















ORIGINAL

Socio-psychological characteristics of psychoemotional states of Ukrainians during the first week of the Russian-Ukrainian war

Características sociopsicológicas de los estados psicoemocionales de los ucranianos durante la primera semana de la guerra ruso-ucraniana

Inna Osadchenko^{1,2}  , Tetiana Perepeliuk³  , Liudmyla Kotlova⁴  , Oksana Dudnyk³  , Nataliia Hrynova³  , Alexander Kobets³  

¹Department of Social Work and Rehabilitation, National University of Life and Environmental Sciences of Ukraine. Kyiv, Ukraine.

²University of Bialystok. Bialystok, Poland.

³Department of Psychology, Pavlo Tychyna Uman State Pedagogical University. Uman, Ukraine.

⁴Department of Psychology, Logopedics and Inclusive Education, Zhytomyr Ivan Franko State University. Zhytomyr, Ukraine.

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Corresponding author: Tetiana Perepeliuk 

ABSTRACT

Introduction: analysing the current conditions associated with the influence of the Russian invasion, one can observe the spread of dramatic changes in the mental and emotional manifestations of the Ukrainian population. In this context, the study of social and psychological factors that directly provoke the spread of so-called psychoemotional deviations becomes particularly relevant.

Objective: analyse Ukrainians' socio-psychological behaviour in the early days of a full-scale invasion and identify factors that explain the population's high psychoemotional variability during the war's most critical stage.

Methods: among the research methods used were the method of generalised and comparative system analysis and synthesis, a hidden survey of the population of Ukraine, and the methods of mathematical statistics and modelling.

Results: based on scientific sources and empirical material analysis, the authors investigated the psychoemotional states of the Ukrainian population during the first week of the Russian-Ukrainian war. The problem is the excessive detection of crisis psychoemotional states and the inability to provide timely psychological and psychotherapeutic assistance, which can lead to chronic psychosomatic manifestations and somatic and mental illnesses. To this purpose, it is vital to understand what psychoemotional difficulties Ukrainians most commonly face, especially in the early days of the conflict, when panic attacks, escapes, anger, a lack of empathy, and emotions are common.

Conclusions: this implies the practical significance of the conducted research, which includes the use of various psychological techniques for both self-help and mutual assistance in some cases of psychoemotional disorders.

Keywords: Psychosomatic Manifestations; Psychological Assistance; Mental Problems; Somatic Diseases; Panic Attacks.

RESUMEN

Introducción: analizando las condiciones actuales asociadas a la influencia de la invasión rusa, se observa la

propagación de cambios dramáticos en las manifestaciones mentales y emocionales de la población ucraniana. En este contexto, cobra especial relevancia el estudio de los factores sociales y psicológicos que provocan directamente la propagación de las denominadas desviaciones psicoemocionales.

Objetivo: analizar el comportamiento socio-psicológico de los ucranianos en los primeros días de una invasión a gran escala e identificar los factores que explican la alta variabilidad psicoemocional de la población durante la etapa más crítica de la guerra.

Métodos: entre los métodos de investigación utilizados figuran el método de análisis y síntesis generalizada y comparativa de sistemas, una encuesta oculta a la población de Ucrania y los métodos de estadística matemática y modelización.

Resultados: el problema es la detección excesiva de estados psicoemocionales de crisis y la incapacidad de prestar asistencia psicológica y psicoterapéutica a tiempo, lo que puede desembocar en manifestaciones psicósomáticas crónicas y enfermedades somáticas y mentales. Para ello, es vital comprender cuáles son las dificultades psicoemocionales más comunes a las que se enfrentan los ucranianos, especialmente en los primeros días del conflicto, cuando son frecuentes los ataques de pánico, las huidas, la ira, la falta de empatía y las emociones.

Conclusiones: esto implica la importancia práctica de la investigación realizada, que incluye el uso de diversas técnicas psicológicas tanto para la autoayuda como para la ayuda mutua en algunos casos de trastornos psicoemocionales.

Palabras clave: Manifestaciones Psicósomáticas; Asistencia Psicológica; Problemas Mentales; Enfermedades Somáticas; Ataques de Pánico.

INTRODUCTION

Any war is associated not only with the destruction, devastation, and deaths of citizens of a particular country but also with long-term consequences for their mental health. Both the military and civilians suffer from mental disorders, as well as the effects of mental trauma during and after the war. For the civilian population, these consequences are even more obvious than for participants in military operations. The military undergoes primary military psychological training, thereby putting civilians in war zones or internally displaced persons at unexpected mental risk. Simultaneously, generations pass down the mental problems they received (or provoked) during the war, often with complex consequences. If the crisis psychoemotional condition is not diagnosed quickly and residents are not given qualified social and psychological treatment, behaviour and society's mental and physiological health might suffer. Such negative psychoemotional states and problems, especially in the first days of the war, are depression, anxiety, panic attacks, fears, suicidal behaviour, various addictions and phobias, and dissociations.

