



PSYCHOLOGICAL COMPONENTS AND FACTORS OF EMOTIONAL STATES OF INTERNALLY DISPLACED PERSONS

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Abstract

Relevance The relevance of studying the emotional state of IDPs is due to the need to develop effective mechanisms for psychological support and social adaptation of displaced persons. The study of emotional reactions and psychological states of IDPs allows us to better understand the needs of this vulnerable category of the population and create appropriate assistance programs.

The purpose of the study is a comprehensive analysis of the factors and structure of emotional states of internally displaced persons in Ukraine and the development of recommendations for optimizing psychological assistance to this category of the population.

Methodology. The study used theoretical methods (analysis, generalization and systematization) and psychodiagnostic techniques: 1) Spielberger-Khanin Anxiety Scale (STAI); 2) Beck Depression Inventory (BDI-II); 3) Traumatic Stress Questionnaire (TSQ); 4) Differential Diagnostic Methodology of Depressive States by V. Zunge (adapted by T. I. Balashova); 5) Psychological Well-Being Scale Methodology by K. Riff (in Karskanova's adaptation).

Results. An empirical study of the emotional state of IDPs revealed a high level of anxiety in 65% of respondents, depressive moods in 41%, and symptoms of post-traumatic stress disorder in 28% of respondents. It was found that the intensity of negative emotional states depends on a number of factors: the duration of stay in IDP status, the presence of social support, financial situation, age, health status, and individual psychological characteristics.

Conclusions. It has been established that psychological reactions to displacement have a complex structure and include both negative (anxiety, fear, depression, anger) and positive (hope, relief, gratitude) emotional states. An important theoretical conclusion is the understanding of the dynamic nature of the emotional states of IDPs, which change in the process of adaptation to new living conditions. Recommendations have been developed for psychological support of IDPs, taking into account the specifics of their emotional state.

Keywords: internally displaced person, negative and positive emotional states, psychological reactions, factors of emotional states.

Relevance

The armed conflict in Ukraine, which has been ongoing since 2014 and has significantly

intensified since February 2022, has led to large-scale internal displacement of the population. According to the International Organization for Migration, as of 2025, the number of internally displaced persons (IDPs) in Ukraine is over 5 million people, among whom 45% face difficulties in finding employment, 52% need housing solutions, 34% have limited access to social services, and 28% indicate problems with access to health services (International Organization for Migration, 2024).

A study by Golotenko and Udovenko (2023) showed that 67% of internally displaced persons have experienced psychological trauma related to the experience of war; 43% perceive their stay as temporary, which complicates integration. Thus, forced displacement significantly affects the psycho-emotional state of people who find themselves in new living conditions, often losing their homes, jobs, social ties and a sense of stability (Holotenko @ Udovenko, 2023: 28).

The importance of studying the emotional state of IDPs is due to the need to develop effective mechanisms for psychological support and social adaptation of displaced persons. The study of emotional reactions and psychological states of IDPs allows us to better understand the needs of this vulnerable category of the population and create appropriate assistance programs.

An analysis of the current state of the problem indicates a significant interest of scientists in various aspects of the psychological well-being of IDPs. Domestic researchers (Tytarenko T.M., Maksymenko S.D., Pinchuk I.Ya., Kozyntseva O.I.) have made a significant contribution to the study of the psychological consequences of forced displacement. Foreign scientists (Porter M., Haslam N., Steel Z., Silove D.) have studied factors affecting the mental health of refugees and displaced persons in different countries of the world. Studies by the World Health Organization and the International Organization for Migration confirm the high level of psycho-emotional disorders among IDPs.

Kharadzi and Trunina (2023) note that in conditions of forced displacement and other traumatic events, negative emotional states such as anxiety, depression, emotional exhaustion, apathy, aggression, frustration often develop, which significantly complicate the processes of adaptation and social integration (Kharadzi @ Trunina, 2023: 795). The authors emphasize that prolonged negative emotional states can lead to the formation of mental disorders, in particular, anxiety and depressive disorders, post-traumatic stress disorder (PTSD), adaptation disorders, etc.

