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Foreword – Message from a NATO STO Representative

„The security begins with people. Whether we are service members, veterans, military social workers, researchers, or students, we all play an important role in building the resilience of our organizations and societies.

The journal's thematic focus appears highly relevant to several areas of interest within the Human Factors and Medicine community.

We encourage readers of the Romanian Journal of Military Social Work (RJMSW) to benefit from the outcomes of this collaboration: RJMSW and NATO STO.

We will continue to need dedicated, competent, and responsible leaders who are willing to help shape a safer future."

Regarding the Romanian Journal of Military Social Work, I am open to supporting it."

With respect,

Prof. Radosław BIELAWSKI

Considerable editorial experience, including serving as Editor-in-Chief of several journals

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Empowering NATO's Technological Edge

1. Interview with Radosław Bielawski | NATO Science & Technology (part I – The Role and Importance of NATO Science and Technology Organization / STO)

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- Affiliation (publication): Revista Română de Asistență Socială Militară (RRASM) / Romanian Journal of Military Social Work (RJMSW)

1. To begin, could you please introduce yourself to the readers of the Romanian Journal of Military Social Work? What have been the key milestones in your professional and academic journey?

My name is Radosław Bielawski, Lieutenant Colonel in the Polish Air Force and currently Staff Officer for Plans & Coordination and Military Assistant to the Director of the NATO Science & Technology Organization (STO) Collaboration Support Office in France.

My professional career combines military service, scientific research, academia, and defence innovation. I hold a PhD in aerospace engineering and a habilitation degree in security studies. Over the years, I have worked at leading Polish academic institutions, the Ministry of National Defence, and currently within NATO. The key milestones of my journey include obtaining my doctoral and habilitation degrees, contributing to defence innovation policy in Poland, and supporting international scientific cooperation through NATO STO.

2. What is your current role within the NATO Science & Technology Organization (STO) Collaboration Support Office, and what are your main responsibilities?

I currently serve as Staff Officer for Plans and Coordination and Military Assistant to the Director of the NATO Science & Technology Organization (STO) Collaboration Support Office (CSO) in France. My role involves supporting the Director in strategic planning, coordination, and the execution of key organizational activities.

My main responsibilities include facilitating cooperation among NATO member nations, supporting governance and decision-making processes, coordinating high-level meetings and initiatives, and contributing to the effective delivery of NATO STO programmes. I also support communication and collaboration between military, scientific, and policy communities to strengthen the Alliance's scientific and technological cooperation.

In addition, I am currently assuming the responsibilities of Executive Officer of the Human Factors and Medicine (HFM) Panel, supporting the coordination of panel activities and fostering collaboration among experts working on the human dimension of security, defence, health, and operational effectiveness within NATO.

3. For readers who may be unfamiliar with NATO STO, could you briefly explain the organization's mission and its contribution to the Alliance?

The NATO Science & Technology Organization (STO) is NATO's principal body for science and technology collaboration. Its mission is to maintain and enhance the Alliance's technological and scientific advantage by fostering international cooperation, generating knowledge, and supporting innovation in areas critical to security and defence.

The cornerstone of STO's activities is the Collaborative Programme of Work (CPoW), which encompasses all cooperative scientific research and technology activities conducted by NATO Nations and partners. Through a unique collaborative model, the programme brings together approximately 5,000 scientists, engineers, analysts, and researchers from government, industry, and academia across the Alliance.

Each year, the CPoW supports more than 460 scientific and technological activities in areas that are essential for NATO's military effectiveness, including cyber defence, space, sensors, weapons systems, command and control, modelling and simulation, operational analysis, and human-machine interaction.

4. How does international scientific collaboration contribute to strengthening the security, resilience, and technological advantage of NATO member states?

International scientific collaboration is one of the key pillars of NATO's ability to address current and future security challenges. In today's increasingly complex environment, no single nation possesses all the expertise, resources, or technological capabilities required to maintain a comprehensive strategic advantage.

More than 70 years ago, Theodore von Kármán, one of the pioneers of NATO's scientific cooperation framework, recognized that the most complex problems are best addressed through collaboration among scientists and experts from different nations and disciplines. His vision was based on the idea that bringing together diverse knowledge, perspectives, and experience leads to better solutions than working in isolation. This principle remains at the heart of NATO's scientific and technological cooperation today.

Through collaborative research, NATO nations can share knowledge, pool resources, accelerate innovation, and avoid unnecessary duplication of effort. International cooperation also strengthens interoperability, promotes the exchange of best practices, and creates networks of trust among scientists, military professionals, policymakers, and industry representatives.

Ultimately, scientific collaboration enhances not only technological superiority but also the resilience of Allied nations by enabling them to better anticipate emerging threats, adapt to change, and develop effective responses to increasingly complex security challenges.

5. Resilience has become a central concept in both military and civilian environments. In your view, what role do science, technology, and innovation play in building individual, organizational, and societal resilience?

Resilience is much more than the ability to withstand a crisis. It is the capacity to prepare for threats, adapt to changing conditions, and rapidly recover from disruptions. Science, technology, and innovation play a vital role in this process by helping us better understand risks, strengthen the resilience of individuals and organizations, and develop solutions that enhance the security of societies and critical infrastructure.

It is also worth noting that NATO STO recently published the Resilience report, which provides a comprehensive overview of NATO's approach to resilience and highlights key research and development priorities in this field. The report emphasizes that resilience is a shared responsibility involving science, government, the military, industry, and society as a whole.

6. What are the most significant security and defense challenges facing the Euro-Atlantic community today, and how can the scientific community contribute to addressing them?

The Euro-Atlantic community is facing an increasingly complex and rapidly evolving security environment. Among the most significant challenges are hybrid threats, cyberattacks, disinformation campaigns, strategic competition among major powers, the security of the space domain, and the rapid development of emerging and disruptive technologies such as artificial intelligence, quantum technologies, and autonomous systems.

In addressing these challenges, the scientific community plays a vital role by providing knowledge, analysis, and innovative solutions that support decision-making and capability development. Science not only enables the development of new technologies but also helps us better understand their implications for security, society, and military operations.

This is why close cooperation among scientists, the military, government institutions, and industry is more important than ever. Only through collaborative efforts can we effectively anticipate future challenges, strengthen resilience, and maintain the security and stability of the Euro-Atlantic area.

7. How does NATO STO integrate the human dimension of security—including mental health, well-being, and support for military personnel and their families—into its research and innovation agenda?

The human dimension of security is one of the key areas of activity within NATO STO. The Alliance recognizes that even the most advanced technologies cannot replace well-prepared, healthy, and resilient personnel. As a result, NATO STO supports numerous research activities addressing mental health, physical and cognitive performance, resilience, military medicine, human factors, and the impact of emerging technologies on people.

A particularly important role in this area is played by the Human Factors and Medicine (HFM) Panel, which currently conducts the largest number of research activities among all NATO STO panels. It is also worth noting that NATO STO is currently undergoing a structural transformation. During the review of its future organizational framework, health, human performance, and well-being were identified as enduring priorities for the Alliance. Consequently, it was decided that these topics would continue to be addressed through a dedicated new panel, Human Systems, Performance and Medicine (HPM), which will build upon and further expand the achievements of the HFM community.

This approach reflects the understanding that the resilience and effectiveness of military organizations depend not only on technology, but above all on the people who use it.

> *The second part of the interview addresses the role and importance of military social work in Romania in enhancing psychosocial and emotional well-being and resilience among military personnel, veterans, and their families, while also recognizing the valuable contribution of the Romanian Journal of Military Social Work (RRASM) through its publications of articles, studies, and research in this field.*

3. Studii și cercetări

3.1 Children of the „home war": case study on the impact of parental absence and post-mission stress on juvenile deviance in military families. Integrated intervention of military social work and clinical psychology

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Abstract

The case study focuses on integrated intervention (military social work and clinical psychology) in the case of a minor with a criminal record and a history of psychological trauma. The research investigates the correlation between the military deployment cycle, the post-mission stress of the veteran father and the adaptive failure of the minor M.N. The results highlight how the absence of the father (24 months in the theatres of operations) corroborated with the death of the mother generated an authoritarian and affective vacuum on the minor M.N., triggering attachment disorders, impulsivity and low self-esteem. The study highlights the importance of collaboration between specialists in military social work and psychology in interventions for vulnerable young people coming from families in which one or both parents are military, in order to support the development of a healthy identity and their reintegration into society. Case management is analysed through the lens of resilience specific to military families, emphasising the need for proactive monitoring of the children of military veterans in order to maintain their psychosocial well-being. At the same time, the case study has methodological limitations and does not allow statistical generalisations, but it can provide practical relevance in the professional activity of specialists in the field of military social work.
Keywords: behavioral rehabilitation, children connected with the military, family resilience, military families, military social work, post-mission stress, social recovery and reintegration, veterans.

I. Introduction and methodology



This study employs a qualitative case study methodology, considered the most appropriate for the in-depth analysis of a complex phenomenon in a real-life context „especially when the boundaries between phenomenon and context are not clearly evident" (Yin, 2014, p. 16). Through this approach, it was possible to capture the psychosocial, family and institutional dimensions of minors from families in which one or both parents are military personnel, combined with the rigidity inherent in military life, beyond what quantitative data could reveal.

Data collection was carried out through the triangulation of multiple complementary sources and techniques, including: clinical observation during hospitalisation, a social history obtained through semi-structured interview with the minor and representatives of the re-education institution, analysis of relevant documents (the legal file, medical record and school record) and the administration of standardised psychological tests: the EPQ Questionnaire (Eysenck, 1975), the Temperament, Dynamics and Personality Inventory — TDP (Florian, 1996), the Raven Progressive Matrices (Raven, 2000) and the Prague Test for distributive attention (Enea & Dafinoiu, 2017, p. 69).

The study does not permit statistical generalisations, its limitations being duly acknowledged. Nevertheless, its value lies in the depth of the analysis and its relevance for professional practice in the field of military social work.

Subject code: M.N., nicknamed „Mefisto" | **Age:** 16 years (b. 2005)
The subject's deviant trajectory began at the age of 11, coinciding with the peak of his father's activity in theatres of operations:

- June 2016: assault and other violence — altercation with a classmate;
- May 2017: insults directed at a teacher, outside school premises;
- June 2018: destruction by arson of the class register;
- July 2018: expulsion;
- July 2018 – July 2019: placement in a Juvenile Re-education Centre;
- August–September 2020: computer crime (hacking), reflecting a specialisation of his modus operandi.

II. Anamnestic analysis and military context

1. Family dynamics
The father: a career military officer who served in theatres of operations for 24 months (2016–2018) during the critical pre-adolescent period of the minor (aged 11–13). Upon returning (2019), the father manifested specific post-traumatic stress (PTSD) symptoms: hyperexcitability, excessive disciplinary rigidity, difficulties in emotional recalibration and episodes of post-mission aggression.

2. Collective trauma
The mother died in 2018, meaning that during and after the father's mission, the minor was compelled to adopt the role of „surrogate parent" — a burden that exceeded his adaptive resources.

3. Health status
Medical history: meningitis at age 7, paroxysmal episodes, fainting spells. Following the mother's death, he made a suicide attempt through medication ingestion. He exhibits frequent episodes of extreme rage directed at destroying surrounding objects.

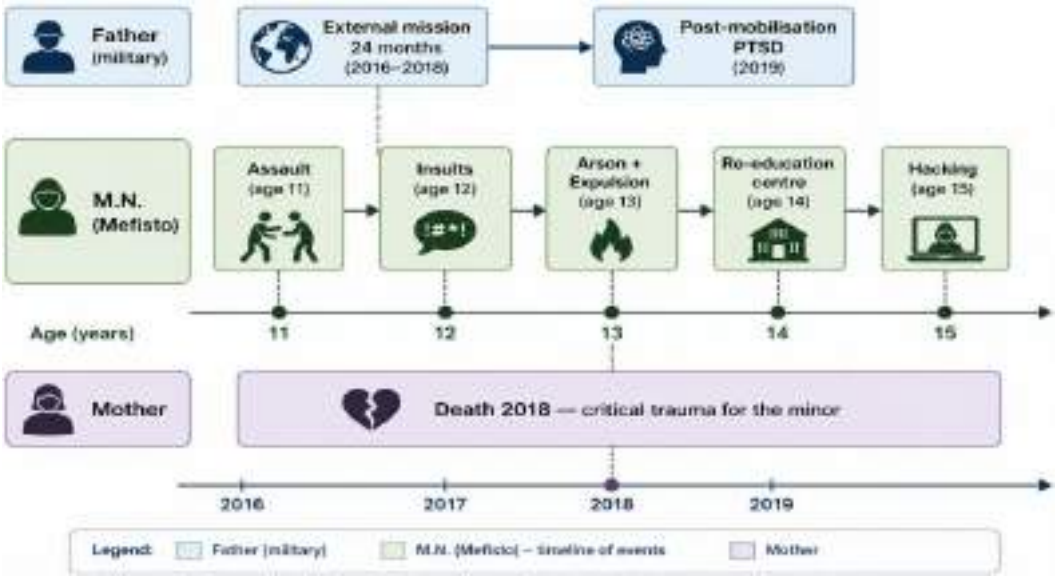
4. Academic trajectory
Early school years marked by difficulties in integration. In years 5–8 of school, he progressed very well, distinguishing himself in the exact sciences. He participated in school clubs but was perceived as marginalised by peers and teachers.

5. Modus operandi and hobbies
M.N.'s meticulous planning and self-discipline can be interpreted as an unconscious imitation of his father's military rigour, but oriented towards destruction (a mechanism of identification with the aggressor or with the absent role model).
He listens to rock music and is passionate about IT and programming. During his time in the re-education centre he read science fiction, religious and IT literature. He is fastidious, attentive to his appearance, with a strong desire to be noticed. He does not consume alcohol, drugs or tobacco.
This represents a refuge in a controllable world, as opposed to the unpredictability of military family life.

6. Behaviour during placement at the re-education centre
He is affected by the lack of family visits. He participates actively in activities and reads extensively, but prefers isolation. He expressed the desire to sit the National Assessment and attend a good secondary school.

7. Current social environment
He lives with his girlfriend of the same age and supports himself through occasional work and IT projects. The relationship is conflictual with the girlfriend's parents. He no longer maintains contact with his father or siblings. He is part of an online community of IT professionals.

Figure 1. Temporal correlation between the father's mission cycle and the escalation of M.N.'s deviant behaviour (2016–2020):



Source: Author's own elaboration based on the anamnestic data of case M.N.

Figure 1 reveals a clear correlation between the prolonged absence of the father in theatres of operations (24 months, 2016–2018) and the acceleration of the minor's deviant trajectory, with a critical point in 2018 (the mother's death, expulsion, placement in a juvenile re-education centre).

III. Psychological assessment

1. Techniques and instruments used

- Observation, anamnesis, interview (David, 2006; Mitrofan, 1994)
- EPQ Questionnaire (Eysenck, 1975)
- TDP Inventory (Florian, 1996)
- Raven Progressive Matrices (Raven, 2000)
- Prague Test — distributive attention (Enea & Dafinoiu, 2017)

2. Results and interpretations

- Marked introversion, emotional instability, depressive traits, egocentrism.
- Tendencies towards detachment, low self-control, affective and educational deficiencies.
- Superior intelligence, high capacity for concentration.
- Behaviour typical of developing emotionally unstable personality disorder, with impulsivity, depression, self-destructive reactions and a diffuse self-image.
- Self-discipline in hacking activities represents an identification with the absent military model (the father), used within a destructive framework — a defence mechanism. Computing serves as compensation, providing the control that the minor does not experience in family life.

IV. Psychological intervention

- Emotional rebalancing following the loss of the mother.
- Individual counselling with an empathetic, non-punitive approach.
- Individual psychotherapy (not group therapy).
- Behavioural therapy and social skills training.

V. The role and intervention of the military social worker

In view of the minor's psychosocial vulnerability, criminal history and disorganised background, the intervention of the military social worker is essential for the prevention of recidivism and his social reintegration.