However, as the Israeli experience shows, for example, in any country in the current world, it is important to teach citizens from an early age the skills of providing psychological self-help, which would significantly reduce the number of their critical psychoemotional states in the event of a military threat. To this end, it is important to understand which psychoemotional problems most often arise among citizens, especially in the first days of war, when panic attacks, flight, and aggression are common. Different psychoemotional states require different psychological techniques of self-help and mutual assistance. Ukraine, a civilised European nation, has experienced the psychological effects of war and is a research hub for socio-psychology. Its study and generalisation will be of global importance for the safety and rapid response of socio-psychological services in countries around the world in the context of a possible war.

The socio-psychological situation of Ukrainian war refugees who found refuge in Poland was studied (737 respondents, April-May 2022). The results of the survey show that Ukrainian refugees are young women with children (with higher education), most of whom lived in cities and positively assessed their financial situation before the war in Ukraine. Simultaneously, the survey revealed that 3/4 of these Ukrainian women struggle with mental health issues, with about half experiencing significant distress.^(1,2,3) The results of this study were used to compare the dynamics of the psychoemotional states of Ukrainians during the first week and subsequent months of the current war.

Buechel and Hahn⁽⁴⁾ actively investigated emotions and emotional states, particularly through their manifestation in social networks, which promotes the exchange of emotional and motivational content, applying and adapting new research methods.⁽⁵⁾ Steblyna⁽⁶⁾ and Rozanov et al.⁽⁷⁾ focused on both the emotional reactions of civilians during war and the military. In addition, some researchers emphasise the development of a special psychological technology to support a person's mental health during war.⁽³⁾ But the results of the analysis of the socio-psychological characteristics of the psychoemotional states of Ukrainians during the first week of the Russian-Ukrainian war were not found.

After reviewing the latest research and publications on the topic, the authors of this study are interested in two areas: methods for studying the psychoemotional states of individuals and civilians, particularly Ukrainians during the modern war.

As for the first topic, the most up-to-date studies of emotions and psychoemotional states of the individual are presented in particular by EmoBank, a collection of metadata on spatial emotions in the Valence-Arousal-Dominance (VAD) format. EmoBank is distinguished primarily by its two-perspective and two-representational design.⁽⁴⁾ These methods will also be used in the process of empirical research. The study found that Facebook and Twitter promote the sharing of emotional and motivational content that supports and counteracts social activities (protest and political, on the example of protest movements in the US, Spain, Turkey, and Ukraine), including anger, social identification, group effectiveness, and concerns about truthfulness, integrity, and open ideological topics.⁽⁵⁾ Since social media has become the main communication platform where people express their psycho-emotional states, posts on these networks are studied to analyse emotions and sentiments, which, when measured in aggregate, constitute the emotions and sentiments of society. For the accuracy of such measurements, for example, messages on Twitter were used in studies of PANAS-t, an adapted, generally accepted PANAS test (graph of positive and negative effects). Therefore, it will be of scientific interest to study the manifestation of psychoemotional states of Ukrainians during the first week of the Russian-Ukrainian war on popular social networks and applications (Facebook, Instagram, Telegram, Viber, WhatsApp).

Wars reinforced by the media, the Internet, and social media are exacerbating the general sense of instability and increasing anxiety, reaching even larger numbers of people around the world. Military psychiatry, psychology, and extreme psychology provide knowledge and practical expertise that can help diagnose, treat, and prevent war's mental health consequences for the general population. Therefore, it is vital to use this information accurately and quickly, even if practice demonstrates that the inadequacy or inaccuracy of this knowledge causes civilian psychoemotional issues.⁽⁷⁾

As for the study of the psychoemotional states of civilians, in particular Ukrainians during the war, the significance for the socio-psychological sphere of our time and scientific search is the research by Steblyna.⁽⁶⁾ It is an analysis of the emotional reactions of Ukrainians in the form of "likes" in relation to certain news and mass media on the leading Ukrainian Telegram channels of the period February-April 2022. The dynamics of the most popular emotional reactions were tracked, which, in turn, indicates the current situation in the Ukrainian political digital discourse of this period. The author created a periodization of the emotional reactions of Ukrainians during the first and third months of the war. The results of this study will be used to compare and clarify the psychoemotional states of Ukrainians during the first week of the Russian-Ukrainian war.

Ilko Kucheriv Democratic Initiatives Foundation,⁽⁸⁾ together with the University of Oxford, conducted a survey of 1,000 Ukrainians in 11 regions of Ukraine to show their emotions and moods about the war. Despite the socio-psychological value of this study, unfortunately, these results generally outline the psychoemotional states of Ukrainians during the current war. In addition, this study was purely sociological and statistical in nature and did not aim to determine the socio-psychological needs of Ukrainian civilians to improve their psychoemotional state in the first week of the war.