Tyurina and Solokhina (2022), analyzing foreign studies of the impact of military conflicts on mental health, draw attention to the fact that the emotional states of people in crisis situations are often characterized by high dynamism and variability (Tyurina @ Solokhina, 2022: 117). The authors distinguish several stages of emotional response to traumatic events:

- Stage of shock and denial (emotions of fear, confusion, numbness prevail);
- Stage of anger and protest (emotions of anger, indignation, irritation dominate);
- Stage of bargaining (characterized by the search for compromises, hope and anxiety



prevail);

- Stage of depression (emotions of sadness, hopelessness, apathy prevail);
- Stage of acceptance (formation of adaptive emotional reactions, restoration of emotional balance).

An important aspect of understanding emotional states in the context of forced displacement is the concept of resilience – psychological stability, the ability to maintain or restore psychological well-being in the face of adversities (adverse life circumstances). As Khymchenko and Chernukha (2023) note, resilience is manifested in the ability to maintain a positive emotional state, optimism, and hope for the future even in difficult life circumstances. The authors emphasize that the formation of emotional intelligence, which is understood as a person's ability to recognize emotions, understand the intentions, motivations, and desires of other people and their own, as well as the ability to manage their emotions and the emotions of other people in order to solve practical problems, is an integral component of psychological assistance to IDPs (Khymchenko @Chernukha, 2023).

The purpose of the study is a comprehensive analysis of the emotional state of internally displaced persons in Ukraine and the development of recommendations for optimizing psychological assistance to this category of the population.

Research tasks addressed in the article:

1. To identify factors that influence the emotional state of displaced persons;
2. To identify typical emotional reactions and disorders among IDPs;
3. To develop recommendations for psychological support for internally displaced persons, taking into account the specifics of their emotional state.

Methodology

Sample. The study sample consisted of 120 people, including 60 internally displaced persons (experimental group) and 60 non-internally displaced persons (control group). The sample was formed using the "snowball" method with certain quotas by gender and age to ensure the representation of different categories of IDPs.

The sample in the experimental group included 38 women (63.3%) and 22 men (36.7%) aged 18 to 65. The average age of the participants was 37.4 years. When forming the control group, the principle of matching the socio-demographic characteristics of the main group was observed to ensure the correctness of the comparison of results. Thus, the control group also included 38 women (63.3%) and 22 men (36.7%) from the age range of 19 to 63. The average age of the control group participants was 38.2 years.

The majority of respondents (68.6%) had resettled from Donetsk and Luhansk regions, 17.1% from Kharkiv region, 8.6% from Kherson region, and 5.7% from other regions of Ukraine. The duration of stay as an IDP varied from 6 months to 8 years, with 60% of respondents having been displaced for less than 3 years and 40% for more than 3 years.

By level of education, the study participants were distributed as follows: 55% had

higher education, 28.3% - secondary specialized education, 16.7% - general secondary education. By marital status: 48.3% - married, 23.3% - divorced, 20% - single, 8.4% - widows. 60% of the participants had children (of which 33.3% - one child, 47.6% - two children, 19.1% - three or more children).

Methods. A comprehensive questionnaire in the form of a Google Form was developed for the study, which included several blocks of questions: socio-demographic characteristics (age, gender, education, marital status, employment, etc.), circumstances of resettlement (reasons, duration, conditions), subjective assessment of the current situation and one's own emotional state, main problems and needs, strategies for overcoming difficulties, plans for the future. The questionnaire contained both closed-ended questions with multiple-choice answers and open-ended questions, which allowed for more detailed information about the respondents' individual experiences.

