

UDC 342.9

DOI <https://doi.org/10.24144/2307-3322.2025.91.3.39>

MEDICAL AND PSYCHOLOGICAL REHABILITATION OF MILITARY PERSONNEL, THEIR FAMILY MEMBERS, AND THE CIVILIAN POPULATION: A THEORETICAL AND LEGAL ANALYSIS

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Shevtsova A.V. Medical and psychological rehabilitation of military personnel, their family members, and the civilian population: a theoretical and legal analysis.

The article analyzes contemporary scholarly and legal approaches to defining the concepts of “medical rehabilitation” and “psychological rehabilitation” in the context of the armed aggression of the Russian Federation against Ukraine. The interrelation between national constitutional guarantees and international legal obligations of the state to ensure comprehensive assistance to service members, their families, and civilians affected by injuries, disabilities, or psychological trauma is traced. The main stages of the development of rehabilitation doctrine in Ukrainian scholarship are outlined: from an emphasis on the restoration of physical functions of the military to the gradual expansion of research toward psychological, social, and legal dimensions.

Key works of Ukrainian and international scholars emphasizing the need for an integrated approach to medical and psychological rehabilitation are examined. The contribution of international organizations, including WHO and NATO, in shaping technical standards and recommendations concerning both service members and civilian victims of war is highlighted. It is determined that in global practice an integrative approach prevails: rehabilitation is viewed as a continuous, multidisciplinary process that covers not only therapeutic and psychotherapeutic measures but also social integration, restoration of professional activity, and provision of legal guarantees for those affected.

Special attention is devoted to the methodological challenges of aligning Ukrainian rehabilitation doctrine with international standards. While Ukrainian scholarship has made significant progress in emphasizing the psychosocial dimension of rehabilitation, the persistence of biomedical approaches reveals the need for deeper interdisciplinary synthesis. This is particularly important for ensuring that rehabilitation is not limited to short-term therapeutic outcomes but also contributes to the long-term resilience of individuals, families, and communities.

The article further stresses that rehabilitation must be conceptualized not only as a healthcare service but also as an essential element of transitional justice and post-war recovery. Embedding rehabilitation within a rights-based framework strengthens the legitimacy of state policies, enhances social stability, and supports the reintegration of vulnerable groups into society. It is concluded that medical and psychological rehabilitation in wartime conditions should be interpreted as fundamental human rights, the fulfillment of which requires the state to establish a comprehensive system of measures based on international standards and national guarantees.

Key words: medical and psychological rehabilitation, military personnel, family members, civilians, theoretical and legal analysis.

Шевцова А.В. Медична та психологічна реабілітація військовослужбовців, членів їхніх сімей та мирного населення: теоретико-правовий аналіз.

У статті проаналізовано сучасні наукові та правові підходи до визначення понять «медична реабілітація» та «психологічна реабілітація» в контексті збройної агресії Російської Федерації проти України. Простежено взаємозв'язок між національними конституційними гарантіями та міжнародними правовими зобов'язаннями держави щодо забезпечення комплексної допомоги військовослужбовцям, їхнім сім'ям і цивільному населенню, яке постраждало від поранень,

інвалідності чи психологічних травм. Окреслено основні етапи розвитку доктрини реабілітації в українській науці: від акценту на відновленні фізичних функцій військових до поступового розширення досліджень у психологічному, соціальному та правовому вимірах.

Розглянуто ключові праці українських та зарубіжних учених, які наголошують на необхідності інтегрованого підходу до медичної та психологічної реабілітації. Висвітлено внесок міжнародних організацій, зокрема ВООЗ і НАТО, у формування технічних стандартів і рекомендацій щодо допомоги як військовослужбовцям, так і цивільним жертвам війни. Встановлено, що у світовій практиці переважає інтегративний підхід: реабілітація розглядається як безперервний, мультидисциплінарний процес, що охоплює не лише терапевтичні й психотерапевтичні заходи, а й соціальну інтеграцію, відновлення професійної діяльності та забезпечення правових гарантій для постраждалих.

Особлива увага приділяється методологічним викликам уніфікації української доктрини реабілітації з міжнародними стандартами. Попри значні досягнення українських дослідників у наголошенні на психосоціальному вимірі реабілітації, збереження біомедичного домінування вказує на потребу глибшого міждисциплінарного синтезу. Це особливо важливо для того, щоб реабілітація не обмежувалася короткостроковими терапевтичними результатами, а сприяла довготривкій стійкості окремих осіб, сімей і спільнот.

Додатково підкреслюється, що реабілітацію слід концептуалізувати не лише як медичну послугу, а й як невід’ємний елемент перехідного правосуддя та післявоєнного відновлення. Інтеграція реабілітаційної політики в правозахисну парадигму посилює легітимність державних заходів, зміцнює соціальну стабільність та підтримує реінтеграцію вразливих груп у суспільство. Зроблено висновок, що медична та психологічна реабілітація в умовах війни повинні розглядатися як фундаментальні права людини, реалізація яких потребує створення державою комплексної системи заходів на основі міжнародних стандартів і національних гарантій.