Within the international round table "Multidisciplinary approaches to the analysis of social and political problems in the conditions of the Russian-Ukrainian hybrid war",⁽⁹⁾ issues of providing psychological first aid to preserve mental health in war conditions, dynamics of mental defences in acute psychological crisis, determinants of stress tolerance development, maintenance and restoration. However, the characteristics of the psychoemotional states of Ukrainians during the first week of the Russian-Ukrainian war did not become the subject of the speakers' analysis.

The purpose of the study is to provide a socio-psychological characterization of the psycho-emotional states of Ukrainians during the first week of the Russian-Ukrainian war (from February 24 to March 2, 2022) based on the analysis of scientific sources and empirical material.

METHOD

To achieve the goal of scientific research, the following methods were used:

- generalised and comparative system analysis and synthesis of scientific sources and internet resources on the problem under study;
- analysis of personal and team experience of working as psychologists in the framework of volunteer projects from the first days of the war ("Psychological support", "Lesson for children of Ukraine (during the war)"; providing individual, group, and family psychological assistance from the public organisation "International Association of Modern Education, Science, and Culture"; "Psychological support for Ukrainians during the war" in the Telegram channel; individual psychological consultations);
- preparation and demonstration of original media (posts and videos) on social media platforms (e.g., Facebook, Instagram, Telegram, Viber, WhatsApp) during the first week of the war to analyse feedback and understand Ukrainians' emotional states. In the first week of battle, we examined 76.8 %

(282 messages) of 367 private and public texts;

- hidden survey of the population of Ukraine during the first week of the war (458 people, of which 73.4 % - women (336 people), 11,8 % - men (54 people), 14,8 % - teenagers (68 people), 22,4 % - internally displaced (112 people), 43,8 % - externally displaced (as refugees to other countries) (219 people), 25,4 % - from relatively safe territories of Ukraine (127 people)) by specially developed questionnaire “Psychoemotional states of Ukrainians of the first week of war”;
- analysis of the results (first of all, feedback) of organised and conducted author’s trainings, webinars with elements of trainings on psychological self- and mutual assistance during the war (training “Linguotherapy: creative development and self-regulation of the individual”; webinars with elements of trainings “Psycho-pedagogical recommendations for working with children during and after the war” and “Listen - answer: how to support, teach, educate, and develop children during the war”);
- analysis of the expression of psychoemotional states of the population of Ukraine in the first week of the war in posts on personal and public pages on social networks and applications Facebook, Instagram, Telegram, Viber, WhatsApp: posts by 693 people, including 72,7 % - women (504 people), 14,1 % - men (98 people), 13,1 % - teenagers (91 people), 28,4 % - internally displaced (197 people), 42 % - externally displaced (refugees in other countries) (291 people), 29,6 % - from relatively safe territories of Ukraine (205 people));
- analysis of requests for psychological assistance in the public volunteer chat of the Telegram channel “Psychological assistance to Ukrainians during the war”, starting from the first day of its activity (the end of the first week of the war): 1 320 messages-appeals were analysed, mainly with descriptions of their psychoemotional states;
- mathematical statistics methods as the easiest way to calculate by entering data in a Microsoft Excel document table;
- modelling method (creating data graphs and content models).

RESULTS

In the context of psychoemotional states, this actually refers to the mental health of the individual during the war, the main structural components of which are defined by Karamushka⁽¹⁰⁾ as the ability to overcome the daily stresses of life in war conditions, the ability to build relationships with others in war conditions, the ability to work effectively to help a community and society in war conditions, and the ability to self-control and realise one’s abilities in war conditions.

Psychoemotional states of Ukrainians during the war are analysed from the standpoint of extremology, the science of human perception in emergency, crisis situations. This science is based on three principles:⁽¹¹⁾ the impossibility of understanding an extreme situation without its direct participant, as its participant, or under total awareness, which involves understanding the relationship between the normal state of the psyche and the state of a person in an extreme situation.

The investigation of the psychoemotional states of the individual during the war is one of the subjects of the study of extremology since this includes changes in the psyche and behaviour of a person in extreme (stressful, crisis) situations. The most acute question arises in the first week of the war. At the same time, these psychoemotional states of the population directly depend on the territory of the person’s stay during military operations and the course of events at the front. These parameters are determined by regulatory and procedural documents that vary the degree and course of military events. The research identified three kinds of Ukrainians throughout the war: internally displaced (inside the nation), externally displaced (who fled the country, mostly as refugees), and those in reasonably safe zones. This was designated a zone of active military activities, occupied, frontline, and reasonably secure territory during the Ukraine war.

During the first week of the war, people who were afraid of the enemy’s SMS messages indicating their location were afraid to write or speak about their location. This question became psychologically incorrect and was formed without clarification by practising psychologists as follows: “Are you in a safe place now?”. Thus, in the following tables, they did not resort to dividing the population on the territorial basis of the first week of the war. In calendar terms, the first week of the war is defined by time parameters from February 24 to March 2, 2022. The psychological requests of Ukrainians (according to the victims’ wording) in the first week of the Russian-Ukrainian war are divided into three categories based on their oral or written wording: expression (sentence) problems, psychoemotional states or disorders, and psychosomatic problems.