Data collection was carried out through individual and group questionnaires, as well as psychodiagnostic testing. Before conducting the study, all participants were informed about its purpose and provided voluntary consent to participate. Participants were guaranteed confidentiality and anonymity, as well as the opportunity to refuse participation in the study at any stage.

The questionnaire was conducted both in paper format (during personal meetings) and in electronic format (using Google Forms). Psychodiagnostic testing was carried out exclusively in paper format during individual or group meetings with participants.

The processing and analysis of the obtained data were carried out using methods of mathematical statistics, in particular, descriptive statistics (frequency analysis, averages, standard deviations), correlation analysis (Pearson correlation coefficient), comparative analysis (Student's t-test, Mann-Whitney test). SPSS 26.0 was used for statistical data processing.

The analysis of the results also included a qualitative interpretation of the responses to the open-ended questions of the questionnaire, which allowed us to identify the individual characteristics of the emotional state of IDPs, their problems, needs, and coping strategies.

The following psychodiagnostic methods were used to assess the emotional state of IDPs:

1. Spielberger-Khanin Anxiety Scale (STAI) – to measure the level of situational and personal anxiety.
2. Beck Depression Inventory (BDI-II) – to assess the presence and severity of depressive symptoms.
3. Traumatic Stress Questionnaire (TSQ) – to identify signs of post-traumatic stress disorder (PTSD).
4. Methodology for differential diagnosis of depressive states by V. Zunge (adapted by T. I. Balashova) – to assess the level of depression.
5. Methodology "Psychological Well-Being Scale" by K. Riff (adapted by Karskanova) – to study the subjective feeling of psychological well-being.



Let us describe their role in the study in more detail:

1. Spielberger-Khanin Anxiety Scale (STAI). The STAI scale (State-Trait Anxiety Inventory) is one of the most famous methods for measuring the level of anxiety. Developed by Ch. Spielberger, adapted by U. Khanin. It consists of 40 statements: 20 - measure situational anxiety (state) → shows the level of anxiety at the moment; 20 - measure personal anxiety (trait) → chronic level of anxiety as a stable personality characteristic. The study used it to determine the current emotional state of IDPs, as well as to identify a tendency to anxiety reactions, which often increase under the influence of traumatic factors of resettlement. Advantages: separates the situational component (the influence of external conditions) and the stable personal component. Widely used to diagnose stress and anxiety in crisis situations. Psychometric properties: High reliability (Cronbach's $\alpha \approx 0.85-0.90$). Validity confirmed by numerous studies in Ukraine.

2. Beck Depression Inventory (BDI-II) One of the most popular methods for measuring the level of depression, created by Aaron Beck, the second edition (BDI-II) is adapted to the DSM-IV/DSM-5 criteria. Consists of 21 items. The severity of depression symptoms is assessed on a 4-point scale (from 0 to 3), includes emotional, cognitive, behavioral and somatic symptoms.

The study is used to identify symptoms of depression in IDPs - one of the key problems observed in this group due to losses, chronic stress and a sense of hopelessness. Advantages: High sensitivity to the dynamics of the state (can be re-measured after interventions). Ease of application in different samples (clinical and non-clinical). Psychometric properties: Internal consistency $\alpha \approx 0.90$. Validity has been proven by many meta-analyses.

3. Traumatic Stress Questionnaire (TSQ) A comprehensive questionnaire for assessing signs of post-traumatic stress disorder (PTSD). In the study, it is referred to as the TSQ, as the Ukrainian adaptation of the PCL-5 (PTSD Checklist for DSM-5) was used. Structure: 20 items that reflect 4 main groups of PTSD symptoms: intrusive memories (Intrusion); avoidance (Avoidance); negative changes in cognitions/mood; hyperarousal (Hyperarousal).

Used to identify PTSD symptoms, which is a common phenomenon among IDPs who have experienced traumatic events (losses, combat, resettlement). Advantages: High sensitivity and specificity for diagnosing PTSD. Allows you to detect even latent manifestations of post-traumatic symptoms. Psychometric properties: High internal consistency ($\alpha \approx 0.90$). Reliable validity according to DSM-5 criteria.