1. Family and community support

- Identifying members of the extended family (grandparents, relatives) who can contribute to a minimum level of affective or material support.
- Facilitating access to social services designed for minors lacking family support.
- Mediating the conflictual relationships in the minor's life (Neamțu, 2003, pp. 347–362).
- Collaboration with the military unit: the social worker contacts the „Psychology and Religious/Social Assistance" structure of the father's unit in order to include the entire family in a rehabilitation programme.
- Attachment theory: the intervention focuses on repairing the father–son bond, affected by prolonged periods of separation (the military deployment cycle).

2. Educational reintegration

- Counselling the minor to re-enrol in a form of education, preferably a secondary school with a science or vocational IT profile.
- Collaboration with teaching staff and school counsellors for educational adaptation and continuous monitoring.
- Supporting participation in extracurricular activities and IT competitions.

3. Psycho-emotional and behavioural support

- Permanent collaboration with the psychologist to support the therapeutic process.
- Organising sessions for the development of social skills and emotional management (anger management and frustration management programmes).
- Finding a mentor or resource-adult, preferably from the IT field, for guidance and motivation.

4. Prevention of recidivism and legal reintegration

- Support with legal proceedings for the rehabilitation of the criminal record, on the basis of positive progress.

- Involvement in workshops raising awareness of legal and social responsibility (Țurcan & Țurcan, 2013).
- Educational supervision in the community, in collaboration with reintegration specialists.

The re-education of placed minors requires systematic interventions through socio-educational programmes (p. 28), counselling for the assumption of responsibility (pp. 121–131) and adaptive measures for those without criminal liability (pp. 135–139) (Ministerul Justiției & UNICEF, 2005).

5. Support for independent living

- Support in accessing qualification courses or internships in the IT field.
- Support in managing personal finances, achieving residential autonomy and establishing healthy routines.
- Counselling in interpersonal relationships and the consolidation of a positive identity.

VI. Social intervention plan

Domain	General objective	Specific objective	Activities / Services	Responsible	Period	Indimuan
Family	Rebuilding family bonds	Reconstruction of parental authority	Father-son mediation, counselling focused on the trauma of the father's absence	Military social worker + Military Unit Psychologist	1 month	Number of actively involved relatives / Quality of relationship as described by als emuce
Educational	School reintegration	Enrolment in a form of education adapted to the minor's capacities	Contact with school inspectorate, vocational counselling, support with required documentation	Military social worker + school counsellor	2 months	Minor enrolled in the educational system / School attendance > 90%
Psychological	Emotional and behavioural support	Reduction of emotional crises and development of self-control	Individual counselling, collaboration with psychologist, referral to individual behavioural therapy	Psychologist + military social worker	Ongoing	Reduction of aggressive manifestations (by 50%) / improvement in periodic assessment scores
Social-community	Vocational mentoring	Identifying a mentor (possibly an IT specialist from the military communications sector)	IT activities in day centres, volunteering, integration into an adolescent support group	Military social worker + partner NGO	3-6 months	Number of completed activities / Degree of satisfaction expressed by the minor
Legal – minor protection	Preventive of recidivism and support for legal reintegration	Informing the minor of the consequences of las actions and fostering accountability	Restorative justice sessions between father (representative of the law) and son	Mediary – military social worker	3 months	Absence of incidents / Active participation in sessions
Personal autonomy	Building skills for independent living	Establishing healthy routines and managing personal finances	Basic financial education, support in accessing lawful employment, acounselling on personal relationships	Military social worker	6-12 months	Residential stability / Personal budget managed / Autonomy reports



VII. Discussion and analysis

The case of M.N. demonstrates that the military support system must extend beyond the active service member, including proactive monitoring of children during external missions.

The minor's deviance was not merely an act of rebellion, but a cry for help in the context of a „temporary single-parent family" and unprocessed grief.

„Boys whose parents had been deployed reported significantly lower quality of life compared with male children with military or civilian (non-deployed) parents." (Williamson et al., 2018, p. 11)

In military families, some studies have found that minors are more likely to exhibit externalising behaviours during parental deployment against the backdrop of heightened anxiety related to the mission context and the safety of the military family member. In this regard, Reed et al. (2011, p. 1680) highlight the possibility that elevated rates of violent behaviour observed in some children from military families may be the result of disproportionate exposure to portrayals of war in the media. These media representations frequently emphasise physical confrontation and membership of a combat group, which may lead to the internalisation of violence as a valid mechanism for resolving conflict.

The main factors that can negatively influence the psychosocial well-being of children from military families include:

- **Frequent relocations and prolonged absence** of one parent in theatres of operations (Blamey et al., 2019; Chandra et al., 2010; Gershoff et al., 2007).
- **Health problems of parents returning from missions** — when a parent presented with PTSD, children (aged 4–12) manifested elevated levels of anxiety, fear and behavioural problems (Veri et al., 2021).
- **Death of a parent in combat** — the minor processes the loss with great difficulty, such that the abrupt transition from pride in having a „hero-father" to the reality of his loss can profoundly affect the minor's psychological equilibrium and behaviour. In some cases, this trauma may develop into a state of permanent alertness or a desire for revenge and destruction, used as dysfunctional mechanisms of defence or for processing repressed anger.

Children from some military families are more vulnerable to neglect or abuse when one parent is mobilised to a combat zone („Vulnerable Families", 2007). In a retrospective analysis of routinely collected child protection data, American researchers observed that the deployment of one parent to theatres of operations was associated with a 40% increase in the rate of child safety incidents in such families.

Along similar lines, Rentz et al. (2007, p. 1203), in „Effect of deployment on the occurrence of child maltreatment in military and nonmilitary families", demonstrated through analysis of data over a three-year period (2004–2007) that the risk of neglect of children in military families is three times greater during periods of mobilisation. Furthermore, the rate of neglect increases fourfold during missions, while the risk of physical abuse is approximately twice as high during the military parent's absence compared with periods when they are at home.

Children from military families also represent a particularly vulnerable population, presenting a substantially higher risk of developing social and mental health problems compared with children from civilian backgrounds. The mobilisation of one parent can accentuate these risks at all developmental stages (Opie et al., 2024, p. 1963). Cramm et al. (2019) note that the emotional vulnerability of children from military families stems from

their natural exposure to „certain elements of the military family lifestyle, characterised by a unique triad of mobility, family separation and risk" (p. 1725).

Regarding bullying in the school environment, children from military families are exposed to school aggression far more frequently than children from non-military families. According to the „Military Family Lifestyle Survey", „one in three respondents from active families (32%) with at least one child enrolled in the education system reported that the minor had been the victim of harassment on school property in the 12 months preceding the survey" (Blue Star Families, 2023, p. 7).

It is therefore imperative that these children benefit from constant monitoring of their socio-emotional well-being and from adequate support mechanisms. The results of studies conducted confirm that the risks identified in the case of children from military families are comparable to those of minors from civilian backgrounds in situations of vulnerability. An understanding of these risk factors, combined with knowledge of protective factors, will contribute to grounding prevention strategies and increasing the effectiveness of military social work interventions.

As a NATO member state, the Romanian Army has participated in numerous external missions with „over 40,000 military personnel rotated through Afghanistan, Iraq and the Balkans over more than two decades" (Jipa, 2025). The longest external mission in which Romania participated was Operation Enduring Freedom and ISAF, with a contingent of over 32,000 military personnel, of whom „27 Romanian soldiers lost their lives in combat actions and over 200 were wounded" (Cozmei, 2021). In 2025, „approximately 1,500 Romanian military personnel are participating in international missions under the auspices of NATO, the EU or the UN" (TVR INFO, 2025).

At present, there are no official data on the parental status of Romanian military personnel participating in external missions, nor data on the systematic monitoring of this category by the relevant institutions. This absence of official evidence makes it impossible to accurately quantify the total number of children facing the absence of a mobilised parent. Nevertheless, media sources report that „approximately 150 children of soldiers killed or wounded in various military missions, actions or operations received Christmas gifts on Tuesday" (Unturică, 2025).

VIII. Conclusions

The case study of minor M.N. highlights a series of cumulative risk factors — the father's 2-year absence (deployed on military missions), military rigidity, post-traumatic stress disorder, the mother's death, emotional traumas and the lack of consistent support — which contributed to a deviant trajectory. Nevertheless, high intelligence, healthy interests and a desire for achievement in areas such as IT can be transformed into protective factors through an integrated intervention plan.

The military social worker plays an essential role in this process, functioning as the link between institutions, the family and the minor, in order to achieve his identity and social reconstruction.

Recommendations:

- Maintaining close collaboration between the psychologist, the military social worker and the school counsellor.
- Monitoring behavioural progress through standardised instruments.

- Encouraging the minor's participation in extracurricular projects related to IT and the exact sciences.
- Providing a positive mentor from the IT field to support vocational development.
- Promoting family reunification under safe conditions or identifying a resource-adult to fulfil a parental function.
- Implementing screening protocols for the children of military personnel returning from theatres of operations.
- Family counselling focused on unprocessed grief and the trauma of separation.

IX. Identity protection and ethical considerations

In accordance with the principles of research ethics in social work and the provisions of legislation on the protection of personal data (GDPR — EU Regulation 679/2016) and Law no. 272/2004 on the protection and promotion of children's rights, the identity of the minor has been anonymised. All directly identifying data — name, locality, school and military unit — have been replaced with codes or omitted, while data that could permit direct identification of the individual have been modified or generalised, with the aim of preserving the clinical and social relevance of the case presented.

The presentation of this case for academic and professional purposes was carried out in compliance with the principle of confidentiality, which constitutes an essential foundation of the relationship between the military social worker and the beneficiary, in accordance with the provisions of the Code of Ethics of Social Workers in Romania (Colegiul Național al Asistenților Sociali din România, 2008). The exclusive purpose of the article is formative, and it aims to contribute to the development of professional competencies among specialists working with military families and vulnerable minors, without implying any form of stigmatisation or harm to the individuals involved.

References

American Psychiatric Association. (2013). *DSM-5: Manualul de diagnostic și statistică a tulburărilor mentale*. Editura Medicală.

Blamey, H., Phillips, A., Hess, D. C., & Fear, N. T. (2019). Impactul serviciului militar parental asupra bunăstării copiilor. *Jurnalul Sănătății Militare, Veteranilor și Familiei, 5*(S2), 29–69. https://doi.org/10.3138/jmvfh.2019-0014

Blue Star Families. (2023). *2022 Military family lifestyle survey: Comprehensive report*. https://bluestarfam.org/wp-content/uploads/2023/03/BSF_MFLS_Spring23_Executive_Summary.pdf

Chandra, A., Martin, L. T., Hawkins, S. A., & Richardson, A. (2010). The impact of parental deployment on child social and emotional functioning: Perspectives of school staff. *Journal of Adolescent Health, 46*(3), 218–223. https://doi.org/10.1016/j.jadohealth.2009.10.009

Colegiul Național al Asistenților Sociali din România. (2008). Codul deontologic al profesiei de asistent social. *Monitorul Oficial al României*, Partea I, nr. 173 din 6 martie 2008. https://cnasr.ro/codul-deontologic-al-profesiei-de-asistent-social

Cozmei, V. (2021, 27 august). Câți militari români au murit în Afganistan. *HotNews*. https://hotnews.ro/cti-militari-romni-au-murit-n-afganistan-177522

Cramm, H., McColl, M. A., Aiken, A. B., & Williams, A. (2019). The mental health of military-connected children: A scoping review. *Journal of Child and Family Studies, 28*, 1725–1735. https://doi.org/10.1007/s10826-019-01402-y

David, D. (2006). *Psihologie clinică și psihoterapie*. Polirom.

Enea, V., & Dafinoiu, I. (2017). *Evaluarea psihologică: Manualul psihologului clinician*. Polirom.

Eysenck, H. J., & Eysenck, S. B. G. (1975). *Manual of the Eysenck Personality Questionnaire*. University of London Press.

Gershoff, E. T., Aber, J. L., Raver, C. C., & Lennon, M. C. (2007). Parenting is not a luxury: Financial hardship, the home environment, and child development. *Analytical Chemistry, 79*(10), 37–52.

Jipa, F. (2025, 11 iunie). Drumul greu al Armatei României de la misiuni internaționale la apărarea teritorială. *Monitorul Apărării și Securității*. https://monitorulapararii.ro/drumul-greu-al-armatei-romaniei-1-58428

Legea nr. 272/2004 privind protecția și promovarea drepturilor copilului, republicată în *Monitorul Oficial al României*, Partea I, nr. 159 din 5 martie 2014. https://legislatie.just.ro/Public/DetaliiDocument/290837

Ministerul Justiției & UNICEF. (2005). *Practici și norme privind sistemul de justiție juvenilă din România*. București: Ministerul Justiției.

Mitrofan, N. (1994). *Psihologie judiciară*. Casa de Editură și Presă Șansa.

Neamțu, G. (Coord.). (2003). *Tratat de asistență socială*. Polirom.

Opie, J. E., Hameed, M., Vuong, A., Painter, F., Booth, A. T., Jiang, H., Dowling, R., Boh, J., McLean, N., & McIntosh, J. E. (2024). Children's social, emotional, and behavioral outcomes in military families: A rapid review. *Journal of Child and Family Studies, 33*, 1949–1967. https://doi.org/10.1007/s10826-024-02856-5

Raven, J. (2000). *Manual Matricile Progresive Raven*. Editura Sigma.

Reed, S. C., Bell, J. F., & Edwards, T. C. (2011). Adolescent well-being in Washington State military families. *American Journal of Public Health, 101*(9), 1676–1682. https://doi.org/10.2105/AJPH.2011.300165

Regulamentul (UE) 2016/679 (GDPR). (2016). *Jurnalul Oficial al Uniunii Europene*, L 119. https://eur-lex.europa.eu/eli/reg/2016/679/oj

Rentz, E. D., Marshall, S. W., Loomis, D., Casteel, C., Martin, S. L., & Gibbs, D. A. (2007). Effect of deployment on the occurrence of child maltreatment in military and nonmilitary families. *American Journal of Epidemiology, 165*(10), 1199–1206. https://doi.org/10.1093/aje/kwm008

TVR INFO. (2025, 24 iunie). 1.500 de militari români sunt în misiuni externe, sub egida NATO, UE sau ONU. https://tvrinfo.ro/1-500-de-militari-romani-sunt-in-misiuni-externe

Țurcan, S., & Țurcan, C. (2013). Servicii sociale și psihologice acordate deținuților în penitenciar. *Psihologie: Revistă științifico-practică*, (2), 52–58.

Veri, S., Muthoni, C., Boyd, A., & Spilsbury, J. C. (2021). A scoping review of the effects of military deployment on reserve component children. *Child & Youth Care Forum, 50*, 743–777. https://doi.org/10.1007/s10566-020-09590-1

Vulnerable families suffer when soldiers go to war. (2007). *BMJ: British Medical Journal, 335*(7614), 279. https://doi.org/10.1136/bmj.335.7614.279

Williamson, V., Stevelink, S. A. M., Da Silva, E., & Fear, N. T. (2018). A systematic review of wellbeing in children: A comparison of military and civilian families. *Child and Adolescent Psychiatry and Mental Health, 12*(46). https://doi.org/10.1186/s13034-018-0252-1

Yin, R. K. (2014). *Case study research: Design and methods* (5th ed.). SAGE Publications.

3.2 Material and Financial Difficulties Faced by Mothers with Children Whose Husbands Are on Long-Term Deployments. Implications for Military Social Work

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Abstract (EN)

The participation of military personnel in long-term deployments represents a strategic necessity for fulfilling national and international obligations. Beyond its operational significance, such deployments generate substantial effects on soldiers' families, particularly on mothers who remain solely responsible for managing both household and financial duties. The aim of this article is to analyse the main material and financial difficulties encountered by these families and to highlight the factors contributing to their social vulnerability, as well as the role of military social work in preventing and mitigating negative outcomes. The study emphasizes challenges related to household budget management, rising living costs, childcare responsibilities, access to services, and the risk of social isolation. The research employs a documentary analysis method and a literature review focusing on military family studies, with particular attention to family resilience and the role of military social assistance. The findings indicate that the prolonged absence of the military member may lead to an increased concentration of familial and financial responsibilities on the mother, thereby amplifying the risk of economic vulnerability and, consequently, affecting the psychosocial well-being of the entire family system. These conclusions must be interpreted in light of the study's limitations, particularly the lack of empirical data and the underdeveloped institutional framework for military social work in Romania. In conclusion, the development of specialized military social assistance services represents a sine qua non condition for effectively supporting military families, significantly contributing to strengthening family resilience and enhancing their adaptive capacity in the context of prolonged separations caused by long-term deployments.
Keywords: family resilience, financial difficulties, military family, military social work, mothers with children, overseas deployments, social vulnerability.

