https://doi.org/10.34142/23129387.2026.74.09
UDC 364-78:316.454.3
ORCID 0000-0003-4826-8033

VOLUNTEER REHABILITATION DURING WAR: «MENTAL VECHORNITSI»

Nataliia O. Bondarenko,
PhD (Pedagogy), Associate Professor, Department of Social Work and Rehabilitation,
National University of Life and Environmental Sciences of Ukraine, 15 Heroiv Oborony St, Kyiv 03041, Ukraine.

Relevance. During the full-scale war in Ukraine, volunteering has become a crucial community resource. However, prolonged exposure to chronic stress, moral strain, time pressure, and repeated contact with traumatic events increases the risk of emotional exhaustion and burnout. This necessitates accessible community-based social rehabilitation formats for volunteers.

Aim. The study aimed to theoretically justify and empirically pilot a social rehabilitation programme for volunteers in wartime Ukraine ("Mental Vechornitsi") and to evaluate its short-term effectiveness.

Methods. A pre/post descriptive design was implemented (n=10). Measures included self-rated tension/anxiety (0–10 scale), perceived acquisition of stress-regulation skills (1–5 scale), overall programme satisfaction (0–10 scale), and qualitative group reflection.

Results. The distribution of tension/anxiety scores shifted from predominantly high values before the intervention (mode = 7) to low values after participation (mode = 1). All participants reported acquiring at least two stress-regulation techniques (scores 4–5), and satisfaction ratings were high (7–10). A chi-square test (χ^2=22.0; p≈0.015) indicated a statistically significant shift in distribution.

Conclusions. The "Mental Vechornitsi" programme demonstrates feasibility and practical value as a brief community-based rehabilitation format for volunteers during wartime. Further research should include larger samples, validated instruments, paired analyses, and longitudinal follow-up.

Keywords: volunteering; social rehabilitation; war-related stress; psychosocial support; burnout prevention; community intervention.

Реабілітація волонтерів під час війни: «Ментальні вечорниці»

Наталія О. Бондаренко,
кандидат педагогічних наук, доцент кафедри соціальної роботи та реабілітації,
Національний університет біоресурсів і природокористування України, вул. Героїв Оборони, 15, Київ 03041, Україна.

Актуальність. В умовах повномасштабної війни в Україні волонтерська діяльність стала ключовим ресурсом підтримки громад, однак тривале перебування у стані хронічного стресу, морального напруження, дефіциту часу та повторного контакту з травматичним досвідом підвищує ризик емоційного виснаження і професійного вигорання. Це зумовлює потребу у впровадженні доступних форматів соціально-психологічної реабілітації волонтерів на рівні місцевих спільнот.

Мета дослідження – теоретично обґрунтувати та емпірично апробувати програму соціальної реабілітації волонтерів в умовах воєнного часу «Ментальні вечорниці» та оцінити її короткострокову ефективність.

Методи. Використано описовий дизайн до- та післявимірювання (n=10). Оцінювали рівень напруження/тривоги за шкалою 0–10, засвоєння технік саморегуляції (1–5), загальну задоволеність програмою (0–10), а також проведено якісну групову рефлексію.

Результати. Зафіксовано зміщення розподілу показників напруження/тривоги від високих значень (мода = 7) до низьких (мода = 1) після участі у програмі. Усі учасники відзначили засвоєння щонайменше двох технік саморегуляції (4–5 балів), рівень задоволеності був високим (7–10 балів). Статистичний аналіз частот (χ^2=22,0; p≈0,015) засвідчив значуще зрушення розподілу показників.

Висновки. Програма «Ментальні вечорниці» демонструє доцільність і перспективність як короткий громадоорієнтований формат соціальної реабілітації волонтерів. Подальші дослідження мають передбачати розширення вибірки, використання валідизованих методик та довготривалий моніторинг ефектів.

Ключові слова: волонтерство; соціальна реабілітація; воєнний стрес; психосоціальна підтримка; профілактика вигорання; громадські інтервенції.

Introduction

Volunteer engagement has become a critical resource for Ukrainian communities during the full-scale war, yet the intensity and duration of volunteering often create a prolonged stress load that threatens wellbeing, social functioning, and sustainable engagement. International guidance on mental health and psychosocial support in emergencies emphasises layered, context-sensitive interventions that combine practical support, psychoeducation, social connectedness, and access to specialised care when needed (Inter-Agency Standing Committee [IASC], 2007). In this context, social rehabilitation for volunteers is understood as a comprehensive process that supports recovery of social functioning, emotional stability, self-regulation, and motivation, integrating psychological, social, communicative, and recreational components. Burnout is a salient risk for high-demand helping roles; the WHO describes burnout as an occupational phenomenon related to chronic workplace stress that has not been successfully managed (World Health Organization [WHO], 2019). For volunteer settings that increasingly resemble organised work, burnout prevention and recovery become key targets for community-based rehabilitation.

