the military. A soldier who feels in control during combat does not exhibit combat stress reactions. The most important protective factors are strong group cohesion, trust in commanders, high motivation, proper armament and protection, high quality combat training, and a proper medical corps (Prokofiev, 2024).

Traumatic effects are cumulative, and each new trauma can intensify emotional and psychological reactions from previous experiences. This is especially true for combatants who face constant threat and danger. Current concepts of traumatic stress, including PTSD and complex PTSD, are not effective enough in conditions of prolonged threat, as they focus on overcoming past traumas rather than ongoing exposure (Grebenuik, 2016).

Combatants often face such types of trauma as secondary traumatic stress, burnout, collective trauma, and a wide range of stress disorders, including PTSD, generalized anxiety disorder, and social anxiety disorder. During combat operations, altered mental states can manifest themselves in the form of combat stress reaction, combat fatigue, reactive states, and severe psychiatric pathologies (Yena, Maslyuk, Sergienko, 2014).

The reaction of a serviceman to combat stress (Overcoming combat stress in military units, 2015) is a complex and multifactorial process that depends on a number of external and internal conditions. Important factors are the duration and intensity of combat operations, motivation, previous experience, level of training, activity in operations, ways of overcoming stress and losses among comrades. All these factors interact with each other, which forms the individual reaction of a soldier to stressful situations.

Understanding these aspects can help optimize psychological training and reduce the impact of stress on service members in combat conditions.

Based on the research of R.A. Gabriel (Blinov, 2016) and the opinions of American psychiatrists R. Swank and U. Marchand, we can conclude that a long continuous stay at the front has a critical impact on the psychophysiological state of military personnel. Psychological and physical exhaustion that occurs after a long stay in a combat zone can lead to significant mental health disorders. According to research, after 35–45 days of continuous stay at the front, fighters experience a significant decrease in combat effectiveness, which is due to the emergence of mental disorders in



most military personnel. These disorders can manifest themselves in the form of anxiety, depression, stress reactions, post-traumatic stress disorders and other psychological problems.

Analysis of the indicators of the level of acute stress and resource barriers indicates significant differences in the potential of the military to overcome stress. Individuals with a low level of acute stress disorder demonstrate high resilience due to a high level of resource barriers, which indicates their ability to effectively cope with emotional stress. At the same time, military personnel with an average level of acute stress disorder, who have a low level of resource barriers, are subject to the destruction of resilience, which indicates the risk of loss of internal resources and the need for additional support to prevent emotional degradation under the influence of increasing stress (Kuraeva, Gusyatinik, Gushchyna, 2025).

**Conclusions.** Today, in war conditions, the problem of combat stress and its prevention is of particular importance. Combat stress is a mental reflection of stress reactions as a result of the influence of factors of a combat situation. Combat stress appears in a serviceman in extreme conditions and is accompanied by the action of powerful external and internal stressors that threaten mental and physiological health, reduce the effectiveness of combat activities, negatively affect the social well-being of the individual or can even cost a person his life. Changes at the personal level that concern the individual characteristics of a serviceman and subsequently manifest themselves in his external behavior, combat activities, attitude towards others. The consequences of combat stress are post-traumatic stress disorder, secondary traumatic stress, mental burnout, collective trauma and a wide range of stress disorders, generalized anxiety disorder and social anxiety disorder.

Thus, the effects of combat stress can haunt a person for a long time and are the most important obstacle to adaptation to military service in places of permanent deployment, as well as to peaceful life after discharge from the ranks of the Armed Forces of Ukraine.



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