Introduction



The family is one of the most important sources of emotional, social, and material support for military personnel. The specialist literature highlights that the family represents an essential factor of individual resilience, contributing to the maintenance of psychological balance and directly influencing the soldier's resilience and ability to cope with stress-related situations associated with military service (Walsh, 2016). In the case of military personnel, this role becomes even more important, given the characteristics of the profession, such as mobility, exposure to risk, and repeated periods of family separation, which can generate significant changes in family organization and the distribution of responsibilities among family members (Bowen & Martin, 2011).

When a soldier participates in a long-term deployment, the impact is felt not only by the person in the operational theatre, but by the entire family. Research conducted on military families has shown that prolonged separations generate significant changes in the distribution of family responsibilities and in the functioning of the family system, being associated with substantial emotional and social difficulties (Pincus et al., 2001). Spouses of deployed soldiers are often compelled to take on additional responsibilities regarding the upbringing and care of children, household management, and the management of financial resources (Park, 2011).

For mothers caring for one or more children, this period is often marked by complex challenges. They become the primary source of stability for their children and are responsible for managing all aspects of daily life: administering the family budget, paying current expenses, maintaining the household, supervising and educating the children, liaising with schools and medical institutions, as well as managing unforeseen situations that may arise during the husband's absence. In many cases, these responsibilities are carried out alongside professional activities, leading to a considerable increase in stress levels and physical and emotional demands.

Although a soldier's participation in overseas missions is generally accompanied by certain financial benefits and specific allowances, these do not entirely eliminate the difficulties faced by the family. In the current economic context, characterized by rising living costs, increased prices for utilities, food and services, as well as intensifying inflationary pressures, the purchasing power of many households has been significantly affected. Orthner & Rose (2009) highlight that mothers left alone to manage the family may encounter difficulties in maintaining a stable financial balance, especially when unexpected expenses arise related to children's health, education, housing maintenance, or other urgent needs.

The purpose of this article is to analyse the material and financial difficulties faced by mothers with children whose husbands participate in long-term military deployments, and to highlight their implications for the development of military social work services.

To achieve this purpose, the following research questions were formulated:

1. What are the main material and financial difficulties faced by mothers with children whose husbands are on long-term deployments?
2. What effects do these difficulties have on family dynamics and on the well-being of children?
3. What role can military social work play in preventing and mitigating the negative effects associated with these difficulties?

Methodology

The article employs a documentary analysis method and a narrative literature review. In this regard, relevant scientific works from the fields of military psychology, family sociology, family resilience, and military social work published in specialist journals and reference volumes were analysed.

In the selection of sources, priority was given to their relevance to the topic of military families and the impact of the prolonged absence of the deployed spouse on family members remaining at home. Studies on military family adaptation to separation, psychosocial effects, economic vulnerability, and the role of social interventions in supporting military families were included.

The method used aimed to identify the main challenges faced by mothers with children and to formulate recommendations for the development of military social work services.

From the perspective of military social work, knowing and understanding these realities represents an essential condition for developing effective support measures. Specialists in the field have a role in identifying risk factors, assessing the social and economic needs of families, and facilitating their access to available resources. Early intervention can prevent the worsening of difficulties and contribute to maintaining family stability throughout the entire deployment period.

In this context, the analysis of the material and financial difficulties faced by mothers with children whose husbands are on long-term deployments becomes a topic of major interest for military social work. Understanding the challenges they face enables the development of policies and programmes adapted to the real needs of military families, contributing both to improving their quality of life and to supporting the professional efficiency of military personnel in service.

Characteristics of Military Families During Deployments

Military families represent a social category with distinct characteristics, generated by the specific nature of the military profession and the demands associated with it. Unlike most civilian families, military families must periodically adapt to situations involving the temporary separation of family members, frequent relocations, changes in social environment, and the assumption of additional responsibilities. These experiences influence the way of organising family life, the relationships between family members, and the capacity to cope with everyday challenges (Segal & Segal, 2004).

Military activity involves participation in training exercises, tactical applications, specialisation courses, and national or international missions, which may involve variable periods of absence from home. In the case of long-term deployments, the separation between spouses may last several months or even over a year, depending on the nature of the operation and institutional requirements. This absence produces significant changes in the structure and functioning of the family, forcing the members who remain at home to reorganise their roles and responsibilities (Pincus et al., 2001).

For mothers caring for one or more children, this period is often marked by complex challenges. They become the primary source of stability for their children and are responsible for managing all aspects of daily life: managing the family budget, paying current expenses, maintaining the household, supervising and educating the children, liaising with schools and medical institutions, as well as managing unforeseen situations that may arise during the

husband's absence. The specialist literature shows that spouses of deployed soldiers experience increased levels of stress and psychosocial demands, generated by the accumulation of family and professional responsibilities (Lester & Flake, 2013).

In practice, this situation involves assuming a considerable workload. The mother must organise the children's daily schedule, monitor school activities, attend meetings with teachers, manage any health problems that may arise, and provide emotional support to children affected by the father's absence. The accumulation of these responsibilities can lead to physical and psychological overload, especially in families with multiple children or young children (Park, 2011).

An important aspect is the fact that separation affects not only the organisation of daily activities, but also the relational balance of the family. Communication between spouses often takes place under limited conditions, influenced by the deployment schedule, time zone differences, or operational restrictions. Consequently, many decisions regarding family life must be made quickly and independently by the partner who has remained at home. This situation can generate feelings of insecurity, excessive responsibility, and isolation.

Military families are also exposed to additional stress factors compared to other family categories. In addition to the usual concerns related to children's education and the management of financial resources, they face anxiety associated with the safety of the soldier on deployment. Uncertainty about the conditions in which the soldier is carrying out their duties and the lack of permanent contact can amplify the mother's stress levels and influence the emotional climate of the family.

In many situations, the existence of a support network made up of relatives, friends, neighbours, or other military families represents an essential protective factor. The support provided by these individuals can help reduce the pressure on the mother and more effectively manage everyday problems. However, not all families benefit from such resources. Some live far from their extended family, in garrisons located far from their home town, which limits access to informal assistance.

In the absence of a solid family or community support system, difficulties can intensify. Seemingly simple activities, such as transporting children to school, attending medical consultations, resolving administrative matters, or carrying out repairs to the home, can become additional sources of stress and expenditure. As a result, the time and energy required to manage these situations increases significantly, affecting the quality of life of the entire family.

Regarding material and financial aspects, it is important to emphasise that the difficulties encountered by these families are not generated solely by income levels. Even in situations where the family has relatively stable financial resources, additional costs arise due to the absence of one partner. For example, the mother may need to use paid services for childcare, transport, home maintenance, or other needs that were previously managed within the family.

At the same time, managing financial resources as a single person can become more difficult when unexpected expenses arise. Medical issues, urgent repairs, educational costs, or rising prices for goods and services can affect the household's financial balance. Without rigorous financial planning or sufficient savings, the family may become vulnerable to temporary economic hardship.

Another characteristic of military families relates to the need to maintain a stable family climate during a prolonged separation. The mother often acts as a mediator between the children who have remained at home and the father on deployment, facilitating communication

and contributing to maintaining a sense of family belonging. This emotional effort adds to the daily responsibilities and can influence the level of accumulated stress and fatigue during the deployment period.

From the perspective of military social work, these characteristics highlight the need for specialised interventions adapted to the real needs of families. Regular assessment of the social and economic situation, identification of risk factors, and the development of effective support mechanisms can contribute to reducing vulnerabilities and to strengthening the adaptive capacity of military families on long-term deployments. Supporting these families thus represents not only a social protection measure, but also an investment in maintaining the balance and resilience of a professional category essential to national security.

Main Material Difficulties Faced by Mothers with Children

Increased costs associated with childcare

One of the most frequent challenges is the increase in expenses for the care and education of children. In the father's absence, the mother may need to use additional supervision services, after-school programmes, tutoring, or help from specialist individuals.

Families with young children are particularly vulnerable, as they require additional resources for ongoing care and supervision, such as the costs of nurseries, kindergartens, or babysitting services.

In certain situations, costs associated with care services can significantly affect the family budget.

Home management and household problems

Mothers left on their own must manage all aspects of home maintenance and household issues. Technical faults, unforeseen repairs, maintenance work, or resolving technical problems generate additional costs and require time, administrative skills, and financial resources. In many situations, tasks that were previously shared between spouses become the exclusive responsibility of the mother, which can lead to overload and unplanned expenditure.

Transport and mobility costs

Transporting children to school, extracurricular activities, or medical appointments entails additional costs for fuel, public transport, or private services. These costs become more pronounced for families living at a distance from schools, medical facilities, or military units.

Limited access to support networks

The absence of a solid family support network can generate additional costs for purchasing services that would normally be provided by relatives or a partner. Activities such as childcare, transportation, or emergency assistance therefore involve extra expenses.

Financial Difficulties and Economic Risks

Individual management of the family budget

The husband's prolonged absence transfers the entire financial responsibility to a single family member. The mother must manage income, bill payments, loan repayments, educational expenses, and other current financial obligations.

In some situations, a lack of experience in managing certain financial aspects can lead to difficult decisions or the accumulation of debt. The pressure of making important decisions alone can generate anxiety and financial stress.
Orthner and Rose (2009) highlight that individual management of family and economic responsibilities can increase financial vulnerability and the stress levels of military families.

Impact of inflation and rising cost of living
Rising prices for food, energy, services, and children's products directly affect family budgets. Even when income is stable, purchasing power can decline significantly.
Families with multiple children are particularly vulnerable to economic fluctuations, as a large portion of income is devoted to meeting basic needs.

Long-term financial obligations
Bank instalments, mortgage loans, and other financial commitments represent additional sources of stress. When unexpected expenses arise, the family may face difficulties in maintaining the household's financial balance and in managing existing obligations.

For some households, the absence of a reserve fund can turn an ordinary event — a medical issue, an urgent repair, or the temporary loss of supplementary income — into a situation of economic vulnerability.

Limitations on mothers' professional opportunities
The need to take permanent care of children can limit the mother's ability to work full-time, participate in professional development programmes, accept overtime, or take up positions requiring a high degree of availability. This situation can negatively affect family income and long-term professional development prospects.

Psychosocial Consequences Associated with Financial Difficulties
Material and financial problems do not only have economic effects; they can also influence the psychological health of mothers and children.

Prolonged financial stress can lead to the onset of anxiety, feelings of insecurity, and emotional exhaustion. Mothers in this situation may feel the pressure of multiple responsibilities and the lack of consistent support in managing everyday problems.

Children may manifest various emotional reactions, ranging from sadness and worry to difficulties adapting at school or behavioural problems. In such situations, material difficulties can amplify the emotional impact of family separation.

There is also a risk of social isolation. Some mothers reduce their participation in community activities due to financial constraints or lack of time, which can diminish access to informal support resources.

The Role of Military Social Work
Military social work plays a fundamental role in identifying and supporting families in situations of vulnerability. Specialist interventions must be proactive and adapted to the particularities of each family. Among the main directions of intervention are:

- regular assessment of the social and economic situation of the families of soldiers on deployment;
- informing families about social rights and available facilities;

- counselling for family budget management;
- referral to community and institutional support services;
- facilitating access to psychological services for mothers and children;
- organising support groups for military spouses;
- developing community support networks;
- collaboration with local authorities, non-governmental organisations, and educational institutions.

Early intervention can help prevent the worsening of social and economic problems and contribute to strengthening family resilience.

Recommendations for Improving Support for Military Families

The implementation of the following measures can contribute to increasing family resilience and reducing the risk of social exclusion:

- Development of financial education programmes dedicated to military families;
- Creation of emergency support funds;
- Expansion of social and psychological counselling services;
- Facilitating access to childcare services;
- Organisation of local support networks among military families;
- Regular monitoring of families' social needs during deployments;
- Strengthening collaboration between military structures and public social assistance services.

Study Limitations

The article presented has certain limitations that must be taken into account when interpreting the conclusions formulated. Although the research is based on the analysis of specialist literature, due to the lack of studies or statistics on military families in Romania, as well as the fact that the field of military social work is not yet formally regulated at national level, it was not possible to include an empirical component in this regard.

Another limitation of the study stems from the fact that the majority of available literature on the impact of military deployments on families originates from North America, particularly from the United States. As such, differences between military systems, social policies, and family support services may limit the generalisation of certain conclusions to the Romanian context.

Finally, the article focuses primarily on the material and financial difficulties faced by mothers with children whose husbands participate in long-term deployments, without analysing in detail the experiences of other categories of military family members. Future research could include empirical studies conducted in Romania, directly investigating the social, economic, and psychological needs of military families, and contributing to the development of specialised military social work services.

Conclusions

Mothers with children whose husbands are on long-term military deployments represent a category exposed to complex material, financial, and psychosocial challenges. The increase in family responsibilities, individual management of economic resources, and the pressure generated by a partner's absence can significantly affect family well-being and children's development.

The analysis of specialist literature highlights that economic difficulties should not be viewed solely from the perspective of available financial resources, but from the perspective of their impact on psychological health, family relationships, and the family's capacity for adaptation. In this context, military social work has the responsibility to identify situations of vulnerability early and to develop interventions adapted to the real needs of families.

Children are also influenced by changes that occur in family life. They feel the absence of the parent on deployment and observe the difficulties the mother faces in managing daily responsibilities. In certain situations, financial constraints can affect participation in educational, recreational, or social activities, with an impact on their development and integration.

Institutional support, combined with community and family resources, can contribute to maintaining the social and emotional balance of mothers and children during deployments. „The military social worker plays an essential role in this process, functioning as a link between institutions, family, and the child, with a view to their identity and social reconstruction" (Oprina, 2026, p.6).

Investment in the well-being of military families represents not only a social protection measure, but also an important contribution to maintaining family resilience, the morale of military personnel, and the operational capacity of the military institution.

References

Lester, P., & Flake, E. (2013). How wartime military service affects children and families. *The Future of Children, 23*(2), 121–141. https://doi.org/10.1353/foc.2013.0015

Martin, J. A., Rosen, L. N., & Sparacino, L. R. (2000). *The military family: A practice guide for human service providers*. Greenwood Publishing Group.

Oprina, C. (2026). The children of the „war" at home: A case study on the impact of parental absence and post-deployment stress on juvenile deviance in military families. *Romanian Journal of Military Social Work, 1*(2). https://doi.org/10.5281/zenodo.19684597

Orthner, D. K., & Rose, R. (2009). Work separation demands and military family adaptation. *Family Relations, 58*(4), 392–403. https://doi.org/10.1111/j.1741-3729.2009.00561.x

Paley, B., Lester, P., & Mogil, C. (2013). Family systems and military families. *Clinical Child and Family Psychology Review, 16*(3), 245–265. https://doi.org/10.1007/s10567-013-0138-y

Park, N. (2011). Military children and families: Strengths and challenges during peace and war. *American Psychologist, 66*(1), 65–72. https://doi.org/10.1037/a0021249

Pincus, S. H., House, R., Christenson, J., & Adler, L. E. (2001). The emotional cycle of deployment: A military family perspective. *U.S. Army Medical Department Journal*, 615, 15–23.

Segal, D. R., & Segal, M. W. (2004). *America's military population*. Population Reference Bureau.

Walsh, F. (2016). *Strengthening family resilience* (3rd ed.). Guilford Press.