Aim

The aim of this study was to theoretically justify and empirically pilot a social rehabilitation programme for volunteers in wartime Ukraine (“Mental Vechornitsi”) and to evaluate short-term changes in tension/anxiety, skill acquisition in stress regulation, and participant satisfaction.

Methodology of Research

Design and setting. A pre/post descriptive design was implemented in volunteer communities Repair Together and Bakotyky within a one-day group session and three additional sessions. Participants. The pilot sample included 10 volunteers (n=10) who completed pre and post questionnaires. Measures. Tension/anxiety was self-rated on a 0–10 scale (0=not at all;

10=maximum). Skill acquisition was assessed on a 1–5 scale by agreement with the statement "I mastered at least two stress-regulation techniques." Programme satisfaction was rated on a 0–10 scale. Additionally, qualitative group reflection was collected after the session. Procedure. The programme consisted of structured acquaintance exercises, a psychoeducational module on stress and burnout, a sound-based relaxation session with meditation, a brief masterclass on singing bowls, and final reflection. Ethics. Participation was voluntary and anonymous; respondents provided informed consent for the use of aggregated results.

Results

Before the session, tension/anxiety ratings clustered in the high range, with the most frequent score of 7 and a substantial share of responses at 8. After the session, the distribution shifted toward low values, with the most frequent score of 1 and non-zero frequencies at 0–3. All participants indicated high skill acquisition (scores 4–5), and satisfaction was concentrated at 8–10. A conservative comparison of the pre and post distributions using a chi-square test on frequency tables indicates a statistically detectable shift in the overall distribution (χ^2=22.0, df=10, p≈0.015). This inference should be treated as exploratory because the analysis uses aggregated frequencies rather than paired within-person differences.

Figures

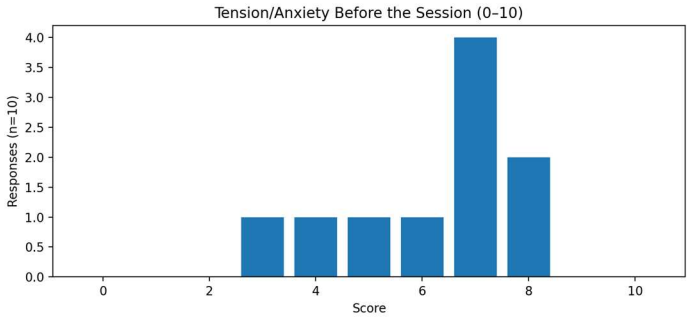


Figure 1. Distribution of tension/anxiety scores before the session (n=10).

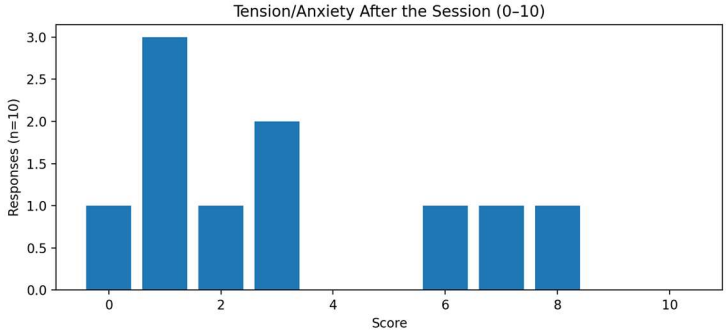


Figure 2. Distribution of tension/anxiety scores after the session (n=10).



Figure 3. Self-assessed acquisition of stress-regulation techniques (n=10).

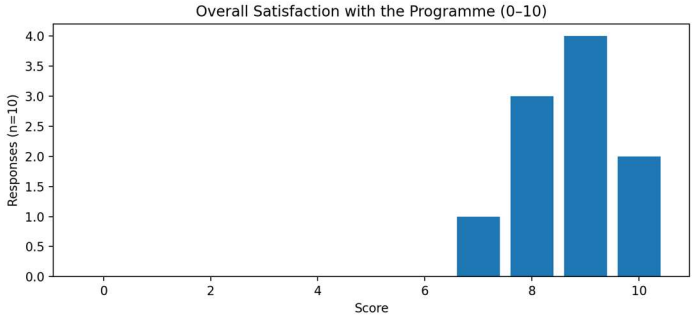


Figure 4. Overall programme satisfaction (n=10).

Comparative Tables

Table 1. Tension/anxiety (0–10) frequency distribution before and after the session (n=10).

Score	Before (count)	After (count)
0	0	1
1	0	3
2	0	1
3	1	2
4	1	0
5	1	0
6	1	1
7	4	1
8	2	1
9	0	0
10	0	0

Table 2. Programme components aligned with international MHPSS guidance.