This study examined online and offline verbal inquiries, SMS, and social media posts by keywords and phrases (“fear”, “apathy”, “concern for relatives”, “panic attack”), given the overactive expression of mental states verbally on social media and phone apps. Analysis of data on psychological requests of Ukrainians (according to their wording) for the first week of the Russian-Ukrainian war showed that among psychoemotional problems. In the first place, complaints about the state of panic, panic attacks (70,8 % - 934 people); in the second, the state of fear, fear of death (67,6 % - 892 people), in particular fear for relatives (54,4 % - 718 people), fear of

night-time (47,3 % - 625 people); in the third, hysteria (46,9 % - 619 people) (Figure 1).

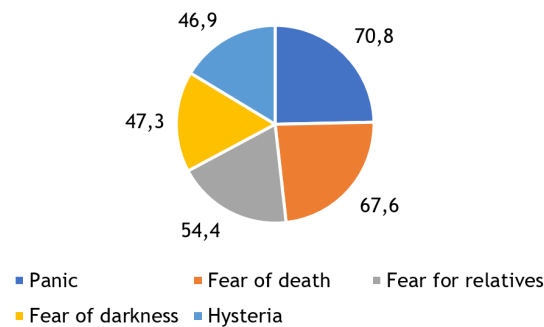


Figure 1. Typical psychoemotional states of the population of Ukraine in the first week of the current war (according to the wording of those who applied for psychological help), %

Analysis of the description of specific problems presented in expressions (sentences) showed that it is possible to distinguish 38 typical formulations of requests to psychologists in the first week of the war, among which the first place is occupied by the phrase: “We need help!” (“advice”, “consultation”). In general, quite often a request was formulated with the keyword “need” (help, support, advice). Moreover, the phrase “need advice” or “need a hint” was directed more to psychics than to practical psychologists. The phrase “help is needed” implied a wide range of requests: finding an answer to a question, making a decision, accepting a situation. As for making a decision, the biggest question that they directly wanted to get an answer from a psychologist was: “Should we evacuate (go abroad) or not?”. There are a lot of requests with the particle “not” (“I cannot...”, “I do not know...”, “I do not want to...”). There was a negative effect of medications: valerian caused nervousness, and antidepressants caused upset stools and dizziness.

Despite the massive loss of relatives in the first week of the war, people rarely sought psychological help to deal with the problem of losing a loved one (grief). More often, just a week after the funeral or news, relatives and friends asked to help the relative survive the loss. People were unwilling, especially in the first week, to accept the situation of war as such, and therefore the period of grieving was longer than usual.

On March 1, citizens began to actively apply for psychological help. Only on one of the sites of free psychological assistance on this day, 374 people applied, the number of which increased by 22 people (396 people) the next day, and then each day varied, mainly increasing, depending on the situation at the front and in general in Ukraine, as well as the popularity of the site or application of psychological assistance. The phrase “Need help!” without further clarification and a detailed description of the psychoemotional problem was formulated in 33,3 %. People formulated such a request, mostly unable to describe their condition in detail and experiencing extreme confusion. In second place (21,3 %), a query with the phrase “I cannot eat or drink/I lost my appetite”; in third place (16,8 %), “Using antidepressants does not help/Sedatives, other medications do not help”. Such seemingly insignificant percentages are caused by the fact that mostly in the first week of military aggression, victims formulated their psychoemotional requests separately (1-2 cases per formulation), such as: “I don’t have the strength to run for cover”, “I can’t concentrate”, “I can’t sleep without noise”, “I can’t leave my pet”, “I worry that I won’t see my relatives”, “I always want to sleep”, “The siren drives me crazy”, “How to inform my relatives about the death of a relative?”, “What should I do if it “overwhelms”?”, “What should a disabled person do during a war?”, “How to deal with refugees?”, “How should a refugee behave in someone else’s house?”.

Among other phrases and requests for psychological help were often used: “We are being bombed”, “Who can I talk to?”, “Tomorrow will not come”, “I have an exacerbation of mental problems that were before the war”, “The conflict with my family worsened against the background of the war”, “Stay or evacuate?”, “Communication with relatives has disappeared”, “I don’t know what to write”, “I can’t describe my condition”, “I don’t know how to live”, “I give up”, “I don’t want to live”, “I don’t have the strength”, “I can’t talk because I was afraid”, “I have bad thoughts”, “I smoke all the time”, “I need a specialist to work with children”, “I need a specialist in a specific field”, “I need a psychiatrist’s consultation”, “Help relatives, friends”, “I’m lonely”, “Shame that we are safe, and others - not” (survivor’s guilt syndrome), “I have phantom sirens, explosions”, “I want to scream and cry”, “I want to go home”, “How to pull yourself together?”, “How to calm others down?”, “What medications are best to take?”, “How not to go crazy?”. Complaints that “Sirens drive me crazy” have been widespread since March 2, on day 7 of the war. There was frequent irrational behaviour: instead of saving on everything during the first week of the war, people resorted to alcohol consumption and excessive smoking.