3.3 The Impact of International Mission Participation on Family Life. A Case Study of an Active Duty Military Personnel in the Romanian Army

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Abstract

The participation of the military in international missions and operations under the aegis of NATO, the European Union (EU), the United Nations (UN), the Organization for Security and Cooperation in Europe (OSCE) is an essential component of the commitments assumed by Romania within the collective security structures. Although these missions contribute to the professional development of military personnel and to the fulfillment of the state's strategic objectives, they can generate significant challenges for the military's family life. The present research uses the case study method and is based on a semi-structured interview conducted with an active military officer with extensive experience in foreign theaters of operations. The results highlight the fact that separation from the family, the reorganization of family roles, the emotional difficulties of the children and the process of reintegration of the veteran after returning from the mission are the main challenges that influence the family dynamics. At the same time, the study identifies the existence of adaptation and resilience mechanisms that actively contribute to maintaining the family's functionality. From the perspective of military social work, the results obtained underline the need to develop specialized support services for military personnel and their families before and after participating in international missions.
Keywords: coping mechanisms, family resilience, international missions, military families, military social work, reintegration, Romanian Army.

Introduction

The participation of Romanian military personnel in international missions represents an important component of Romania's commitments within collective security organizations, such as NATO, the EU, the UN, and the OSCE. These missions involve the deployment of military personnel to foreign theaters of operations under conditions characterized by risk, prolonged separation from family, and intense psychological demands.

Specialized literature highlights that temporary separation from the family, the uncertainty associated with the operational environment, as well as post-mission reintegration difficulties can generate significant effects on the emotional and functional balance of the family (Pincus et al., 2001; Saltzman et al., 2011). These effects can include communication difficulties, the reorganization of roles within the family, as well as challenges in the military personnel's reintegration process upon returning from the mission.

Pincus et al. (2011) use the expression „emotional cycle of deployment", which includes the following stages: anticipation of departure, deployment on the mission, emotional support during the mission, and post-mission reintegration, with each stage involving specific challenges for both the military personnel and their family members. Thus, the stage prior to departure involves anxiety and uncertainty; during the mission, difficulties associated with separation and limited direct contact; and post-mission reintegration requires renegotiating roles and responsibilities developed during the period of absence.

From the perspective of family systems theory developed by Bowen (1978), the family functions as an interdependent system, in which changes occurring at the level of one member can influence the entire family unit. Transposing family systems theory into the military context, the departure of a member on an international mission can cause changes in family roles, parental responsibilities, and ways of communication among family members.

According to Walsh (2016), resilience plays an important role in increasing family cohesion, whereby resilient families can develop effective mechanisms for communication, mutual support, and flexibility in assuming the family roles that belong to each family member. „Resilience does not imply the absence of suffering, but the capacity to find ways to adapt in the face of difficult experiences. In this process, social support and specialized interventions can play an important role." (Honcu et al., 2026a)

In their work based on the ABCX model, McCubbin and Patterson (1983) highlight the existence of a relationship between a stress factor (combat missions) and family outcomes. In this model, A (the stressor event) interacts with B (the family's resources for coping with the crisis), which interacts with C (the family's definition of the event), producing X (the crisis). It was designed to study the variables that differentiate families capable of maintaining their balance and functionality from those that develop significant adaptation difficulties due to events they perceive as highly stressful.

Although numerous international studies and research highlight the impact of military missions on the military personnel's family, Romanian literature regarding the experiences of military families is still relatively limited. This reality underscores the need to deepen research in the field and to develop adequate support mechanisms for military personnel and their families. In this context, military social work plays an essential role by providing counseling, intervention, and psychosocial support services, facilitating the process of adaptation to the changes generated by participation in international missions.

In North Atlantic Alliance member states such as the United States of America, the United Kingdom, Germany, and France, military social work represents a deeply institutionalized component of the support system intended for active duty military personnel, veterans, and their families. Interventions in this component target family counseling for military personnel, support for children, crisis intervention, case management, and facilitating the post-mission reintegration of military personnel.

Although military social work is not yet legally regulated in Romania, „the analysis of the national legislative framework, compared to European principles, shows that important

steps have been taken in the recognition and protection of veterans. However, the reality of practical application highlights the existence of difficulties related to the implementation of measures and effective access to the provided rights and services." (Honcu et al., 2026b). The state must modernize its support systems to properly address the emerging needs of veterans (Ropan et al., 2026). The purpose of this case study is to analyze the impact of participating in international missions on the family life of an active military officer from the Romanian Army, focusing on family relationship dynamics and the readaptation process after returning from the mission.

Methodology

To carry out this study, a qualitative approach was used in the form of a case study. This method allows for a detailed analysis of a concrete situation, offering the possibility of an in-depth understanding of how participation in international missions directly influences family life.

The analyzed case was selected intentionally (criterion-based sampling), considering the relevance of the participant's professional experience to the research topic. The unit of analysis is represented by an active military officer and his family, directly involved in the experience of participating in international missions.

The data were obtained through a semi-structured interview conducted with the participant, supplemented, where necessary, with observations and informal discussions. The interview aimed to capture personal experiences related to international missions, as well as how they influenced the dynamics and functioning of the family.

The interview guide was built around main themes, such as the experience of participating in international missions, the impact of separation on the family, the coping strategies used by family members, and the reintegration process after returning from the mission. Among the questions addressed to the participant were: „How did you perceive the experience of participating in international missions?", „What were the main difficulties encountered by the family during your absence?", and „How did the process of readapting to family life go after returning from the mission?".

The collected information was analyzed through a thematic approach, tracking recurrent aspects such as separation from the family, the reintegration process after returning from the mission, and changes occurring in family relationships. Throughout the research, specific ethical principles of social research were respected, including protecting the participant's identity and using the data exclusively for academic purposes, with his informed consent.

(The full text of the interview used in this research is provided in Appendix 1).

Case Presentation

The case analyzed in this study is that of an active military officer in the Romanian Army, aged approximately 35-45 years, married, with children, who has repeatedly participated in international missions in theaters of operations. The participant has over 15 years of military experience, a period during which he was involved in several missions carried out outside the national territory. These experiences involved periods of separation from the family, followed by processes of reintegration into domestic and professional life.

From the participant's account, it emerges that participation in international missions was perceived as a natural component of a military career, but the impact on family life varied depending on the duration of the missions and the family context of each period. The family

consists of a husband, wife, and one or more children, and over the years, it has faced successive adaptations related to the repeated absence of the parent on a mission, but also to the reintegration process upon his return.

The Experience of Participating in International Missions

From the participant's account, it emerges that participation in international missions represented one of the most important professional experiences in his military career. He participated in several missions carried out outside the national territory, in different operational contexts, which involved long periods of separation from the family and adaptation to specific working conditions in theaters of operations.

The military officer described participation in missions as being „a normal part of the military profession", but stressed that each departure was accompanied by both professional and personal challenges. According to him, prior training before deployment contributed to developing the capacity to adapt, but the field experience required a high level of responsibility and permanent vigilance.

During the interview, the participant mentioned that one of the most difficult aspects was the distance from the family. Although modern means of communication allowed maintaining contact with those at home, they could not compensate for the physical absence from family life. He confirmed that important moments in the children's lives or problems arising at home were felt with a sense of helplessness, as opportunities for direct involvement were limited. In this regard, he stated that „The hardest part was not being on the mission, but the fact that I couldn't be next to my family when they needed me."

At the same time, the participant highlighted that the experiences lived during missions contributed to the development of valuable personal and professional skills, such as self-control, decision-making capacity in difficult situations, and adaptability. He believes that participating in international missions offered him important opportunities for professional development, but it also carried significant personal costs, particularly regarding family relationships. The analysis of the answers indicates that the experience of participating in international missions was simultaneously perceived as a source of professional satisfaction and as a stress-generating factor, mainly determined by operational responsibilities and temporary separation from the family.

Impact on the Family

The literature indicates that stressful life events, such as prolonged separation, accidents, or situations with traumatic potential, directly influence family balance and the way family members fulfill their roles within the family. In the case of high-risk professions, such as the military profession, these effects may be more intense, as uncertainty and physical distance are constant factors.

The participant's account reveals that periods of participation in international missions affected the entire family, not only the service member. Thus, periods of separation generated emotional and practical changes for all family members, who adopted and developed coping mechanisms to maintain family balance.

Regarding the children, the service member emphasized that the impact varied according to age, but that each departure was experienced emotionally. He stated that *"The children became accustomed to the departures over time, but every separation was difficult."*

Reconfiguration of Family Roles

One of the most significant consequences of participation in international missions identified through the interview analysis was the temporary reconfiguration of family roles. The service member's absence led to a redistribution of responsibilities within the family, including household management, child-rearing, and the handling of everyday issues, which had previously been shared between both partners

The spouses of service members deployed on missions are often required to assume additional responsibilities related to child care and upbringing, household management, and financial resource management (Park, 2011). Doca (2026) emphasize that "For mothers caring for one or more children, this period is often marked by complex challenges. They become the primary source of stability for the children and are responsible for managing all aspects of daily life: administering the family budget, paying current expenses, maintaining the household, supervising and educating the children, interacting with educational and medical institutions, and managing unforeseen situations that may arise during the spouse's absence."

The children, in turn, developed their own ways of coping with the parent's absence. Nevertheless, there is a need for these children to benefit from continuous monitoring of their socio-emotional well-being and from appropriate support mechanisms. Oprina (2026a) confirms that "the risks identified among children from military families are comparable to those faced by minors in civilian environments who are in vulnerable situations. Understanding these risk factors, together with knowledge of protective factors, will contribute to the development of prevention strategies and to increasing the effectiveness of military social work interventions."

All these changes demonstrate the family's ability to reorganize itself in order to cope with situations generated by the service member's absence, in which the reconfiguration of family roles is an inevitable process and constitutes one of the main mechanisms supporting family functioning under conditions of temporary separation.

Post-Mission Reintegration

A critical aspect highlighted during the interview is that the absence does not end upon returning home but continues through the process of readjustment to family life. The service member described this stage as one that requires time, stating that "After returning, I needed a few weeks to get back into the family routine," implying a period of mutual adjustment between himself and the family members.

The post-mission reintegration of veterans, involving the transition from military to civilian life, may require a rebalancing of family dynamics, a process that often generates tensions. The veteran "will either attempt to reclaim their previous role or will feel powerless in decision-making, which may make post-mission reintegration anything but easy in such cases" (Oprina, 2026b).

Overall, the findings indicate that the impact on the family is not limited to a single point in time but manifests across several stages: before departure, during the mission, and after returning home. Families develop adaptation mechanisms; however, each cycle of separation and reunion requires a new adjustment of relationships and family roles.

Results

The process of separation between the service member and the family represents an inherent component of the military career; however, this process generates significant effects on the

entire family system. Separation from the family is perceived by both the service member and other family members as one of the most difficult experiences associated with military missions.

The study results highlight that the family adapts over time: the spouse learns how to manage household activities independently, assume a substantial portion of parental responsibilities, and cope with everyday challenges, while the children develop their own coping strategies in response to the temporary absence.

Another important finding is the complexity of the reintegration process into family life after returning from a mission. This does not occur automatically or instantaneously but involves a transition period of readjustment during which the family routine is gradually recalibrated.

The findings demonstrate that the impact of missions is not limited to the deployment period itself but encompasses the entire cycle: departure, separation, the mission itself, and the return home. Each stage presents different challenges for the family.

At the same time, the study highlights adaptation and resilience mechanisms within the family that help maintain balance and long-term family functioning. These mechanisms are built over time and become stronger through repeated experiences of separation and reunification, representing an important resource for managing the difficulties associated with the military profession.

From the perspective of military social work, the findings reveal the crucial importance of providing support to both service members and their families through the implementation and development of specialized support services for military personnel, veterans, and their families. Counseling, psychosocial support, and preparation for periods of separation and reintegration can contribute to reducing difficulties and strengthening the family's capacity for adaptation.

Overall, the findings confirm the conclusions of the existing literature regarding the impact of military missions on service members' families. Separation, the reconfiguration of family roles, and reintegration following return from deployment constitute complex processes that influence family dynamics. At the same time, the family's capacity to develop adaptive mechanisms and resilience demonstrates the existence of significant resources that can be strengthened through specific military social work interventions, as a field capable of providing specialized support to military personnel, veterans, and their families in managing the challenges associated with participation in international missions.

Discussion

The results obtained from this case study indicate that participation in international missions profoundly influences the family life of the service member, both during deployment and after returning to the family environment. The interview revealed that the experience of participating in international missions is perceived as a natural component of a military career, yet one that has an almost constant impact on family balance and functioning.

A first important aspect identified in the research concerns family separation. The participant described this period as one of the most difficult, particularly from an emotional perspective, even though mission activities require a high level of discipline, concentration, and responsibility. These findings are consistent with the literature, which highlights that life events involving prolonged separation and uncertainty have direct effects on family functioning. From the perspective of Family Systems Theory (Bowen, 1978), any change

affecting one family member is reflected throughout the entire family system, which explains the reorganization of family roles during deployments.

In the case analyzed, this is evident in the way the spouse assumes daily responsibilities while the children adapt to the temporary absence of the parent. It was also noted that, although communication is maintained through remote means, it cannot replace physical presence, and certain family moments are experienced with considerable difficulty.

Another important aspect concerns the impact on children. The interview indicates that children gradually adapt to repeated departures; however, each separation continues to be emotionally challenging. This finding is also supported by the literature, which shows that children's reactions to parental separation are influenced by age, family context, and the duration of the absence (Saltzman et al., 2011).

A recurring element in studies of military families is that returning from a mission does not mean an immediate resumption of family routines. In the present case as well, the participant emphasized the need for a period of readjustment during which family roles and relationships are gradually reconfigured. This aspect is also highlighted by Pincus et al. (2001), who describe reintegration as a gradual process of family readjustment following the completion of a mission.

From a broader perspective, the literature shows that any potentially stressful life event—whether involving separation, illness, or other vulnerable situations—directly influences the functioning of the family as a whole. In the military profession, these effects are even more pronounced due to the risky nature of missions and the inability to participate directly in the family's daily life.

On the other hand, the findings also indicate the existence of adaptation mechanisms. Over time, families develop strategies to manage periods of separation and reintegration, demonstrating a form of resilience. This adaptive capacity is also identified in the literature as an important element in the functioning of families repeatedly exposed to stress.

In this context, professional socialization within the military also plays an important role. It contributes to preparing service members for operational demands by developing competencies such as discipline, self-control, and adaptability. However, family members do not undergo the same socialization process, which explains the difference in experiences between the military and family environments during deployments.

According to Bucur (2026), in the course material "The Socialization Process in Military Organizations" (course: Professional Socialization and Communication in the Military Organization, West University of Timișoara), military organizations are characterized by rigorous professional socialization programs aimed at integrating individuals into the hierarchical structure and developing behaviors specific to the military environment. These programs contribute to reducing role ambiguity and increasing cohesion and adaptability in situations of operational stress.

Ethical Considerations

Throughout the research process, ethical considerations were carefully observed. The participant was informed about the purpose of the study, the manner in which the data would be used, and the voluntary nature of participation. In order to protect the identity of the participant and his family, all information that could have led to their identification was removed or anonymized. The collected data were used exclusively for academic and scientific purposes, based on the principles of confidentiality and personal data protection.

Study Limitations

The present study has several methodological limitations that should be considered when interpreting the findings. First, the research is based on a single case study, which limits the possibility of generalizing the conclusions to the broader military population. Second, the data presented are derived exclusively from the participant's narrative, without including the perspectives of the spouse or children, which could have provided a more comprehensive and triangulated understanding of the phenomenon.

Nevertheless, the study offers a relevant qualitative perspective, also confirmed by the existing literature, demonstrating how participation in international missions may influence family dynamics and may serve as a starting point for future research conducted on larger samples. Furthermore, studies examining the role of military social work interventions before, during, and after participation in international missions would be particularly valuable.

Conclusions

The aim of the present study was to analyze and understand how participation in international missions influences the family life of an active service member in the Romanian Armed Forces, with particular emphasis on experiences associated with family separation, the reconfiguration of family roles, and the reintegration process following return from deployment.

The analysis of the empirical material leads to the conclusion that international missions represent not merely a professional event of limited duration but rather a cyclical phenomenon with profound and long-lasting effects on the entire family system. Separation generates increased emotional vulnerability and a redistribution of household responsibilities, whereby the family member remaining at home becomes the central pillar of administrative and parental stability. Although these challenges foster considerable resilience and adaptation over time among spouses and children, the post-mission stage opens a new critical phase—reintegration—which likewise requires time and adaptive effort to avoid role-related conflicts.