Programme component	Target mechanism	Corresponding guidance
Psychoeducation on stress and burnout	Normalisation, knowledge, self-monitoring	IASC (2007); WHO (2019)
Breathing and body-based stabilisation	Physiological down-regulation, grounding	IASC (2007); Hobfoll et al. (2007)
Sound-based relaxation and meditation	Relaxation response, reduction of arousal	IFRC PS Centre (2020)
Structured group reflection	Social connectedness, co-regulation, meaning-making	IASC (2007); IFRC PS Centre (2020)

Table 3. Wartime barriers to volunteer sustainability and rehabilitation-oriented responses.

Barrier	Risk for volunteers	Rehabilitation response
Chronic overload and time pressure	Exhaustion, reduced recovery time	Regular brief sessions; role rotation; recovery planning
Repeated exposure to traumatic events/content	Secondary traumatic stress	Stabilisation skills; peer support; referral pathways
Fragmented institutional support	Unequal access to help	Partnerships with local services; standardised support protocols
Low awareness of self-regulation and boundaries	Escalating distress and burnout	Psychoeducation; skills training; supportive supervision

Discussion

The observed reduction in tension/anxiety and the uniformly high ratings of skill acquisition and satisfaction are consistent with international models that emphasise immediate stabilisation, psychoeducation, and social support as core elements of psychosocial care in emergencies (IASC, 2007). Similar mechanisms are described in the literature on burnout and secondary traumatic stress in helping roles, where recovery is supported by enhancing perceived control, improving emotion regulation, and strengthening supportive relationships (Maslach & Jackson, 1981; Figley, 1995). Compared with broader organisational approaches, the "Mental Vechornitsi" format is brief and community-based, which increases feasibility in wartime conditions but also limits dose and follow-up. The pilot results should be interpreted with caution due to the small sample size and the short-term outcome window. Future research should employ paired within-person measurements, validated scales (e.g., Maslach Burnout Inventory or ProQOL), and follow-up assessment to estimate sustained effects and to identify which components contribute most to change.

Conclusions

The study demonstrated the feasibility of a brief social rehabilitation programme for volunteers during wartime Ukraine. The pilot data indicate a marked shift toward lower self-rated tension/anxiety after participation, alongside high perceived acquisition of stress-regulation skills and high satisfaction. These findings support further development of community-based rehabilitation formats integrated into volunteer organisations and local services. Future research should extend the empirical base using paired analyses, validated instruments, larger samples, and longitudinal follow-up to evaluate durability and implementation conditions.

Ethics, funding, conflict of interest

Ethics. The authors confirm adherence to publication ethics principles and standards consistent with COPE and the recommendations of international medical editors. Funding. No external funding was received. Conflict of interest. The authors declare no conflict of interest.

References

Figley, C. R. (1995). Compassion fatigue: Coping with secondary traumatic stress disorder in those who treat the traumatized. Brunner/Mazel.

Freudenberger, H. J. (1974). Staff burn-out. Journal of Social Issues, 30(1), 159–165. DOI: http://dx.doi.org/10.1111/j.1540-4560.1974.tb00706.x

Hobfoll, S. E., Watson, P., Bell, C. C., Bryant, R. A., Brymer, M. J., Friedman, M. J., Friedman, M., Gersons, B. P. R., de Jong, J. T. V. M., Layne, C. M., Maguen, S., Neria, Y., Norwood, A. E., Pynoos, R. S., Reissman, D., Ruzek, J. I., Shalev, A. Y., Solomon, Z., Steinberg, A. M., & Ursano, R. J. (2007). Five essential elements of immediate and mid-term mass trauma intervention: Empirical evidence. Psychiatry, 70(4), 283–315. DOI: https://doi.org/10.1521/psyc.2007.70.4.283

Inter-Agency Standing Committee. (2007). IASC guidelines on mental health and psychosocial support in emergency settings. https://interagencystandingcommittee.org

IFRC Reference Centre for Psychosocial Support. (2020). Guidelines for supporting volunteers (caring for staff and volunteers in crises). https://pscentre.org

Lazarus, R. S., & Folkman, S. (1984). Stress, appraisal, and coping. Springer.

Maslach, C., & Jackson, S. E. (1981). The measurement of experienced burnout. Journal of Organizational Behavior, 2(2), 99–113. DOI: https://doi.org/10.1002/job.4030020205

Stamm, B. H. (2010). The concise ProQOL manual (2nd ed.). ProQOL.org.

World Health Organization. (2019). Burn-out an “occupational phenomenon”: International Classification of Diseases (ICD-11). https://www.who.int

Verkhovna Rada of Ukraine. (2011). Law of Ukraine “On Volunteer Activity” No. 3236-VI. https://zakon.rada.gov.ua

Yanyshevska, Y. O. (2026). Social rehabilitation of volunteers during war in Ukraine: Presentation materials. National University of Life and Environmental Sciences of Ukraine.

Отримано: 21 02 2026 року
Прорецензовано: 16 03 2026 року
Прийнято до друку: 20 03 2026 року