When someone formulated a request in the chat, it prompted, actualised the need, and suggested to the following people exactly how to formulate their psychological request. Therefore, after a certain request

message, the next request was repeatedly started with the words: “I have the same...”, “I also...”, “Same...”. Thus, for example, on one of the psychological help chats, after the key phrase: “I can’t explain what’s wrong with me,” almost 30 people wrote the same or similar message in a row, which was not observed on other days. The same regarding the wording “Nervous exhaustion after taking medication” or “I have problems: I overeat, both day and night, because I am a stress eater” (12 requests on March 2 (the first week of the war) and no similar request next week, while in the last week of March (the fifth week of the war) there were also 15 complaints about overeating, but on different days, not in one day), or complaints about panic attacks (March 2: 75 requests and only 8 complaints on March 1). That is, people needed a sample of the formulation of a thought request because cognitive processes are inhibited in a stressful state.

Since psychoemotional states determine the socio-psychological behaviour of the population, the characteristic of typical psychoemotional states of the population of Ukraine in the first week of the war, manifested in appropriate behaviour, is generalised. The theoretical basis for studying this behaviour was the fundamental works on “mass behaviour”.⁽¹²⁾ This characteristic is concluded by daily (from the first day of the war) recording “manually” the general psychoemotional states of the population of Ukraine. Characterization data were acquired by analysing the authors’ personal and team experience as psychologists in volunteer programmes from the start of the conflict. In the study, author training feedback analysis and analysis of psycho-emotional states of Ukrainians in the first week of the war were used in posts on personal and public pages on social networks and applications such as Facebook, Instagram, Telegram, Viber, and WhatsApp. Also conducted an analysis of requests for psychological help in the publicly available volunteer chat of the Telegram channel “Psychological help to Ukrainians during the war”) (table 1).

A total of 1,320 posts were analysed, mostly describing psychoemotional states in the chat of the psychological assistance app and 693 posts on personal and public pages on social media, Facebook, Instagram, Telegram, Viber, and WhatsApp; 458 people were interviewed covertly. On day 6 of the war (march 1), those who sought psychological help were able, recovering, to describe their psychoemotional states in more detail: a feeling of despair, depressive states, and aggression (hatred, anger) appeared. Hysteria was described as tears and crying (nervous breakdown; mood swings; increased emotionality; irritability; constant emotional tension). Approximately on the sixth day of the war, the population of Ukraine massively “rotated” psychoemotional states: those who, from the first day of the war, were in a state of psychoemotional agitation, went into a state of psychoemotional inhibition, and vice versa. It was on the sixth day that the state of fear was clarified: fear at the moment of sirens, and explosions, in the evening before nightfall, fear of going outside, fear of silence, and suicidal thoughts.⁽¹³⁾ On day 7, such psychoemotional states as apathy, depression, low self-esteem, neurotic state, overeating, and stress eating are activated. It was interesting to record the time of day of the population’s request for psychological help (using the example of an analysis of one of the volunteer Telegram channels for psychological assistance, starting from the start date of its work - February 28, 2022), presented in table 2.

Table 1. Characteristics of typical psychoemotional states of the population of Ukraine in the first week of the war, manifested in the corresponding socio-psychological behaviour of the population

Day	Typical socio-psychological behaviour of Ukrainian residents	Typical psychoemotional states of Ukrainians (defined by them in complaints and requests for psychological assistance)
February 24	Active flight (travel abroad) and internal movement from the war zone and cities (from one territory of Ukraine to another; abroad; from the city - to the village). Phone calls to relatives and friends to check their safety. Active tracking of military events in the news. Even the relatively psychoemotionally stable people slept dressed and did not ignore the alarms and went down to cover.	Hysteria; panic, panic attacks; fear, fear of death; fear for relatives; confusion (lack of faith in what happened); anxiety; stress; insomnia, sleep problems; memory loss.
February 25	In areas of active military operations: either hiding in public or personal shelters, or hiding in homes, or trying to leave the danger zone on their own or by an official “green corridor”. In relative safety zones, it is deserted on the streets and in public places (closed establishments, except for the largest grocery stores). Activation in public places and on the streets of mentally ill people who were afraid to socialise in peacetime, but now have become “free from society”. Phone calls to relatives and friends to check their safety. Active tracking of military events in the news. The inability of psychologists in general, first of all, to professionally provide psychological assistance (their own stay in a stressful state). Even the relatively psychoemotionally stable people slept dressed and did not ignore the alarms and went down to cover.	Hysteria; panic, panic attacks; fear, fear of death; fear for relatives; confusion (lack of faith in what happened); anxiety; stress; insomnia, sleep problems; memory loss.