By correlating the case study findings with the national literature, the present research highlights that the family's internal coping mechanisms are often overburdened, making it necessary to move beyond spontaneous family resilience toward institutionalized and legally grounded support.

The development of a robust national framework for military social work capable of providing integrated services across the three identified stages—pre-mission assessment, counseling during separation, and dedicated post-mission family management programs—would ensure not only the social protection of veterans but also the preservation of family system functioning as a whole.

References

Bowen, M. (1978). *Family therapy in clinical practice*. Jason Aronson.

Bucur, E. (2024). Socializarea profesională și comunicarea în organizația militară. Procesul de socializare în organizațiile militare. Material de curs nepublicat.

Doca, A. S. (2026). Dificultăți materiale și financiare întâmpinate de mamele cu copii ai căror soți se află în misiune pe perioade îndelungate: Implicații pentru asistența socială militară. *Revista Română de Asistență Socială Militară, 1*(2). https://doi.org/10.5281/zenodo.20554746

Honcu, A. C., & Mihai, G. (2026a). Amorțeala emoțională și reziliența veteranilor de război: rolul asistenței sociale militare în recuperare și reintegrare. *Revista Română de Asistență Socială Militară, 1*(1). https://doi.org/10.5281/zenodo.19007608

Honcu, A. C. (2026b). Dincolo de misiune: protecția veteranilor și rolul asistenței sociale militare. *Revista Română de Asistență Socială Militară, 1*(1). https://doi.org/10.5281/zenodo.18933217

McCubbin, H. I., & Patterson, J. M. (1983). Family stress and adaptation to crises: A double ABCX model of family behavior. ERIC Document ED219676.

Oprina, C. (2026a). Copiii „războiului" de acasă: studiu de caz privind impactul absenței parentale și al stresului post-misiune asupra devianței juvenile în familii de militari. *Revista Română de Asistență Socială Militară, 1*(2). https://doi.org/10.5281/zenodo.19684597

Oprina, C. (2026b). Reintegrarea post-misiune a veteranilor: provocări și soluții. *Revista Română de Asistență Socială Militară, 1*(1). https://doi.org/10.5281/zenodo.18895423

Park, N. (2011). Military children and families: Strengths and challenges during peace and war. *American Psychologist, 66*(1), 65–72. https://doi.org/10.1037/a0021249

Pincus, S. H., House, R., Christensen, J., & Adler, L. E. (2001). The emotional cycle of deployment: A military family perspective. U.S. Army Medical Department Journal, 4, 15–23.

Ropan, I. E. (2026). Responsabilități legale și etice în garantarea drepturilor veteranilor militari. *Revista Română de Asistență Socială Militară, 1*(1). https://doi.org/10.5281/zenodo.18913163

Saltzman, W. R., Lester, P., Beardslee, W. R., Layne, C. M., Woodward, K., & Nash, W. P. (2011). Mechanisms of risk and resilience in military families: Theoretical and empirical basis of a family-focused resilience enhancement program. *Clinical Child and Family Psychology Review, 14*(3), 213–230. https://doi.org/10.1007/s10567-011-0096-1

Walsh, F. (2016). *Strengthening family resilience* (3rd ed.). Guilford Press.

APPENDIX 1 – Semi-Structured Interview Guide

The interview was conducted with an active service member of the Romanian Armed Forces who has experience in international missions.

1. How would you describe your experience of participating in international missions?
Participation in international missions has represented one of the most important professional experiences of my military career. I have always considered these missions to be part of the responsibilities associated with the military profession. They provided me with opportunities for both professional and personal development, but they also involved numerous challenges, particularly due to separation from my family.

2. How did you prepare for deployment?
Preparation consisted of professional training specific to the theater of operations, exercises, and activities aimed at developing adaptability and the ability to manage difficult situations. In addition, before each deployment, I discussed important aspects of daily life with my family in order to organize them during my absence.

3. What were the most difficult aspects of the mission?
From a professional perspective, the high level of responsibility and the need to remain constantly vigilant. From a personal perspective, the most difficult aspect was missing my family and being unable to be present when problems arose or important events occurred at home.

4. How did you experience separation from your family during the missions?
Separation from my family was the most difficult aspect of the missions. Although I was focused on mission-related activities, I constantly felt the absence of my family.

5. How was communication with your family maintained during the mission?
I maintained contact through telephone calls and online communication platforms. These means of communication were very helpful; however, they could not compensate for the lack of physical presence.

6. What were the most difficult family-related moments during your absence?
Situations in which problems arose at home or when the children experienced important events and I was not present.

7. How was family life affected during your absence?
My wife had to assume most of the daily responsibilities, and the family had to adapt to my absence. This reorganization became a necessary routine for maintaining proper family functioning.

8. How did your children adapt to repeated deployments?
Gradually, they became accustomed to my departures; however, each separation was emotionally difficult. Their reactions varied depending on their age and the family circumstances at that particular time.

9. What role did your spouse play during this period?
My wife's role was essential, as she assumed and managed family responsibilities, the children's upbringing, and daily activities. Her support was extremely important in maintaining family balance throughout the missions.

10. How did your return home after the mission unfold?
It was a highly anticipated moment; however, readjustment did not occur immediately. It took time to become involved again in the family routine and to resume family responsibilities.

11. How much time was required to readjust to family life?
A few weeks were needed to regain the rhythm of family life.

12. Were there any difficulties in resuming your roles within the family?
Yes. During the period of absence, certain routines and responsibilities are established and assumed by other family members. After returning, a period of adjustment is necessary for family roles to be redistributed and accepted by all members.

13. Overall, how do you perceive the impact of missions on family life?
I believe that participation in international missions has both positive effects and challenging consequences for family life. From a professional perspective, it contributes to the development of skills, experience, and professional maturity. From a family perspective, it involves periods of separation, adaptation, and continuous efforts on the part of all family members to maintain family balance and functioning.

14. What do you consider to be the role of military social work in supporting military personnel, veterans, and their families?
I believe that military social work plays an essential role in supporting military personnel and their families, particularly during periods of separation, reintegration, and adaptation to the challenges associated with a military career. Through counseling, information services, and psychosocial support, it can help prevent family-related difficulties and strengthen the adaptive capacity of military personnel and their loved ones.

15. How do you assess the contribution of the Romanian Journal of Military Social Work to the development of this field in Romania?
The Romanian Journal of Military Social Work represents an important initiative for the promotion and development of this field. The journal provides a platform for dialogue between researchers and practitioners, contributes to the dissemination of research findings, and brings to the attention of the public and decision-makers the specific issues faced by military personnel, veterans, and their families. Furthermore, it can support the development of policies and services that are better tailored to the needs of the military community.

16. What message would you like to convey to military personnel, veterans, and readers of the Romanian Journal of Military Social Work?
I would like to convey that military service involves sacrifices and responsibilities that are shared not only by the service member but also by the family. It is important for military

personnel and veterans not to hesitate to seek support when facing difficulties and to understand that adapting to the challenges of the profession becomes easier when there is support from family members, colleagues, and professionals. To the readers of the Romanian Journal of Military Social Work, I would like to express my appreciation for their interest in this field and my conviction that a better understanding of the realities of military life can contribute to the development of increasingly effective forms of support for military personnel, veterans, and their families. I would also like to take this opportunity to express my gratitude and wish continued success to the editorial team for this valuable initiative. Congratulations!

3.4 The Experience of a Romanian Veteran in International Missions: A Case Study on Psychosocial Resilience and Post-Military Reintegration

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Abstract (EN)

The present study analyzes, through an in-depth narrative interview, the professional career and subjective experience of a veteran of the Romanian Army who participated, within the International Security and Assistance Force (ISAF), in two international missions in Afghanistan (2008 and 2009-2010). The qualitative data resulting from the interview reveal three main analytical dimensions: (1) the formation of professional identity, as a result of distinct operational specializations (sniper and military cook); (2) coping mechanisms and psychosocial resilience developed in theaters of operations and (3) the transition process from military to civilian life and related reintegration after almost two decades of military career. The results underline the importance and role of group cohesion, intensive training, emphasizing institutional support in the management of combat stress, increasing the psychosocial resilience of the military, but also of the group, essentially providing relevant perspectives for military social assistance services.
Keywords: ISAF missions, military career, military social work, post-mission reintegration, psychosocial resilience, Romanian Army, theater of operations.

Introduction

By acceding to the North Atlantic Treaty Organization (NATO) in 2004, Romania achieved one of its most critical milestones for national security, „the transatlantic relationship representing the strategic bond that gives coherence and consistency to NATO actions" (Ministry of Foreign Affairs [MFA], 2021). Consequently, Romania became an important and reliable ally within the North Atlantic Alliance, alongside the other 31 members.

Prior to joining NATO, Romania participated with troops in external missions of the Alliance or under the UN aegis:

- IFOR – Implementation Force (1995-1996) and SFOR – Stabilization Force (1996-2004), NATO-led operations in Bosnia and Herzegovina (Ene, C. 1997);
- KFOR in Kosovo (March 2000) (Ministry of National Defense [MoND], 2000);

- OEF (Operation Enduring Freedom) – the mission in Afghanistan, launched in June 2002, which recorded its first two casualties in 2003 (Comisarul, 2014);
- Operation Alba in Albania (1997) (United Nations, 1997), as well as UN Missions in Somalia (June 1993 – October 1994), Rwanda (August 1994 – March 1996), and Angola (1997-1999) (Ministry of Foreign Affairs [MFA], 2023).

„During its first ten years of membership in the North Atlantic Alliance, Romania participated in operations in the Western Balkans, Afghanistan, Iraq, and North Africa. In these missions, the Romanian Armed Forces maintained a presence materialized in 40,000 rotated service members within these theaters" (Manciu, 2014).

The mission in Afghanistan (2002-2021) represented the largest and most prolonged external deployment of the Romanian Army since World War II. „In the 19 years of participation with military structures in this theater of operations, 27 Romanian soldiers lost their lives in combat actions, and over 200 were wounded" (Cozmei, 2021).

Following the conclusion of the mission in Afghanistan, the Romanian Army continued to be active in several external operations and missions under the aegis of NATO, the EU, the UN, and the OSCE, with a maximum force of 5,000 soldiers according to the Force Employment Plan for the year 2026, approved by the CSAT (Crasnea, 2026).

The participation of Romanian soldiers in external missions and their exposure to operational risk factors generated systematic needs for social support, both for active military personnel and for veterans and their families. In this context, the recognition of mental disorders associated with military service, including post-traumatic stress disorder (PTSD), was consolidated in Romanian legislation through Law no. 168/2020 (Parliament of Romania, 2020). This legislative framework represented an essential step in institutionalizing support for service members, veterans, and their families, establishing a foundation for the advancement of military social work and applied academic research, as reflected in specialized scientific literature such as the Romanian Journal of Military Social Work.

The present study contributes to the specialized literature by examining, from a qualitative perspective, the experience of a Romanian veteran who fulfilled distinct operational roles — sniper and military cook — within the same theater of operations.

Methodology

Research Design

The study utilizes a qualitative case study design, epistemologically grounded in Interpretative Phenomenological Analysis (IPA) (Smith et al., 2009). Smith (2009, p.11) defines IPA as „a qualitative approach to research data concerned with examining how people make sense of their major life experiences. […] it is phenomenological in that it wishes to explore experience in its own terms."

The primary method of data collection is the semi-structured narrative interview, which allows the participant to reconstruct the lived experience in their own terms, thereby facilitating access to the subjective meanings of the described events.

The research objectives are:

1. Capturing motivational factors and the formation of professional identity;
2. Analyzing coping strategies utilized under extreme stress;
3. Identifying psychosocial assistance needs in the post-mission reintegration process.

Participant and Operational Context

The interviewee — Corporal (Ret.) Slabu Iulian Virgil (S.I.V.) — is a former professional soldier of the Romanian Army, enlisted in October 2002 and discharged into the reserve in 2022, following nearly 20 years of military career. He participated in two international missions in Afghanistan:

- **Mission I (2008):** deployed to FOB Masoud, Zabul Province, serving as a sniper;
- **Mission II (2009-2010):** deployed sequentially to FOB Masoud, FOB Mescal, and FOB Lagman, serving as a military cook within the Logistics Company.

Note: FOB (Forward Operating Base) represents an advanced military outpost used by coalition forces in Afghanistan. FOB Masoud in Zabul Province is located in southern Afghanistan, an area known for high insurgent activity; FOB Mescal is an advanced base utilized for regional security through patrolling and counterinsurgency operations; FOB Lagman is a base located in eastern Afghanistan, used in stabilization operations within a strategic area due to its proximity to Kabul and insurgent supply routes.

Data Analysis

The analysis focused on identifying recurrent themes through inductive thematic coding, an exploratory approach to qualitative data where codes and themes are generated directly from the collected data without the use or influence of pre-existing hypotheses or theoretical frameworks (Braun & Clarke, 2006). The interview transcript was segmented into units of meaning, subsequently clustered into higher-order analytical categories correlated with military social work indicators and presented in the results section.

Results

The Formation of Military Professional Identity

S.I.V. describes his choice of a military career through the prism of internalized institutional values: *„I chose a military career because I wanted to be part of an institution built on discipline, honor, and responsibility."* This narrative aligns with theoretical models of organizational socialization in military institutions, where exposure to norms, discipline, rituals, and collective experiences shapes professional identity (Soeters et al., 2003).

Attaining the sniper specialization is depicted as a result of individual performance: *„Following the results obtained during training and live-fire exercises, I submitted a request to be selected for specialized sniper training, and after the necessary evaluations, I was assigned as a sniper within the 2nd Company, 3rd Platoon."* This dynamic reflects the significance of merit and performance, core values of military culture, as well as the role of individual agency in building a professional trajectory.

An element of profound analytical relevance for social work is the transition toward the role of a military cook during the second mission, dictated by the *„operational needs of the unit"*, illustrating the identity flexibility demanded of modern soldiers and the importance of logistics functions for operational sustainability: *„An army cannot function efficiently without logistical support. Nutrition directly influences the morale, physical capacity, and concentration levels of the soldiers."*

Institutional Recognition and Professional Validation

Institutional recognition was the direct outcome of the veteran's participation in international missions, materialized through diplomas, distinctions, and professional commendations based

on merit, courage, and professionalism: *„For my participation in the two international missions, I was awarded the NATO medal and certificates of appreciation attesting to my contribution to the successful fulfillment of missions conducted under allied command."* These forms of recognition transcend the symbolic dimension of a reward, representing a validation of his professional contribution and his belonging to the military community.

The International Mission as a Personal and Professional Growth Experience

Analysis of the interview indicates that participating in the missions in Afghanistan represented not only an operational challenge but also an opportunity for personal and professional development: *„Direct experience offers a completely different perspective compared to the one you have prior to deployment"*; *„Through professionalism, respect, sincerity, and shared experiences both during training and missions… the values and experiences acquired have remained a part of my life."*

Exposure to an environment characterized by risk, responsibility, and uncertainty contributed to the development of competencies such as self-control, adaptability, and the capacity to make decisions under stress: *„Patience, self-control, discipline, attention to detail, and the ability to make correct decisions under pressure. A sniper must be calm, balanced, and highly proficient professionally."*

These findings are consistent with specialized literature showing that operational experiences can reinforce psychological resources, foster resilience, and lead to sustainable adaptive mechanisms (Bartone, 2006; Tedeschi & Calhoun, 2004). Furthermore, Habib et al. (2018), in a thematic analysis of post-traumatic growth (PTG) experiences, identified six themes among military personnel and veterans: appreciation for life, re-evaluating a sense of purpose, enhanced personal human traits, forging bonds and connecting with others, integration into society, pride in one's heritage, and a sense of value to society.

Psychosocial Resilience and Coping Mechanisms in Theaters of Operations

From the narrative analysis, several adaptive coping strategies are identified. The first mission (2008) represented the participant's initial direct contact with the inherent risks of the theater of operations — combat mortality: *„we lost comrades and had colleagues wounded."* This traumatic exposure is processed retroactively by anchoring it in professional values and group solidarity, essential factors in fostering cohesion and resilience: *„Through preparation, adhering to procedures, and trust in colleagues. Repeated drills prior to deployment built the necessary reflexes to act effectively even in difficult situations."*

Group Cohesion — A Central Protective Factor in the Military Environment

Research findings by Griffith (2009) indicate that „soldiers' experiences with supportive unit leadership and cooperative peer relations reinforce their identification with the unit, reduce the likelihood of leaving the military, and enhance perceptions of combat readiness."