Ключові слова: медична та психологічна реабілітація, військовослужбовці, члени їхніх сімей, мирне населення, теоретико-правовий аналіз.

Formulation of the Problem. Contemporary rehabilitation science is undergoing a stage of dynamic development, driven by escalating global challenges and the urgent need to adapt traditional approaches to fundamentally new realities. The full-scale war launched by the Russian Federation against Ukraine has resulted in unprecedented human losses, mass injuries, and profound psychological trauma among both military personnel and civilians. At the same time, this reality has revealed not only the enormous challenges facing the health care system but also the structural fragility of existing mechanisms of social and psychological support.

In this context, the issues of medical and psychological rehabilitation extend far beyond the purely medical or social dimension, acquiring the status of a fundamental legal obligation of the state and becoming a crucial instrument for the protection of human rights during wartime. The Constitution of Ukraine guarantees the right of everyone to health protection and medical assistance (Art. 49), while international legal instruments, including the Convention on the Rights of Persons with Disabilities (2006), explicitly oblige states parties to establish adequate conditions for the rehabilitation and social integration of persons affected by injury, disability, or psychological trauma [1; 2]. These norms emphasize that rehabilitation must not be regarded as a discretionary state service or privilege but as an enforceable right that requires effective mechanisms of implementation and proper institutional support.

Theoretical comprehension of these processes necessitates an interdisciplinary approach that synthesizes medical, social, legal, and psychological perspectives into a single scientifically grounded conceptual framework. Rehabilitation emerges as a multidimensional phenomenon that encompasses not only physical recovery but also psychological support, social integration, and the restoration of professional and family functions. In modern scholarship, rehabilitation is increasingly conceptualized as an integrative process that links individual needs with the normative and political obligations of the state as well as with best international practices. This requires the coordination of national efforts with global standards to ensure sustainable outcomes and to strengthen the resilience of the health care system in conditions of war and post-war recovery.

Research Objective. The purpose of this article is to conduct a systematic analysis of the categories of “medical rehabilitation” and “psychological rehabilitation” in Ukrainian and international scholarly and legal literature, to identify differences in their conceptualization, to define the specifics of their

application to different population groups – military personnel, their families, and civilians—and to propose authorial definitions that reflect the current realities of Ukraine and correspond to international standards. Particular attention is devoted to the normative implications of these concepts, demonstrating how legal guarantees must be transformed into practical policies and institutional frameworks capable of ensuring effective assistance under the extraordinary conditions of war and throughout the period of post-war reconstruction.

Main Content. Research on rehabilitation in Ukraine has a long tradition, although most works focus on the restoration of health among service members. Historically, this subject was addressed within the framework of military medicine, which concentrated primarily on physical recovery. For instance, as early as the 2010s, Ya. Radysh developed methodological foundations of medical rehabilitation for the military, with emphasis on restoring physical functions and preventing disability [3].

These contributions established a conceptual framework for the further evolution of rehabilitation studies in Ukraine, even though they were strongly oriented toward biomedical rather than interdisciplinary approaches. However, over time, the scope of scholarly interest expanded: in recent works by I. Kruk and others, attention is drawn to the necessity of a comprehensive approach that also covers psychological and social aspects [4]. This expansion indicates a gradual shift in Ukrainian scholarship towards more integrated models that resonate with international standards.

A significant contribution to the study of psychological rehabilitation was made by Z. Kovalchuk and O. Zavatska, who substantiated the need to restore the professional capacity of law enforcement personnel through the lens of mental health [5]. Their research highlights that psychological injuries can be as debilitating as physical ones, undermining the ability of professionals to perform their duties effectively.

The progressive nature of these studies lies in the fact that Ukrainian scholars increasingly view psychological rehabilitation not as a narrowly clinical process but as one encompassing family, social, and legal aspects. This broader view is essential because it situates rehabilitation within the broader framework of social stability and resilience.

Nevertheless, civilian populations remain underrepresented in Ukrainian literature. Civilians who lost homes, livelihoods, or family members live in conditions of prolonged psychological trauma that often remain invisible to policymakers. The destruction of community networks and the absence of structured rehabilitation programs further exacerbate the vulnerability of this group.

Despite the Geneva Conventions and international humanitarian norms explicitly guaranteeing them access to medical and psychological support [13], academic attention to this issue remains limited. While the majority of research focuses on service members and veterans, the needs of civilians remain peripheral, creating an imbalance that requires correction and further academic engagement.

International scholarship demonstrates a more balanced approach. The WHO, in its concept «Strengthening Rehabilitation in Emergencies,» emphasizes the necessity of covering all affected groups [6]. This perspective reinforces the principle of inclusivity, which is fundamental to international human rights law. NATO has developed standards of psychological care for service members in operational settings [7; 8], while the ICRC has issued technical standards on mental health and psychosocial support (MHPSS) applicable also to civilians [10].

These initiatives reflect the recognition that armed conflicts produce widespread societal damage, which requires strategies that go beyond immediate battlefield medicine. In the United States and Canada, reintegration programs are actively functioning not only for veterans but also for their families [9; 12]. Such programs are rooted in the idea that effective rehabilitation must encompass both individual recovery and the stabilization of family units.