February 26	Similar to the typical socio-psychological behaviour of February 25.	Hysteria; panic, panic attacks; fear, fear of death; fear for relatives; confusion (lack of faith in what happened); anxiety; stress; insomnia, sleep problems; memory loss.
February 27	Continuation of evacuation, self-evacuation of the population (movement internally (by the country) or externally (to other countries)) from the zone of active military operations. In the territory of relative security, after the population solves household and migration issues, the need for psychological support by contacting various websites, private psychologists. Similar socio-psychological behaviour as in previous days.	Hysteria; panic, panic attacks; fear, fear of death; fear for relatives; confusion (lack of faith in what happened); anxiety; stress; insomnia, sleep problems; memory loss.
February 28	Start of work in Ukraine of the largest, round-the-clock, volunteer (free) chat "Psychological assistance to Ukrainians during the war", which was immediately joined by thousands of people and hundreds of specialists and practical psychologists in the Telegram channel. Activation of social networks with a small number of "likes" and comments: mostly, active tracking of events and information, but without feedback.	Hysteria; panic, panic attacks; fear, fear of death; fear for relatives; confusion (lack of faith in what happened); anxiety; stress; insomnia, sleep problems; memory loss.
March 1	Similar socio-psychological behaviour as in previous days, but the number of people in public places of settlements in relatively safe territories has slightly increased, so mentally ill people have significantly decreased: they have returned to a sociopathic lifestyle, as society has become active.	Despair, depressive state; aggression (hatred, anger); hysteria: tears, crying (nervous breakdown; mood swings; increased emotionality, irritability; constant emotional tension); panic, panic attacks; fear, fear of death, and fear at the moment of sirens, explosions, in the evening before nightfall, fear of going out and fear of silence; fear for relatives, in particular for relatives on the front line; confusion (lack of faith in what happened); anxiety; stress; insomnia, sleep problems; suicidal thoughts.
March 2	Similar socio-psychological behaviour as on March 1.	Despair, depressive state; aggression (hatred, anger); hysteria: tears, crying (nervous breakdown; mood swings; increased emotionality, irritability; constant emotional tension); panic, panic attacks; fear, fear of death, fear at the moment of sirens, explosions, in the evening before nightfall; fear for relatives, in particular, for relatives on the front line, fear of going out and fear of silence; confusion (lack of faith in what happened); anxiety; stress; insomnia, sleep problems; suicidal thoughts; apathy, depression, low self-esteem, neurotic state, overeating/ stress eating.

Table 2. Distribution of requests for psychological assistance during the day (using the example of an analysis of one of the volunteer Telegram channels for psychological assistance, starting from the start date of its work - February 28, 2022)

Day	Requests in the morning (06:00-12:00)	Requests during the day (12:00-18:00)	Requests in the evening (18:00-00:00)	Requests at night (00:00-06:00)	Total requests during the day
February 28	0	26	62	0	88
March 1	62	110	202	1	376
March 2	89	76	187	44	396

DISCUSSION

The low level of visits to the specified and other chats of psychological services on February 28, 2022 (the first days of the war) is explained by the lack of public awareness, that is, the lack of advertising for the chat. At the same time, the popularisation of this application without advertising in the first week of the war among the population of Ukraine indicates the urgent need for the constant functioning of similar chats to activate them at an extreme moment. The ineffectiveness of the institute for providing psychological assistance in

Ukraine, where social and psychological services at the level of European countries and the United States still do not function, also contributes to the low attendance of psychologists by the population in the early days of the war. This is explained, first of all, by the “post-Soviet syndrome of attitude to psychologists”, which manifests itself in the attitude: “I’m not crazy, so I won’t go to a psychologist”.⁽¹⁴⁾ This attitude is a social stereotype caused by one-sided, communist politics due to the activities of the field of psychology in the Soviet period: practical psychology was not popular and effective, but psychiatry was limited to the “popular” diagnosis of “schizophrenia”, which was almost automatically established at the slightest suspicion by all “dissenting”—those whose views did not agree with the views of the current communist ideology.⁽¹⁴⁾ Therefore, a person with such a diagnosis immediately falls into the category of unpromising citizens: without the right to a decent education, work, and life.

The mass fear generated by this experience and stereotype still affects the effectiveness of the installation of shame and danger of visiting a practical psychologist passed down from the previous (Soviet) generation. Second, there are examples of positive self-regulation or psychoemotional state regulation: Ukrainians who were actively volunteering or acting in their positions from the start of the war did not have time to consult psychologists or seek psychological self-help. Such Ukrainians primarily provided assistance to others (military personnel, doctors, rescuers, shop assistants, and employees of various spheres of society’s functioning) and were physically unable to contact psychologists.^(15, 16)

The growing interest in visiting psychologists after March 1 is not only because sites or chats of free psychological assistance have become popular, but also because people have realised that it is possible and necessary to contact psychologists. Confusion, which was the subtext of any psychoemotional state during the first week of the war, presupposed a categorical rejection of the war situation. Unfortunately, the Ukrainian population has not yet developed the awareness to turn to psychologists in crises; everyone must have their own psychologist or social worker. It should be understood that despite the obvious reason for the deterioration of the psychoemotional state of the population of Ukraine in the first week of the war - the war itself is are internal reasons that prevent Ukrainians from self-regulating. It is necessary to identify ways to ensure and overcome the internal causes of a sharp deterioration in the psychoemotional states of citizens in the first week of the war for further self-realisation and cohesion among citizens. Thus, this requires improving the professional training of future employees of the social and psychological sphere of Ukraine and modernising popularisation, supporting their activities at the state level.