The presented narrative validates these studies and highlights that mutual support, interpersonal trust, and unit identification functioned as psychosocial protective mechanisms, contributing to the interviewee's successful adaptation: *„total trust in colleagues and the readiness to support each other regardless of the situation"*, while also underscoring the role of repetition in combat stress management: *„Repeated drills prior to deployment built the necessary reflexes to act effectively even in difficult situations."*

Multidisciplinary Intervention: The Role of the Military Social Worker vs. Psychological Support

The participant benefited from institutional psychological support following his first mission: *„upon returning to the tank unit, I participated in sessions led by the unit psychologist."* However, for an accurate analysis within the sphere of military social work, it is mandatory to delineate clinical competencies from social ones. It must also be pointed out that within the Romanian Army, the specialized role of a military social worker—as defined in Euro-Atlantic systems (such as the Military Social Work model in the US or UK)—does not currently exist. In the absence of a professional corps of military social workers within combat or logistical structures, responsibilities specific to social case management are frequently fragmented.

Transition and Post-Military Reintegration

The process of transitioning into the reserve in 2022, after nearly two decades in military service, is described by the interviewee as a „major change," emphasizing that *„the values and experiences acquired have remained a part of my life,"* particularly *„discipline, respect, responsibility, integrity, and perseverance."* This identity continuity suggests a high level of adaptability and a functional appraisal of military experience during the transition to civilian life.

The relational dimension formed over two decades in the military environment can generate a persistent sense of loss, reflected in the following statement: *„[I miss] The camaraderie, the team spirit, and the feeling of belonging to a structure unified by a common goal."* This experience can be interpreted as a manifestation of losing the sense of belonging and camaraderie specific to military culture, phenomena frequently reported by veterans during transition phases (Sachdev & Dixit, 2024). The presence of this dimension highlights the imperative need for community support networks tailored for veterans.

Conclusions

The present study offers a valuable qualitative insight into the experience of a Romanian veteran participating in international missions, carrying direct implications for the practice of military social work. The primary conclusions emphasize: (1) the vital role of preparation and group cohesion as factors of psychosocial resilience; (2) the importance of post-mission institutional psychological support; (3) the necessity of transition programs tailored to the cultural and identity specificities of veterans.

The results concurrently highlight the relevance of military social work in identifying and managing the psychosocial needs of service members and veterans, alongside the development of support mechanisms designed to facilitate family reintegration. In this regard, military social work can contribute to reinforcing individual and family resilience, preventing social isolation, and supporting the adaptation process to civilian life after concluding a military career.

The limitations of the study reside in its monographic single-case design and its reliance on self-reported data, which may be subject to retrospective recall bias. Future research could extend the analysis to larger samples of veterans and integrate comparative perspectives between different military specializations, thereby contributing to the development of specialized knowledge and interventions within the field of military social work.

References

Bartone, P. T. (2006). Resilience under military operational stress: Can leaders influence hardiness? *Military Psychology*, 18(Suppl.), S131–S148. https://doi.org/10.1207/s15327876mp1803s_10

Brailey, K., Vasterling, J. J., Proctor, S. P., Constans, J. I., & Friedman, M. J. (2007). PTSD symptoms, life events, and unit cohesion in U.S. soldiers: Baseline findings from the neurocognition deployment health study. *Journal of Traumatic Stress*, 20(4), 495–503. https://doi.org/10.1002/jts.20234

Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3(2), 77-101. https://doi.org/10.1191/1478088706qp063oa

Cohen, S., & Wills, T. A. (1985). Stress, social support, and the buffering hypothesis. *Psychological Bulletin*, 98(2), 310–357. https://doi.org/10.1037/0033-2909.98.2.310

Comisarul. (2014, April 3). Analiză: Ce a câștigat România în 10 ani de NATO [Analysis: What Romania has gained in 10 years of NATO]. https://www.comisarul.ro/politic/analiza-ce-a-castigat-romania-in-10-ani-de-nato_6231.html

Crasnea, I. (2026, January 4). România va trimite până la 5.000 de militari în misiunile și operațiile externe din 2026 [Romania will send up to 5,000 soldiers to external missions and operations in 2026]. *Libertatea*. https://www.libertatea.ro/stiri/romania-va-trimite-pana-la-5-000-de-militari-in-misiunile-si-operatiile-externe-din-2026-5571142

Ene, C. (1997). Romania sets its sights on NATO membership. *Nato Review*. https://www.bits.de/NRANEU/docs/Ene.htm

Griffith, J. (2009). Multilevel analysis of cohesion's relation to stress, well-being, identification, disintegration, and perceived combat readiness. *Military Psychology*, 14(3), 217–239. https://doi.org/10.1207/S15327876MP1403_3

Habib, A., Stevelink, S. A. M., Greenberg, N., & Williamson, V. (2018). Post-traumatic growth in (ex-) military personnel: Systematic review and qualitative synthesis. *Occupational Medicine*, 68(9), 617-625. https://doi.org/10.1093/occmed/kqy140

Manciu, A. (2014, March 30). Cronologie: 26 de militari români şi-au pierdut viaţa în urma misiunilor României în cadrul NATO [Chronology: 26 Romanian soldiers lost their lives following Romania's missions within NATO]. *Mediafax*. https://www.mediafax.ro/social/cronologie-26-de-militari-românia-si-au-pierdut-viața-in-urma-misiunilor-României-in-cadrul-nato-12360933

Ministry of Foreign Affairs. (2023, July). Relații bilaterale. Republica Angola [Bilateral relations. Republic of Angola]. https://www.mae.ro/bilateral-relations/1809

Ministry of Foreign Affairs. (2021). România și NATO [Romania and NATO]. https://www.mae.ro/node/46982

Ministry of National Defense. (2000). Misiunea KFOR/NATO – Kosovo (martie 2000–în desfășurare) [KFOR/NATO Mission – Kosovo (March 2000–ongoing)]. https://www.mapn.ro/evenimente/uploads/pdf/20090401_164527_6765245631ff8aeaeb04e6879bd95958.pdf

Parlamentul României. (2020). Legea nr. 168 din 7 august 2020 pentru recunoașterea meritelor personalului participant la acțiuni militare, misiuni și operații pe teritoriul sau în afara teritoriului statului român și acordarea unor drepturi acestuia, familiei acestuia și urmașilor celui decedat. *Monitorul Oficial al României* nr. 715 din 8 august 2020. https://legislatie.just.ro/Public/DetaliiDocument/228752

Sachdev, S., & Dixit, S. (2024). Military to civilian cultural transition experiences of retired military personnel: A systematic meta-synthesis. *Military Psychology*, 36(6), 579–592. https://doi.org/10.1080/08995605.2023.2237835

Siebold, G. L. (2007). The essence of military group cohesion. *Armed Forces & Society*, 33(2), 286–295. https://doi.org/10.1177/0095327X06294173

Smith, J. A., Flowers, P., & Larkin, M. (2009). *Interpretative Phenomenological Analysis: Theory, Method and Research*. Sage.

Soeters, J., Winslow, D., & Weibull, A. (2003). Military culture. In G. Caforio (Ed.), *Handbook of the sociology of the military* (pp. 237-254). Kluwer Academic Publishers.

Tedeschi, R. G., & Calhoun, L. G. (2004). Posttraumatic growth: Conceptual foundations and empirical evidence. *Psychological Inquiry*, 15(1), 1–18. https://doi.org/10.1207/s15327965pli1501_01

United Nations. (1997, April 30). Press conference on Albania. UN Meetings Coverage and Press Releases. https://press.un.org/en/1997/19970430.albania.html

Appendix: Interview Transcript

Initial Overview and Career Path

Question: To begin, please provide the readers of the *Romanian Journal of Military Social Work* with a brief presentation of your military career path. What do you consider to have been the most significant milestones of your career?

Answer: *My name is Slabu Iulian Virgil, and I enlisted in the Romanian Army in October 2002, within the xxx-th Tank Battalion, where I was assigned to the specialization of tank gunner-loader. Right from the beginning, I understood that military life demands discipline, responsibility, and a permanent desire for self-improvement. In 2007, I began training to participate in my first international mission in Afghanistan, within the XXX-th Mechanized Infantry Battalion „Sfântul Andrei" Galați. After approximately three months of intensive training, in January 2008, I was deployed to Zabul Province, at FOB Masoud. I was part of the X-nd Company, Y-rd Platoon, and served as a sniper, equipped with the PSL model 1974 semi-automatic sniper rifle, caliber 7.62 mm. During this deployment, I executed reconnaissance, observation, escort, securing, and support missions for humanitarian actions carried out within our area of responsibility. In 2009, I underwent training for my second external mission within the XX-th Mechanized Infantry Battalion „Căpitan Valter Mărăcineanu" from Focșani. In July 2009, I was deployed once again to Afghanistan, Zabul Province, operating at FOB Masoud, FOB Mescal, and FOB Lagman until January 2010. On this mission, I was part of the Logistics Company and served as a military cook, with my individual armament consisting of the 5.45 mm caliber automatic rifle, a chef's knife, and a ladle. For my participation in these two international missions, I was awarded the NATO Medal and certificates of appreciation attesting to my contribution to the successful fulfillment of missions conducted under allied command. In 2022, I transitioned into the reserve after nearly 20 years of military service, a period during which I had the honor of serving my country both in garrison and in national missions, as well as in the theater of operations in Afghanistan, alongside exceptional professionals who left a profound mark on my military and human journey.*

About the Military Career

Question: How did you choose a military career, and what motivated you to enlist?

Answer: *I chose a military career because I wanted to be part of an institution based on discipline, honor, and responsibility. I was attracted to the idea of serving my country and contributing to the safety of the community I belong to.*

Question: What were the most important milestones of your military training?

Answer: *The basic training during the enlistment period formed the foundation of my development. Subsequently, the most significant stages were the live-fire exercises in national shooting ranges and the pre-deployment training for the two missions in Afghanistan—each*

spanning about four months, with an emphasis on tactics, physical endurance, operational procedures, and cooperation within NATO structures.

Question: How did you come to occupy the role of a sniper in 2008?

Answer: *Following the results obtained during training and live-fire shooting sessions, I submitted a request to be selected for specialized training in this field. After undergoing the necessary evaluations, I was assigned as a sniper within the 2nd Company, 3rd Platoon.*

Question: What qualities do you consider essential for a sniper?

Answer: *Patience, self-control, discipline, attention to detail, and the ability to make correct decisions under pressure. A sniper must be calm, balanced, and highly proficient professionally.*

Question: What were the most difficult challenges you encountered in this role?

Answer: *Maintaining concentration over very long periods, the harsh climatic conditions in Afghanistan, and the permanent responsibility to protect my comrades and provide precise information for mission completion.*

About the Sniper Experience

Question: What does a typical day look like for a sniper in an operational area?

Answer: *The day would begin with checking weaponry and equipment, analyzing received intelligence, and preparing for the mission. Depending on the orders, we executed observation, reconnaissance, securing, or escort activities. A large part of our operations was dedicated to surveillance and intelligence gathering.*

Question: What role do patience and discipline play in this specialization?

Answer: *They play a vital role. There are situations where you must remain focused and vigilant for hours on end without losing focus. Discipline and patience make the difference between success and failure.*

Question: Is there a specific mission that remains etched in your memory? Why?

Answer: *I particularly remember the escort and securing missions conducted in Zabul Province. The responsibility was immense because the safety of the entire team depended on the vigilance and professionalism of each individual soldier.*

Question: How do you manage stress and pressure in combat situations?

Answer: *Through preparation, adhering to procedures, and total trust in colleagues. Repeated drills prior to deployment built the necessary reflexes to act effectively even in difficult situations.*

Question: What lessons did you learn as a sniper that proved useful later in your career?

Answer: *I learned to quickly analyze situations, pay close attention to details, and remain calm during tense moments. These lessons were useful in all the roles I occupied afterward.*

Transition to the Role of Military Cook

Question: How did you come to work as a military cook in 2009?

Answer: *Due to the operational needs of the unit, I was assigned to the Logistics Company and served as a military cook during my second deployment to Afghanistan.*

Question: What major differences exist between the two roles?

Answer: *As a sniper, I participated directly in the operational component. As a military cook, my responsibility was to ensure the necessary sustenance for the soldiers so they could fulfill their missions under the best possible conditions. They are different roles, but equally important.*

Question: Why are logistical activity and nutrition important for the success of a mission?

Answer: *An army cannot function efficiently without logistical support. Nutrition directly influences the morale, physical capacity, and concentration levels of the soldiers.*

Question: How is troop feeding organized under field conditions?

Answer: *Everything is based on planning, supply chain logistics, and the efficient management of available resources. In field conditions, permanent adaptation to the situation in the theater of operations is mandatory.*

Question: Was there a situation where your work as a cook had a distinctive impact on troop morale?

Answer: *Yes. After demanding periods of operational activity, a hot and well-prepared meal had a visible effect on the soldiers' morale and contributed significantly to maintaining team spirit.*

About Combat Missions

Question: How many external deployments did you participate in, and in which areas?

Answer: *I participated in two external missions in Afghanistan, both in Zabul Province. The first took place at FOB Masoud, and the second across FOB Masoud, FOB Mescal, and FOB Lagman.*

Question: What was the most difficult mission from a professional standpoint?

Answer: *The first mission in 2008 was the most difficult because it represented my initial direct contact with the reality of a theater of operations, where we lost comrades and had colleagues wounded.*

Question: What impressed you the most during the operations?

Answer: *The professionalism of the soldiers and the way people from different countries collaborated to achieve the same objectives—restoring peace.*

Question: How does the perception of war change after participating in real-world missions?

Answer: *You understand much better the consequences of conflicts and the profound importance of stability and peace. Direct experience offers a completely different perspective compared to the one you have prior to deployment.*

Question: What are the most important lessons you learned in the theaters of operations?

Answer: *The importance of preparation, adaptability, discipline, and teamwork. No mission can be successfully completed by a single person alone*.

Camaraderie and Leadership

Question: What does camaraderie mean within a military unit deployed on a mission?

Answer: It means total trust in colleagues and the readiness to support each other regardless of the situation.

Question: How is trust built between members of a team?

Answer: *Through professionalism, respect, sincerity, and shared experiences lived together both during training and missions.*

Question: Did you have mentors who influenced your career?

Answer: *Yes. I had commanders (Lieutenant T., Captain F. R., Major T. R., and Captain V. R.), as well as experienced colleagues who provided fine examples of professionalism and leadership.*

Question: What advice would you offer to young soldiers at the beginning of their journey?

Answer: *To treat every single day of training with the utmost seriousness, to be disciplined, and to never stop learning*.

Life in the Reserve

Question: How was the transition from active military life to reserve status?

Answer: *It was a major change after two decades of military activity, but the values and experiences acquired have remained an integral part of my life.*

Question: What aspects of military life do you miss the most?

Answer: *The camaraderie, the team spirit, and the feeling of belonging to a structure unified by a common goal.*

Question: How do you view the evolution of the army compared to the period when you were on active duty?

Answer: *I believe the army has modernized significantly, both from a technological standpoint and in terms of personnel training.*

Question: What values acquired in the military guide you today?

Answer: *Discipline, respect, responsibility, integrity, and perseverance.*

Personal Reflections and Support Needs

Question: What is the moment in your military career that you are proudest of?

Answer: *Participating in the two missions in Afghanistan and the fact that I fulfilled my duties with professionalism, representing the Romanian Army with honor.*

Question: If you could pass on a single message to future generations of soldiers, what would it be?

Answer: *To serve their country with honor, to respect their comrades, and to understand that the success of a mission is the result of the entire team's hard work.*

Question: How did combat missions change you as a person?

Answer: *They made me more mature, more responsible, and far more aware of the importance of every single decision and every human life.*

Question: What do military service and sacrifice mean to you?

Answer: *Military service means duty, honor, and responsibility toward the country. Sacrifice means the willingness to put the mission, your comrades, and the general interest ahead of personal comfort whenever the situation demands it.*

Question: During the missions or after returning to civilian life, did you require any form of professional assistance?