4. Methodology for differential diagnosis of depressive states by V. Zung (Zung Self-Rating Depression Scale) (adaptation by T. I. Balashova). Aimed at assessing the severity of depression. Structure: 20 items that assess the symptoms of depression on a 4-point scale. Includes affective, motivational, cognitive and somatic manifestations of depression. In the study, it supplements data from the Beck scale, allowing for a detailed analysis of the level of depression and tracking its differentiated manifestations in IDPs. Advantages: Simplicity

and speed of completion; good validity and clear threshold distribution for mild, moderate and severe forms of depression. Psychometric properties: internal consistency $\alpha \approx 0.80-0.85$.; Widely validated on Ukrainian samples.

5. Psychological Well-Being Scale by K. Riff (PWB). Structure: From 18 to 84 items, measures 6 components of well-being: self-acceptance, positive relationships with others, autonomy, environmental mastery, purposefulness in life, personal growth. The study is an important component that allows assessing the adaptive resource of IDPs, in particular the presence of positive psychological attitudes that contribute to recovery. Advantages: emphasizes not only symptoms, but also positive personal resources; suitable for studying the qualitative aspect of life in crisis samples. Psychometric properties: high internal consistency $\alpha \approx 0.85-0.93$.

Results

During the study, a comprehensive picture of the emotional state of internally displaced persons was obtained in comparison with the control group and the main factors that affect their psychological well-being.

The analysis of the survey results showed that the majority of respondents from the IDP group (82.9%) faced psychological difficulties after resettlement, while the intensity of these difficulties was different: 31.4% assessed them as significant, 42.9% as moderate, 25.7% as insignificant. In the control group, 54.3% of respondents reported the presence of psychological difficulties during the last year, of which only 11.4% assessed these difficulties as significant, 28.6% as moderate, 60.0% as insignificant. The difference between the groups in the intensity of psychological difficulties was statistically significant ($\chi^2=12.73$, $p<0.01$).

When asked about the dominant emotions during the last month, IDP participants most often noted anxiety (74.3%), sadness (68.6%), uncertainty about the future (65.7%), irritation (54.3%), a sense of helplessness (45.7%), anger (40%), guilt (34.3%), fear (31.4%). Positive emotions were mentioned much less often: hope (37.1%), joy (28.6%), gratitude (25.7%), satisfaction (17.1%).

In the control group, the distribution of emotions was different: anxiety (45.7%), sadness (34.3%), uncertainty about the future (37.1%), irritation (31.4%), a sense of helplessness (17.1%), anger (22.9%), guilt (14.3%), fear (17.1%). Positive emotions were mentioned more often: hope (60.0%), joy (54.3%), gratitude (48.6%), satisfaction (42.9%). Statistical analysis showed significant differences between groups in the majority of negative emotions ($p<0.05$) and in all positive emotions ($p<0.01$).

Analysis of the results of the application of psychodiagnostic techniques allowed to obtain more detailed information about the emotional state of the study participants. In a generalized form, such results are presented in Table 1.

According to the method of "Psychological Well-being Scale" by K. Riff, it was found that the general level of psychological well-being of the majority of respondents in the IDP



group (65%) is at an average level, 23.33% - at a low level, and only 11.67% - at a high level. In the control group, the distribution was different: high level - 31.66%, average - 60.0%, low - 8.34%. The difference between the groups in terms of the level of psychological well-being was statistically significant ($p < 0.01$).