Thus, international doctrine is more comprehensive, while Ukrainian research is still in the process of adapting to new challenges and building institutional mechanisms capable of matching these standards.

In Ukrainian doctrine, medical rehabilitation is traditionally regarded as a set of measures aimed at restoring physical functions after injury or illness, with emphasis on therapeutic and preventive approaches, sanatorium-based recovery, disability prevention, and preparation of service members for return to duty or adaptation to civilian life [3]. This reflects the persistence of Soviet-era approaches, which privileged physical recovery over psychosocial integration.

In contrast, international standards interpret medical rehabilitation much more broadly. According to WHO, rehabilitation is a «set of measures aimed at optimizing human functioning and interaction with the environment» [6]. This definition expands the scope far beyond medical procedures, incorporating social welfare, legal guarantees, accessibility, and employment support.

By incorporating these elements, international standards move rehabilitation from the narrow domain of health care into the broader sphere of human rights protection and social policy. Such an expanded approach allows rehabilitation to be viewed as an instrument of social justice and human development.

Psychological rehabilitation in Ukraine has developed in response to the rising number of veterans suffering from post-traumatic stress disorder (PTSD). Scholars emphasize the need for systematic psychotherapeutic programs, group support, cognitive-behavioral methods, and family counseling [4; 5]. These approaches have demonstrated effectiveness but remain unevenly distributed and underfunded.

At the same time, debates continue as to whether psychological rehabilitation should be considered a branch of psychotherapy or a broader process that includes social integration, rebuilding trust within society, and strengthening social capital. International practice favors the latter, with MHPSS programs designed by the ICRC and other organizations combining individual therapy with community-based interventions [10; 11].

NATO also stresses that psychological support should be continuous – from pre-deployment training to reintegration into civilian life [7; 8]. Such continuity ensures that rehabilitation is not episodic but sustained, thereby reducing the risk of chronic psychological disorders.

Rehabilitation must also be considered through the lens of target groups, which requires a scientifically grounded stratification of approaches. First, service members who sustained injuries or mental trauma have a legitimate right to comprehensive medical and psychological support, including physical rehabilitation, prosthetics, neurorehabilitation, PTSD treatment, and social reintegration. Denial of this support would constitute a violation of constitutional guarantees and international standards [9].

Second, family members of service members become «invisible victims» of war. Research shows that trauma suffered by military personnel often transmits to their families, leading to emotional crises and family breakdown [12]. The secondary traumatization of families highlights the intergenerational consequences of conflict. Thus, modern rehabilitation models must incorporate family therapy, psychoeducation for children, and systemic family support.

Third, civilians living in conflict areas deserve equal attention. Displacement, loss of livelihood, or bereavement place them in chronic stress that can lead to lasting mental disorders and social maladaptation. International humanitarian law guarantees their right to medical and psychological assistance [13], yet both academic and practical frameworks often fail to recognize this fully. Without addressing these civilian needs, the broader process of national recovery risks remaining incomplete.

Based on the conducted analysis, the following definitions can be formulated. Medical rehabilitation should therefore be understood as a comprehensive, interdisciplinary, and legally regulated process combining medical, social, and legal measures aimed at restoring health, preventing disability, and ensuring full social reintegration. Such a definition allows policymakers to design rehabilitation programs that transcend narrow medical practice and create conditions for social stability.

Psychological rehabilitation should be interpreted as a long-term, multi-level process involving psychotherapeutic, socio-psychological, and legal interventions designed to overcome trauma, build resilience, restore social and professional functioning, and guarantee dignified life in the post-war context. This conceptualization ensures that rehabilitation is treated as a structural component of transitional justice and post-war recovery.

These definitions reflect the contemporary understanding of rehabilitation as a complex social phenomenon that requires coordinated efforts from different sectors of society and the state.

Conclusions. The theoretical and legal analysis conducted demonstrates that medical and psychological rehabilitation in wartime must be recognized as fundamental human rights guaranteed both by national legislation and by international treaties. Effective realization of these rights requires the state to establish an integrated system of measures covering all affected groups: military personnel, their families, and civilians. Such an approach would align Ukraine's constitutional guarantees with the best international practices and ensure genuine—not merely declarative—implementation of the right to health, dignity, and social reintegration.

Moreover, embedding rehabilitation policies within a rights-based framework would strengthen social resilience and contribute to the long-term reconstruction of Ukrainian society. The results of this study create a theoretical foundation for further empirical research and the development of practical recommendations for improving the rehabilitation system in Ukraine.

In the context of future scientific investigations, particular attention should be paid to issues of integrating traditional and innovative rehabilitation methods, developing indicators of rehabilitation

program effectiveness, and studying the long-term socio-economic effects of investments in the rehabilitation sector. These research directions will contribute to the formation of a more advanced and scientifically grounded system of rehabilitation assistance, while also providing a basis for assessing the socio-economic effects of investments in the rehabilitation sector.

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