Answer: *After my first mission in Afghanistan, upon returning to the tank unit, I participated in support sessions led by the unit psychologist*.

3.5 Tulburarea de stres post-traumatic la personalul militar: cadrul clinic, juridic și de asistență socială

Post-Traumatic Stress Disorder in Military Personnel: A Clinical, Legal, and Social Work Framework

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Rezumat (RO)

Tulburarea de stres post-traumatic – TSPT/ Post-Traumatic Stress Disorder-PTSD, constituie una dintre cele mai frecvente și invalidante consecințe psihice ale expunerii la trauma operațională, cu un impact major asupra personalului militar, a veteranilor și a familiilor acestora. Cercetarea utilizează o metodologie calitativă bazată pe sinteza narativă a literaturii clinice și analiza documentară a legislației naționale și internaționale. Scopul cercetării este de a analiza TSPT din trei perspective convergente: cea clinică întemeiată pe literatura internațională evaluată inter pares; cea juridică, centrată pe recunoașterea afecțiunii în dreptul românesc, în special prin Legea 168/2020, care definește expres sindromul de stres post-traumatic și rolul asistenței sociale militare, în prevenție, identificare timpurie, sprijinul acordat familiei și reintegrarea socială. Concluziile evidențiază faptul că prevalența TSPT variază substanțial în funcție de factori pre-, peri-, și post-traumatici, că sprijinul post misiune și reducerea stigmatizării sunt determinante pentru accesul la îngrijire. Desi dreptul românesc oferă un temei solid de recunoaștere a vătămarii psihice, acesta rămâne insuficient articulat cu un parcurs structurat de intervenție psihosocială, fiind necesară reglementarea formală a asistenței sociale militare în sistemul național de apărare și a dezvoltării unor politici integrate care să coreleze dimensiunile clinice, juridice și sociale ale TSPT.

Cuvinte-cheie: asistența socială militară, intervenție psihosocială, legea 168/2020, tulburarea de stres posttraumatic (TSPT), Post Traumatic Stress Disorder (PTSD), reintegrarea socială, sindromul de stres post-traumatic, veteran.

Abstract (EN)
Post-Traumatic Stress Disorder (PTSD) is one of the most common and disabling psychological consequences of exposure to operational trauma, with a major impact on military personnel, veterans and their families. The research uses a qualitative methodology based on the narrative synthesis of the clinical literature and the documentary analysis of national and international legislation. The aim of the research is to analyze PTSD from three convergent perspectives: the clinical one based on the international peer-reviewed literature; the legal one, focused on the recognition of the condition in Romanian law, in particular through Law 168/2020, which expressly defines post-traumatic stress syndrome and the role of military social assistance, in prevention, early identification, family support and social reintegration. The conclusions highlight the fact that the prevalence of PTSD varies substantially depending on pre-, peri-, and post-traumatic factors, that post-mission support and stigma reduction are determinants for access to care. Although Romanian law provides a solid basis for recognizing mental injury, it remains insufficiently articulated with a structured path of psychosocial intervention, requiring the formal regulation of military social assistance in the national defense system and the development of integrated policies that correlate the clinical, legal and social dimensions of PTSD.
Keywords: law 168/2020, military social work, psychosocial intervention, post-traumatic stress disorder (PTSD), social reintegration, post-traumatic stress syndrome, veteran.

Introducere

Expunerea la situații care amenință viața constituie o trăsătură intrinsecă a profesiei militare. Spre deosebire de majoritatea ocupațiilor civile, serviciul militar – și cu atât mai mult participarea la acțiuni de luptă – implică confruntarea repetată cu moartea, rănirea, pierderea camarazilor și dilemele morale ale violenței organizate. Aceste experiențe, deși inerente misiunii, lasă urme psihice profunde, dintre care tulburarea de stres post-traumatic reprezintă expresia cea mai studiată și cea mai recunoscută clinic.

Atenția sistematică acordată acestei tulburări s-a intensificat odată cu operațiunile militare din Irak şi Afganistan, care au generat un val de cercetări asupra sănătății mintale a personalului dislocat în teatrele de operații (TO). Studiul-reper al lui Hoge și colaboratorii, publicat în *New England Journal of Medicine* în anul 2004, a documentat atât amploarea problemelor de sănătate mintală la militarii întorși din luptă, cât și barierele care îi împiedică să solicite ajutor. De atunci, un număr semnificativ de cercetători au confirmat faptul că trauma operațională produce consecințe psihice durabile, a căror gestionare reclamă un răspuns coordonat – clinic, instituțional și social.

Pentru asistența socială militară TSPT nu este o simplă problemă medicală, ci o problemă psiho-socială complexă. Tulburarea afectează funcționarea profesională, relațiile familiale, reintegrarea socială și calitatea vieţii, plasând asistentul social militar într-o poziție cheie în lanțul de identificare, orientare, sprijin familial și recuperare. Înţelegerea cadrului clinic şi juridic al TSPT devine o premisă a unei intervenții profesionale competente.

Prezentul articol își propune să ofere o analiză integrată a TSPT la personalul militar. Relevanța temei pentru contextul românesc a crescut odată cu participarea constantă a forțelor

armate la misiuni internaționale. Mii de militari români au fost dislocați în teatrele de operații, iar o parte dintre aceștia s-au întors purtând consecințele psihice ale experienței trăite. În contextul participării României la peste 30 de misiuni internaționale, cu mii de militari dislocați anual, statul trebuie să asigure nu doar recunoașterea simbolică, ci și drepturi concrete: financiare, medicale, psihologice și sociale (Bârzan, 2026).

Recunoașterea acestor consecințe a parcurs, în România, un drum lung de la relativa invizibilitate către o consacrare juridică explicită, marcată prin adoptarea Legii nr. 168/2020 (Parlamentul României, 2020). Această evoluție normativă reflectă maturizarea modului în care instituția militară și societatea civilă înțeleg datoria față de cei afectați psihic în exercitarea serviciului militar, dar ridică, totodată, întrebarea dacă recunoaşterea drepturilor este însoțită de mecanisme adecvate de identificare, tratament şi sprijin.

Scopul prezentei cercetări este de a analiza tulburarea de stres posttraumatic la personalul militar prin integrarea perspectivelor clinică, juridică și psiho-socială, cu evidențierea implicațiilor acesteia asupra militarilor, veteranilor și familiilor acestora, precum și accentuarea rolului asistenței sociale militare în procesul de prevenție, intervenție și reintegrare.

Prezentul demers se fundamentează pe următoarea întrebare de cercetare: în ce măsură abordarea integrată a dimensiunilor clinice, juridice și psiho-sociale ale tulburării de stres posttraumatic contribuie la îmbunătățirea proceselor de identificare, sprijin și reintegrare a personalului militar afectat?

În vederea atingerii scopului prezentat, s-au avut în vedere următoarele obiective specifice:

1. analiza principalelor repere conceptuale și clinice privind TSPT în context militar;
2. identificarea prevalenței și a factorilor de risc consemnate în literatura de specialitate;
3. examinarea cadrului juridic românesc privind recunoașterea și protecția militarilor afectați de TSPT;
4. evidențierea contribuției asistenței sociale militare în prevenirea, identificarea timpurie a TSPT-ului, sprijinirea familiei și reintegrarea socială a celor afectați.

Repere conceptuale: trauma operațională şi tulburarea de stres post-traumatic

Tulburarea de stres post-traumatic desemnează un ansamblu de manifestări psihice care apar în urma expunerii la un eveniment traumatic (confruntarea directă sau indirectă cu moartea, vătămarea gravă sau violența) (American Psychiatric Association [APA], 2013, p. 271). Tabloul clinic include, în mod tipic, retrăirea involuntară a evenimentului, evitarea stimulilor asociați acestuia, alterări negative ale cogniției și dispoziției, precum și o reactivitate fiziologică crescută. Persistența acestor manifestări, pentru o perioadă de timp mai mare de o lună de zile, și interferența lor semnificativă cu funcționarea cotidiană constituie criteriile care delimitează tulburarea de reacția acută, normală, la stres.

În context militar, sursa traumei este, de regulă, multiplicată şi cumulativă. Expunerea la lupte violente, rănirea proprie, asistarea la rănirea sau decesul camarazilor, manipularea armamentului letal și deciziile cu miză morală se suprapun, generând o încărcătură traumatică specifică. Un concept distinct, dar înrudit, este cel de leziune morală, care descrie suferința psihică rezultată din participarea la, asistarea la, sau eșecul de a împiedica acte ce contravin convingerilor morale profunde ale persoanei. Standardul NATO de profil AMedP-8.10 recunoaște explicit această dimensiune, subliniind legătura bi-direcțională dintre dilemele morale și sănătatea mintală.

În asistența socială militară distincția dintre tulburare și reacție normală are o importanță practică deosebită. Nu orice suferință psihică post-misiune constituie o patologie; o parte însemnată a manifestărilor inițiale reprezintă reacții firești care se remit spontan. Supra-medicalizarea acestor reacții poate fi la fel de dăunătoare ca și ignorarea tulburării instalate. Rolul profesionistului este, prin urmare, de a distinge (în colaborare cu specialistul în sănătate mintală) între procesul normal de readaptare și tabloul clinic care reclamă intervenția specializată.

Trebuie subliniată, de asemenea, frecvența comorbidităților întrucât TSPT survine rareori izolat: se asociază frecvent cu depresia, tulburările anxioase și consumul problematic de alcool sau de alte substanțe, acestea din urmă fiind adesea o formă de automedicație a suferinței psihice. Comorbiditatea complică atât diagnosticul, cât și intervenția, întrucât abordarea izolată a unei singure tulburări riscă să rateze ansamblul tabloului clinic. Pentru asistența socială militară, această întrepătrundere a problemelor (psihice, comportamentale, familiale, profesionale) confirmă necesitatea unei abordări integrate.

O dimensiune adesea subestimată este și cea a recuperării temporale. TSPT nu urmează o traiectorie liniară; perioadele de ameliorare pot alterna cu recăderi declanşate de evenimente din viață, de aniversări ale traumei sau de apariția unor stresori noi. Această natură fluctuantă reclamă un sprijin de durată, capabil să acompanieze persoana dincolo de momentul intervenției inițiale, ceea ce constituie un argument suplimentar pentru implicarea asistentului social militar, prin vocația sa de însoțire pe termen lung a beneficiarului.

Considerații metodologice

Cercetarea adoptă o metodologie calitativă, integrând analiza documentată a surselor juridice cu o sinteză narativă a literaturii clinice. Sursele juridice cuprind: Legea nr. 168 din 7 august 2020 pentru recunoaşterea meritelor personalului participant la acțiuni militare, misiuni și operații pe teritoriul sau în afara teritoriului statului român şi acordarea unor drepturi acestuia, familiei acestuia şi urmaşilor celui decedat; Legea nr. 80 din 11 iulie 1995 privind statutul cadrelor militare; Legea nr. 384 din 10 octombrie 2006 privind statutul soldaților și gradaților profesioniști, precum și standardul NATO AMedP-8.10 A PSYCHOLOGICAL GUIDE FOR LEADERS ACROSS THE DEPLOYMENT CYCLE (2019).

Sursele clinice sunt constituite din studii şi meta-analize publicate în reviste internaționale evaluate inter pares, selectate pe criteriul relevanței pentru segmentul militar. Demersul urmează trei axe: o axă epidemiologică, care sistematizează prevalența și factorii de risc; o axă juridic-instituțională, care examinează recunoaşterea TSPT și cadrul de intervenție; și o axă psihosocială, care analizează rolul asistenței sociale militare. Articularea acestor trei perspective urmărește depășirea unei abordări strict medicale, în favoarea unei înțelegeri bio-psiho-sociale a tulburării de stres post-traumatic.

Se impune o precizare privind limitele. Cea mai mare parte a cercetării epidemiologice provine din spațiul nord-american și britanic, fapt care ridică problema transferabilității estimărilor de prevalență către segmentul militar românesc, pentru care datele publicate sistematic sunt limitate. Concluziile epidemiologice sunt prezentate drept repere orientative, nu drept valori direct aplicabile contextului național, ceea ce subliniază necesitate realizării unor studii autohtone.

Dimensiunea epidemiologică și factorii de risc

Prevalența: o variabilitate semnificativă

O trăsătură constantă a literaturii o reprezintă variabilitatea considerabilă a estimărilor de prevalență, explicabilă prin diferențele de definiție, de instrumente de evaluare, de segmentul de populație studiată și de momentul evaluării în raport cu misiunea.

O meta-analiză a factorilor de risc pentru TSPT legată de lupta operațională, care a sintetizat 32 de studii, constată o amplitudine remarcabilă a estimărilor. Potrivit lui Xue et al. (2015), prevalența TSPT asociată experiențelor de luptă variază între 1,09% și 34,84% . Această dispersie nu reflectă o inconsistență a cercetării ci eterogenitatea reală a populațiilor și a contextelor operaționale, precum și sensibilitatea estimărilor la metodologia de măsurare.

Cercetările privind evoluția în timp a tulburării arată faptul că manifestările pot debuta sau se pot agrava, după o anumită durată de timp de la încheierea misiunii, fapt care contrazice ipoteza unei reacții exclusiv imediate. Această întârziere a debutului are implicații directe pentru organizarea monitorizării post-misiune, care nu se poate limita la perioada imediat următoare revenirii din misiune (Rona et al, 2016).

Comparația între segmentele de populație militară și civilă confirmă, totodată, specificitatea riscului asociat serviciului militar. Datele disponibile indică o prevalență de-a lungul vieții semnificativ mai ridicată în rândul militarilor veterani decât în rândul populației civile masculine, diferență atribuită în mare parte expunerii la luptă și acțiuni operaționale, dar amplificată de absența, după încheierea serviciului militar, a structurii de sprijin și a camaraderiei specifice vieții militare. Această observație deplasează atenția de la momentul traumei către contextul post-traumatic, sugerând faptul că vulnerabilitatea nu ține doar de ce s-a întâmplat în teatrul de operații, ci și de mediul în care revine militarul.

Factorii de risc: o structură pre-, peri- și post-traumatică

Cercetarea clasifică factorii de risc în trei categorii temporale: pre-, peri- și post-traumatici.

- Factorii pre-traumatici cuprind caracteristicile socio-demografice și militare (între care sexul feminin, nivelul scăzut de educație, gradele de execuție, numărul ridicat de dislocări /deployments și durata cumulată a acestora), precum și de antecedentele de traumă și de probleme psihologice.
- Factorii peri-traumatici privesc însăși experiența traumatică: intensitatea expunerii la lupte, descărcarea armei, asistarea la rănirea sau decesul unui camarad, severitatea traumei.
- Factorii post-traumatici includ: problemele psihologice comorbide și, în special, calitatea sprijinului primit după revenirea din misiune.

Rolul sprijinului social post-misiune merită subliniat, întrucât el constituie unul dintre puținii factori de risc modificabili prin intervenție. Spre deosebire de caracteristicile pre-traumatice-fixe sau de experiența traumatică- deja consumată, sprijinul post-misiune poate fi consolidat prin politici și servicii adecvate. Această constatare conferă asistenței sociale militare un rol nu doar reactiv, ci și proactiv: prin întărirea rețelelor de sprijin, profesionistul contribuie efectiv la reducerea riscului de instalare sau cronicizare a tulburării.

Identificarea acestor factori are și o valoare predictivă, utilă pentru organizarea sprijinului. Cunoscând faptul că anumite categorii (personalul cu misiuni multiple și prelungite, cei expuși la acțiuni de luptă intense, cei cu antecedente de traumă) prezintă un risc crescut, instituția poate prioritiza monitorizarea și sprijinul acordat acestor grupuri, în locul unei abordări uniforme și, prin urmare, ineficiente. O asemenea direcționare a resurselor presupune însă un sistem de evidență și de evaluare a riscului, a cărui dezvoltare reprezintă o condiție a unei politici de sănătate mintală fundamentată pe dovezi. Cercetarea atrage atenția, totodată,

asupra interacțiunii dintre factori: aceștia nu acționează izolat, ci se potențează reciproc, astfel încât evaluarea riscului trebuie să fie multidimensională, iar nu bazată pe un singur indicator.