Thus, the time spent visiting the psychological assistance application is most active in the evening. First, citizens’ anxiety states and panic attacks in the evening are increased by the fear of night—a time of sleep when it is impossible to control the already uncontrolled situation - and the expectation of already accustomed night or morning bombings (the first bombing occurred at 4 a.m.). Another reason is the gradual restoration of the work schedule in various professional areas at the end of the first week of the war. The population returned to their jobs despite their psychoemotional states, so they could only contact psychologists after the end of the working day. As evidenced by the daily increase in channel participants, many individuals reread messages and comments from practical psychologists, choosing self-help or shame to seek aid. It is significant that psychologists from various organisations organised online meetings, webinars, and trainings, which helped Ukrainians correct their psychoemotional states.

Extremology studies the psychoemotional states of individuals during wartime, including changes in psyche and conduct under stressful or crisis conditions. The generalisation of typical psychoemotional states of Ukraine’s population in the first week of the war, as manifested in its behaviour, showed that these states directly depend on the person’s stay about combat operations and frontline events. The selfish component of the ordinary person was actualized, which was stated in complaints with excessive use of the singular personal pronouns “I”, and “me”, revealing significant mental problems disguised before the war under the guise of “smiling depression”. A significant proportion of Ukrainians are unaware of their psychoemotional problems.⁽¹⁷⁾ The author agrees with the above statement because the psychoemotional states of people who applied for or refused psychological help show that despite the massive loss of relatives, in the first weeks of the war, people rarely sought psychological help. Furthermore, the analysis of requests for psychological assistance reveals that the majority of Ukraine’s population found a need for psychological support only on the sixth day of the invasion.

In its most general form, extremology can be defined as a line of research on human activity and behaviour, the creation of practical training programmes, and recommendations that are directly aimed at survival in adverse conditions and in extreme situations, that is, individual and group civil protection systems. A tangent to this science is military psychology, the science of psychological problems that arise at the time of training a serviceman and at the time of waging war. This science considers the mechanisms and regularities of the functions of the individual’s psyche due to the involvement of a person in military activities, as well as psychological regularities in the creation of various areas of military activity. The field of military psychology develops in four areas: psychology of military personality; group psychology and interpersonal relations in the army; psychology

of military operations in peacetime; and psychology of war and combat.⁽¹¹⁾ However, the author suggests that, based on the results obtained, it should be argued that the war creates an extreme situation primarily for the civilian population of the country. The population's psychoemotional states significantly differed on the sixth or seventh day of the war. On the sixth day of the war, the Ukrainian population started experiencing:

- actively seek psychological help, but until now it needed a sample of the formulation of a thought request because cognitive processes are inhibited in a stressful state;
- describe their psycho-emotional states in more detail (hysteria was described as tears/crying, nervous breakdown; mood swings;
- exhibit increased emotionality, irritability; constant emotional tension), specify the state of fear (at the time of sirens, explosions, in the evening before nightfall);
- fear of going outside and fear of silence, suicidal thoughts;
- polarly identify psychoemotional states (from the agitation of the first days to the state of psychoemotional inhibition, and vice versa).

On day 7, the population became more active in such psychoemotional states as apathy/depression, low self-esteem, a neurotic state, and overeating/stress eating.⁽¹⁸⁾ The study of typical psychoemotional states of the Ukrainian population in the first week of the war showed that on days 6-7, people showed a tendency to despair, depressive states, apathy, and complete confusion. In addition to the obvious reason for the deterioration of the psychoemotional state of the population of Ukraine in the first week of the war (the war itself), internal reasons that prevented self-regulation were identified:⁽¹⁹⁾

- criticality of psychoemotional states before the war caused by panic attacks of the quarantine period and post-quarantine COVID-19, economic problems;
- lack of awareness of the need to contact psychologists in crisis situations;
- insufficient awareness of the population about the functioning of psychological assistance chats for Ukrainians to provide assistance in an extreme moment;
- insufficient effectiveness of the social and psychological service (at the level of European countries and the United States), primarily due to the "post-Soviet syndrome of attitude to psychologists";
- lack of professional training of practical psychologists to work in extreme conditions, in particular in war conditions, despite the fact that military operations have been going on in the country since 2014;
- lack of publicly available information about the rules of behaviour during bombing, alarm, in shelters, during panic attacks;
- ability to provide psychological self-help in extreme psychological situations; job loss, opportunities to visit the place of work/study.