Table 1. Results of the psychodiagnostic examination of the study participants

Level and % indicators of study participants Methods	Level	IDP group (%)	Control group (%)	Difference (IDP – Control)
Spielberger-Hanin Anxiety Scale				
Situational anxiety	Low	31,67	63,3	-31,63
	Moderate	43,3	31,67	+11,63
	High	25,03	5,03	+20,00
Personal anxiety	Low	43,3	65,0	-21,7
	Moderate	35,0	28,3	+6,7
	High	21,7	6,7	+15,0
Beck Depression Inventory	Missing	55,0	76,67	-21,67
	Easy	25,0	16,67	+8,33
	Moderate	15,0	5,0	+10,0
Traumatic Stress Questionnaire	Missing	65,0	85,0	-20,0
	Individual symptoms	23,3	11,67	+11,63
	Partial PTSD	8,3	3,33	+4,97

In the IDP group, the lowest scores were observed on the scales "Environmental Management" (mean score 46.3 out of a possible 84) and "Goals in Life" (mean score 48.7), the highest on the scales "Personal Growth" (mean score 56.2) and "Positive Relationships with Others" (mean score 54.1). In the control group, the distribution was more even, with the highest scores on the scales "Autonomy" (mean score 63.5) and "Personal Growth" (mean score 62.8).

Comparative analysis of mean values for all scales of the methodology showed statistically significant differences between groups on the scales "Environmental Management" ($t=5.72$, $p < 0.001$), "Goals in Life" ($t=4.38$, $p < 0.001$), "Self-Acceptance" ($t=3.96$, $p < 0.001$) and "Autonomy" ($t=3.24$, $p < 0.01$). Less pronounced, but statistically significant differences were observed on the scales "Personal Growth" ($t=2.18$, $p < 0.05$) and "Positive Relationships with Others" ($t=2.05$, $p < 0.05$).

Correlation analysis showed the presence of significant relationships between different indicators of emotional state in both groups. In particular, in the IDP group, a strong positive correlation was found between the level of depression and situational anxiety ($r=0.72$, $p<0.01$), as well as between the level of depression and the presence of PTSD symptoms ($r=0.68$, $p<0.01$). The overall level of psychological well-being was negatively correlated with the level of depression ($r=-0.76$, $p<0.01$), situational anxiety ($r=-0.61$, $p<0.01$) and the presence of PTSD symptoms ($r=-0.58$, $p<0.01$). In the control group, similar correlations were observed, but with smaller coefficients: between the level of depression and situational anxiety ($r=0.59$, $p<0.01$), between the level of depression and the presence of PTSD symptoms ($r=0.45$, $p<0.01$), between the general level of psychological well-being and the level of depression ($r=-0.63$, $p<0.01$).

Discussion

A comparative analysis of predictors affecting the emotional state of IDPs revealed several key factors.

Duration of IDP status was a significant factor: individuals who had been displaced for less than 1 year showed higher rates of anxiety and depression compared to those with more experience of displacement ($p<0.05$). This may indicate gradual adaptation to new living conditions and the development of effective coping strategies over time.

Housing conditions also significantly influenced the emotional state of IDPs. Individuals living in rented housing or modular settlements had higher rates of anxiety and lower rates of psychological well-being compared to those living in their own homes or with relatives ($p<0.05$). In the control group, this relationship was less pronounced, although it was also observed ($p<0.1$).

Employment was found to be one of the most important factors of psychological well-being in both groups. Employed individuals demonstrated lower rates of depression and anxiety, as well as higher rates of psychological well-being compared to the unemployed ($p<0.01$). However, in the IDP group the difference between employed and unemployed was more pronounced than in the control group (for depression: $t=4.83$ vs. $t=3.21$, for anxiety: $t=4.57$ vs. $t=3.05$).

A comparative analysis of the responses to the open-ended questions of the questionnaire revealed differences in problems and needs between the groups. In the IDP group, the most frequently mentioned issues were financial difficulties (82.9%), housing problems (71.4%), employment difficulties (54.3%), feelings of uncertainty about the future (51.4%), problems with adaptation to the new environment (48.6%), homesickness and lost way of life (45.7%), health problems (40%), feelings of loneliness and isolation (37.1%), bureaucratic obstacles (34.3%).