The study by Slusarevskiy⁽²⁰⁾ identified the challenges that affected Ukrainian society's socio-psychological conditions in the context of the Russian-Ukrainian war. The author came to the conclusion that many psychological risks are associated with the high self-esteem of the population, provoked by unjustified expectations, for example, after the Orange Revolution, which, in turn, led to numerous disappointments among the citizens of Ukraine. In modern conditions, excessive assurances of an early victory over the aggressor trigger such an experience. As practice indicates, such promises temporarily ease a person's mental condition but eventually lead to distrust and a sense of rising danger. The author also links a full-scale Russian invasion to World War II and the Holodomor. Bullying and torture under occupation, which are brutal and represent recent events, and the inclination to transfer the furious enemy's attitude to diverse sectors of Ukraine's population are also issues here. The author also raises the issue of refugees in his study, since their number was highest in the first weeks of a full-scale invasion. There is a possibility that people who suddenly leave the country will develop a psychological syndrome of no return. This is not unfounded, as psychological traps play a role in a complex, gradual process of adapting to life in a foreign country, the influence of the Ukrainian diaspora, and labour migrants, which prove the value of staying abroad.⁽²¹⁾

Lazorenko⁽²¹⁾ describes the experience of disorders in psychoemotional states and post-traumatic stress disorder among Ukrainians. The purpose of the author's study was to highlight the methods of mastering such conditions and the psychotherapeutic methods of healing a person who suffered as a result of the genocidal psychotraumatic challenges of modern war. The researcher analyses the method of helping a person by adjusting the perception and experience of internal stress injuries, conflicts, and opponents, which can act as a resource for healing and acquiring new life experiences and personal growth. Introduce such a technique to gain the victim's integrity, psychological stability, and healthy lifestyle through personal negative states that contribute to their emergence and not lose them in the process of generalising negativity, its displacement to the unconscious, and possible future mental service of fear, anxiety, and internal boundaries to keep negative states out of consciousness. This experience demonstrates that, with proper understanding and assimilation, negativity can transform into a valuable post-traumatic resource. The author agrees with the need to introduce this method since the results determined in the course of the study indicate the interest of the population in working out injuries received during extreme weeks of war. The priority in this context is to further investigate

changes in the psycho-emotional situation of the population of Ukraine through the applied methods of surveys and analysis of personal behaviour in war conditions.

Thus, numerous psychological recommendations were given on how to behave in the first days of the war and how to overcome their psycho-emotional problems. They were unprepared and unable to provide psychological assistance due to stress and unpreparedness to work in extreme psychological conditions. According to extremology, such proposals must satisfy all three criteria: be a participant, be effective, and act deliberately and effectively. Researchers and practitioners should constructively examine and emphasise conduct suggestions in severe scenarios during the first week of conflict that have been tested, not recounted by “third-party viewers” or “unsuccessful participants”.

CONCLUSIONS

Understanding which psychoemotional problems most often arise in citizens in the centre of combat events or relative safety but under frequent alarms, when panic attacks are typical, accompanied by flight, aggression, or stupor. It is important because different psychoemotional states necessitate different psychotechniques of self-help and mutual assistance. To stabilise the population’s psychoemotional state during a full-scale war, researchers will develop a set of psychological exercises, psychocorrective classes, and psychological and pedagogical recommendations for both the population and extreme (and other branches) psychology specialists, taking into account age, gender, and professional orientation.

The distribution of requests for psychological assistance during the day and days of the week is stated. A low level of visits to sites, chats of psychological services, and individual consultations in the first days of the war; the most active need for psychological assistance in the evening (an increase in anxiety states and panic attacks, explained by the fear of the onset of the uncontrolled time of day and the greatest probability of bombing or danger—at night; restoration of the work schedule and the ability to contact psychologists only after the end of the working day). Positive examples of self-regulation and regulation of the psychoemotional states of Ukrainians during the first week of the war were identified. Those who, from the first days of the war, actively voluntarily or by positions involved in this or that type of activity helped others who did not have time, resorted to psychological self-help, or regulated their psychoemotional states in the process of work (military, doctors, rescuers, shop assistants, employees of various spheres of society functioning). The frequent provision of psychological support to parents by children in primary school and adolescence (calming, finding other adults to provide parents with psychological assistance); conscious patriotic activity, in particular, volunteer work.

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AUTHORSHIP CONTRIBUTION

Conceptualization: Inna Osadchenko, Tetiana Perepeliuk.

Data curation: Inna Osadchenko, Liudmyla Kotlova.

Research: Liudmyla Kotlova, Oksana Dudnyk, Alexander Kobets.

Methodology: Oksana Dudnyk, Nataliia Hrynova.

Project management: Tetiana Perepeliuk.

Resources: Nataliia Hrynova, Alexander Kobets.

Supervision: Tetiana Perepeliuk.

Drafting - original draft: Inna Osadchenko, Tetiana Perepeliuk, Liudmyla Kotlova, Oksana Dudnyk, Nataliia Hrynova, Alexander Kobets.

Writing - proofreading and editing: Inna Osadchenko, Tetiana Perepeliuk, Liudmyla Kotlova, Oksana Dudnyk, Nataliia Hrynova, Alexander Kobets.