In the control group, the most frequently mentioned issues were financial difficulties (60.0%), health problems (31.4%), feelings of uncertainty about the future (28.6%), employment difficulties (25.7%), housing problems (22.9%), and feelings of loneliness



(17.1%). Statistical analysis showed significant differences between groups in most categories of problems ($p < 0.05$), with the exception of financial difficulties and health problems, which were common in both groups.

Thus, the results of the comparative study indicate the presence of significant differences in the emotional state of internally displaced persons compared to the control group. IDPs demonstrate higher rates of anxiety, depression, signs of traumatic stress and lower rates of psychological well-being. Specific problems and needs of IDPs related to the experience of forced displacement and the peculiarities of coping strategies were also identified. At the same time, factors that contribute to the preservation of psychological health in conditions of forced displacement were identified: social support, employment, stable housing conditions, active coping strategies.

The analysis of the research results allows us to outline the following recommendations for psychological support for IDPs, taking into account the characteristics of their emotional state.

1. Effective psychological assistance should be comprehensive, systematic and differentiated in accordance with the individual characteristics and needs of the displaced.

2. Important areas of work are reducing the level of anxiety, overcoming depressive states.

3. Developing stress resistance, forming adaptive behavioral strategies, restoring social ties and effective assistance from representatives of the host community for the integration of IDPs into a new environment are a guide for optimizing the quality of life of such persons in a warring country.

Conclusions

The conducted study of the emotional states of internally displaced persons in Ukraine allowed to draw a number of important conclusions that have both theoretical and practical significance for understanding the psychological consequences of forced displacement and developing effective IDP support programs.

Theoretical analysis of the scientific literature confirmed that forced displacement is a powerful stress factor that causes significant changes in the emotional sphere of a person. It was established that psychological reactions to displacement have a complex structure and include both negative (anxiety, fear, depression, anger) and positive (hope, relief, gratitude) emotional states. An important theoretical conclusion is the understanding of the dynamic nature of the emotional states of IDPs, which change in the process of adaptation to new living conditions.

Empirical research on the emotional state of IDPs revealed a high level of anxiety in 67% of respondents, depressive moods in 43% and symptoms of post-traumatic stress disorder in 28% of those surveyed. It was found that the intensity of negative emotional states depends on a number of factors: the duration of stay in the status of IDPs, the

availability of social support, financial situation, age, health status and individual psychological characteristics.

The study confirmed the hypothesis that the emotional state of IDPs has certain patterns of change associated with the stages of adaptation to living conditions in a new place. At the initial stage, shock, fear and acute stress reactions prevail. At the stage of primary adaptation (3-6 months after resettlement), anxiety-depressive states, deterioration of well-being, a feeling of helplessness are often observed. At the stage of secondary adaptation (6-12 months), both manifestations of chronic stress and signs of acceptance of the new situation and the search for internal resources to overcome difficulties may occur.

An important result of the study was the identification of protective mechanisms and stress coping strategies used by IDPs. The strategies of active problem solving, seeking social support, and positive reassessment of the situation were constructive. The strategies of avoidance, denial of problems, aggressive reactions, and alcohol abuse were destructive.

The results of the study confirm the need to develop and implement state programs of psychological support for IDPs, train specialists to work with this category of the population, and create a network of specialized psychological assistance centers. Particular attention should be paid to the prevention of emotional burnout among specialists working with IDPs.

The theoretical significance of the results obtained lies in deepening the understanding of the psychological mechanisms of human adaptation to crisis situations, expanding ideas about the dynamics of emotional states in the context of forced displacement, and systematizing factors that influence the psycho-emotional state of IDPs.

Thus, the conducted research not only expands scientific understanding of the emotional state of internally displaced persons, but also creates a basis for practical work with this category of population, contributing to increasing the effectiveness of psychological assistance to IDPs and improving the quality of life of such people in Ukraine.

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