Bariera stigmatizării

Una dintre cele mai importante contribuții ale literaturii de specialitate constă în identificarea barierelor care împiedică accesul la îngrijire – dintre acestea stigmatizarea ocupând un loc central. Hoge et. al (2004) au arătat faptul că, în mod paradoxal, tocmai persoanele cele mai afectate sunt cei mai reticenți în a solicita ajutor specializat Astfel, rezultatele studiilor efectuate de către aceștia au indicat faptul că percepția stigmatizării poate constitui un obstacol semnificativ în accesarea serviciilor de sănătate mintală de către personalul militar, afectând în special persoanele cu cea mai mare nevoie de îngirjire specializată. Teama de a fi perceput drept slab, îngrijorarea privind efectele asupra carierei și neîncrederea în confidențialitatea discuțiilor descurajează căutarea ajutorului, transformând stigmatizarea într-un obstacol structural, nu doar individual.

Răspunsul la această barieră a reorientat practica internațională. Analiza comparativă a sprijinului de sănătate mintală în armatele aliate arată o deplasare de la modelul intervenției reactive către cel al construirii rezilienței și al sprijinului de proximitate oferit de lideri și camarazi, cu profesionistul în rol de facilitator, așa cum au evidențiat Buhler et.al (2014). Această reorientare urmărește tocmai ocolirea barierei stigmatizării, prin integrarea sprijinului psihic în cultura unității, și nu prin externalizarea sa exclusivă către serviciile medicale percepute drept stigmatizante.

Cadrul juridic

Recunoașterea TSPT în dreptul românesc- Legea nr. 168/2020

Un moment de cotitură în recunoașterea TSPT în România îl constituie Legea nr. 168 din 7 august 2020 pentru recunoașterea meritelor personalului participant la acțiuni militare, misiuni și operații pe teritoriul sau în afara teritoriului statului român și acordarea unor drepturi acestuia, familiei acestuia și urmașilor celui decedat publicată în Monitorul Oficial al României, Partea I, nr. 715 din 8 august 2020. Spre deosebire de reglementările anterioare, care abordau afecțiunile psihice doar indirect, această lege definește expres sindromul de stres post-traumatic drept afecțiune dobândită în legătură cauzală cu participarea la misiuni.

Potrivit art. 2 din Legea nr 168/2020, sindromul de stres post-traumatic și afecțiunile psihice comorbide sunt: *”tulburări dobândite de personalul participant în urma și din cauza participării la acțiuni militare, misiuni și operații, care declanșează o perturbare semnificativă la nivelul gândirii, reglării emoționale sau comportamentului persoanei”*. Această definiție, care încorporează limbajul clinic contemporan leagă recunoașterea afecțiunii de constatarea ei de către comisiile de expertiză medico-militară, la propunerea psihologului clinician și/sau a medicului psihiatru, instituind astfel o procedură de stabilire a legăturii de cauzalitate.

Consecințele juridice ale recunoașterii sunt substanțiale. Personalul care a dobândit afecțiuni psihice ca urmare a participării la misiuni beneficiază de atribuirea calității de ”veteran din teatrele de operații”, indiferent de durata participării precum și de drepturi de menținere, încadrare sau reîncadrare în funcții adaptate, de acces gratuit la tratament și recuperare și de măsuri de protecție socială (conform art 4, alin (2), art. 7 și art. 8). Prin aceste prevederi, dreptul românesc trece de la o logică a simplei compensări către una care recunoaște afecțiune psihică drept o vătămare legitimă asimilabilă celei fizice.

Fundamentul statutar și de pensii

Recunoașterea specifică din Legea nr 168/2020 se sprijină pe fundamentul statutar consacrat de Legea nr. 80 din 11 iulie 1995 privind statutul cadrelor militare, publicată în Monitorul Oficial al României, Partea I, nr. 155 din 20 iulie 1995 și de Legea nr. 384 din 10 octombrie 2006 privind statutul soldaților și gradaților profesioniști, publicată in Monitorul Oficial al României, Partea I,. nr. 868 din 24 octombrie 2006, care reglementează drepturile la asistență medicală, la concedii medicale și după caz, la trecerea în rezervă pe motive medicale. Atunci când TSPT conduce la pierderea capacității de muncă, intervine regimul pensiei de invaliditate reglementat de legislația pensiilor militare de stat, care prevede un tratament diferențiat în funcție de existența legăturii de cauzalitate cu serviciul militar.

Articularea acestor acte normative configurează un cadru în care afecțiunea psihică legată de misiuni poate fi recunoscută, tratată și compensată. Rămâne însă o distanță între recunoașterea drepturilor și organizarea unui parcurs coerent de identificare timpurie, tratament și reintegrare, distanță în care se inserează tocmai rolul asistentului social militar.

O dificultate specifică afecțiunilor psihice, comparativ cu cele fizice, privește stabilirea legăturii de cauzalitate. Spre deosebire de o rană vizibilă, TSPT nu lasă urme obiective, imediat constatabile, iar debutul său întârziat poate complica demonstrarea legăturii cu serviciul. Legea nr 168/2020 răspunde acestei dificultăți prin instituirea unei proceduri de expertiză care implică deopotrivă comisii medico-militare, medicul de medicina muncii și specialistul în sănătate mintală. Această arhitectură procedurală reprezintă un progres important, întrucât recunoaște natura specifică afecțiunii psihice și evită reducerea ei la criterii concepute pentru vătămările fizice. Totuși, eficacitatea procedurii depinde de accesul efectiv al persoanei la evaluare, acces care poate fi obstrucționat tocmai de stigmatizarea și de evitarea documentată de cercetare.

Cadrul legal aliat: standardul NATO AMedP-8.10

La nivel aliat, sănătatea mintală a personalului a fost obiectul unei activități susținute de standardizare. Standardul NATO Amed P-8.10- A PSYCHOLOGICAL GUIDE FOR LEADERS ACROSS THE DEPLOYMENT CYCLE/2019, ghid psihologic destinat liderilor sintetizează cunoașterea cumulată și o transpune în orientări practice pentru comandanți. Documentul recunoaște explicit faptul că dilemele morale și agresiunile pot conduce la probleme de sănătate mintală, inclusiv la TSPT, încadrate sub conceptul de leziune morală, și subliniază rolul pregătirii realiste și a leadershipului în prevenția consecințelor psihice.

Importanța acestui standard pentru asistența socială militară constă în plasarea responsabilității pentru sănătatea mintală nu exclusiv în sarcina serviciilor medicale, ci în întregul lanț de comandă și de sprijin. Modelul aliat tratează reziliența psihică drept un multiplicator de forță și un obiectiv al pregătirii, ceea ce legitimează intervenția psiho-socială ca dimensiune a eficacității operaționale și nu ca o preocupare marginală.

În literatura de specialitate, o analiză comparativă a sistemelor aliate de sprijin de sănătate mintală a relevat o convergență spre modele multidisciplinare și intervenții timpurii în proximitatea teatrului de operații conform Buhler et.al, (2014). Armatele aliate au renunțat la tehnica debriefingului psihologic standardizat după incidentele critice, în favoarea unor mecanisme de sprijin conduse de lideri și de camarazi, cu profesionistul în rol de facilitator.

Acestea au dezvoltat capacitatea de a oferi sprijin psihic de proximitate, aproape de linia frontului, orientat spre identificarea timpurie și revenirea rapidă la activitatea normală în cadrul unității. Și toate au constituit echipe multi-disciplinare de sprijin cuprinzând: psihiatri, psihologi, asistenți sociali militari, asistenți medicali specializați și preoți/capelani. Această

configurație multi-disciplinară confirmă rolul asistentului social militar în arhitectura sprijinului de sănătate mintală, alături de profesioniștii clinici și nu în subordinea exclusivă a acestora.

Rolul asistenței sociale militare

Din analiza precedentă rezultă că TSPT este o problemă prin excelență bio-psiho-socială, fapt care conferă asistenței sociale militare un rol distinct și complementar asistenței medicale. Acest rol se articulează pe întregul ciclu la traumei, de la prevenție până la reintegrare (Munson & Daley, 2013).

În faza de prevenție, asistentul social militar contribuie la consolidarea rețelelor de sprijin și la educația privind sănătatea mentală, în acord cu modelul aliat al dezvoltării și perfecționării rezilienței. În faza de identificare timpurie, el este adesea primul profesionist care observă semnele dificultății (interacțiunea cu familia în problemele de funcționare cotidiană) și care poate orienta persoana către evaluarea de specialitate, depășind bariera stigmatizării printr-o abordare nestigmatizantă. În faza de intervenție, asistentul social militar asigură coordonarea serviciilor, sprijinul familiei și medierea cu instituțiile statului. În faza de reintegrare, el acompaniază revenirea la funcționarea profesională și socială, valorificând drepturile recunoscute de lege.

Munson și Daley (2013) au evidențiat faptul că sprijinul familiei merită o atenție specială, întrucât TSPT nu afectează doar persoana militarului ci întregul mediu familial, care va fi expus la iritabilitatea, retragerea emoțională și perturbările de funcționare ale celui afectat. Familia este simultan o resursă esențială de sprijin și o victimă secundară a tulburării. Intervenția asistentului social militar asupra familiei (informare, consiliere, mediere) contribuie atât la bunăstarea familie, cât și la recuperarea persoanei întrucât calitatea sprijinului familial constituie, așa cum arată cercetarea, un factor protectiv documentat.

Această dublă natură a familie ca resursă și victimă necesită o intervenție echilibrată. Pe de o parte, familia trebuie sprijinită să înțeleagă natura tulburării pentru a interpreta corect manifestările celui afectat și a nu personaliza retragerea sau iritabilitatea acestuia. Pe de altă parte, membrii familiei au ei înșăși nevoie de sprijin, întrucât conviețuirea cu o persoană afectată de TSPT generează stres, epuizare și uneori traumatizare secundară. Copiii sunt deosebit de vulnerabili, iar perturbarea climatului familial poate avea consecințe pe termen lung asupra dezvoltării lor emoționale. O intervenție psiho-socială completă va lua în considerare întregul sistem familial și nu doar persoana diagnosticată.

Un al doilea domeniu de intervenție privește medierea cu instituția militară. Persoana afectată de TSPT se confruntă adesea cu temeri legate de cariera sa: teama de a fi declarat inapt, de a–și pierde funcția sau de a fi marginalizat. Asistentul social militar poate media între nevoia de tratament și interesul menținerii în serviciu, valorificând prevederile legale care permit încadrarea sau reîncadrarea în funcții adaptate situației medicale. Această mediere este esențială pentru depășirea barierei stigmatizării, întruncât transformă solicitarea de ajutor dintr-un risc de carieră într-un demers compatibil cu continuarea acesteia.

Pe baza acestei analize, pot fi formulate câteva direcții de consolidare:

a) Instituționalizarea rolului asistentului social militar în lanțul de identificare și sprijin dincolo de structurile medicale;
b) Integrarea componentei familiale în intervenția pentru traumă;
c) Formarea profesioniștilor în recunoașterea timpurie și în abordarea nestigmatizantă;

d) Dezvoltarea cercetării autohtone pentru a fundamenta politicile, pe baza unor date privind segmentul de populația militară românească (în prezent insuficient documentată).

Discuții

Cercetarea efectuată evidențiază faptul că TSPT constituie o problemă complexă și nu poate fi privită exclusiv doar prin perspectivă medicală. Literatura de specialitate a confirmat că TSPT este influențată de o combinație de factori pre-, peri- și post-traumatici, iar evoluția acesteia depinde nu numai de gravitatea experienței traumatice, ci și de resursele individuale și instituționale disponibile dupa încheierea misiunii.

De asemenea, un aspect deosebit de relevant rezultat din prezentul studiu îl constituie importanța sprijinului social post-misiune. Astfel, spre deosebire de factorii de risc asociați experienței traumatice, care nu mai pot fi modificați după producerea evenimentului, calitatea sprijinului oferit de familie, camarazi și instituție poate fi influențat prin programe și politici sociale specifice, ceea ce impune necesitatea implementării și dezvoltării unor mecanisme instituționale de monitorizare și sprijin pe termen mediu și lung pentru personalul revenit din teatrele de operații.

Adoptarea Legii nr. 168/2020, care recunoaște explicit sindromul de stres post-traumatic ca afecțiune dobândită în legătură cu participarea la misiuni și operații militare evidențiază un progres important în legislația românească. Cu toate acestea, din analiza studiului rezultă existența unei diferențe între recunoașterea formală și existența unor mecanisme funcționale de intervenție psiho-socială. Astfel, deși cadrul normativ oferă posibilitatea recunoașterii TPST și a acordării unor beneficii specifice, acesta nu configurează în mod explicit un traseu integrat de identificare timpurie, intervenție și reintegrare socială.

În contextul prezentat, rolul asistenței sociale militare dobândește o relevanță deosebită. Dacă din experiența statelor membre ale Aliantei Nord-Atlantice rezultă faptul că intervențiile eficiente în domeniul sănătății mintale sunt realizate prin echipe multidisciplinare în care asistentul social militar ocupă o poziție complementară psihologului și medicului psihiatru, în România, asistența socială militară nu beneficiază de o reglementare distinctă și nici de recunoaștere ca ocupație în Clasificarea Ocupațiilor din România, ceea ce poate limita dezvoltarea unor servicii specializate creșterii bunăstării psho-sociale a militarilor, veteranilor și familiilor acestora. Cu atât mai mult, cu cât ocupația de asistent social în sectorul militar este reglementată și definită în Clasificarea europeană a aptitudinilor/competențelor, calificărilor şi ocupaţiilor (n.d.), cod ESCO 2635.3.19:

> Asistenții sociali în sectorul militar oferă asistență familiilor pentru a face față plecării în armată a unui membru al familiei, sprijinindu-le în procesul de acomodare cu plecarea și revenirea membrului familiei. Ajută adolescenții să se confrunte cu teama de a-și pierde părinții aflați în slujba armatei sau de a nu-și recunoaște părinții la întoarcere. Asistenții sociali în sectorul militar ajută veteranii să se readapteze la viața civilă și să-și gestioneze suferințele, tulburările cauzate de traumatisme sau durerea resimțită.

Limitele cercetării

Cercetarea efectuată prezintă anumite limite care pot conduce la o interpretare obiectivă a rezultatelor. Astfel, o mare parte a datelor epidemiologice disponibil provin din spațiul nord-

american și britanic, iar transferabilitatea acestora la contextul militar românesc trebuie realizată cu prudență. De asemenea, o limitare importantă o poate reprezenta și lipsa unor studii sistematice cu privire la prevalența TSPT în rândul personalului militar român, ceea ce impune necesitatea dezvoltării cercetării autohtone în acest domeniu.

Concluzii

Tulburarea de stres post-traumatic reprezintă o consecință majoră a traumei operaționale, cu un impact profund asupra personalului militar, a veteranilor și a familiilor acestora. Cercetarea internațională evidențiază o prelevanță variabilă condiționată de factori pre-, peri-, post-traumatici, dintre care sprijinul post-misiune și reducerea stigmatizării se dovedesc determinante și totodată modificabile prin intervenție.

Dreptul românesc, prin Legea nr 168/2020, oferă un temei solid de recunoaștere a tulburării de stres post-traumatic ca afecțiune legată de serviciul militar, asimilând vătămarea psihică celei fizice și deschizând accesul la drepturi și la tratament. Acest cadru de recunoaștere rămâne însă insuficient articulat cu un parcurs structurat de identificare timpurie, intervenție psiho-socială și reintegrare, în care asistentul social militar este chemat să joace un rol central.

Consolidarea răspunsului la TSPT presupune integrarea celor trei perspective analizate (clinic, juridic și psiho-social) într-un model coerent de intervenție, precum și dezvoltarea cercetării autohtone. O agendă de cercetare viitoare ar trebuie să includă studii epidemiologice asupra personalului militar român și evaluarea eficacității unor intervenții psiho-sociale adaptate contextului național, contribuind astfel la fundamentarea de dovezi a politicilor de sănătate mintală în sistemul de apărare.

Dincolo de dimensiunea tehnică abordarea TSPT angajează o chestiune de ordin etic și cultural. Recunoașterea afecțiunii psihice ca vătămare legitimă, asimilabilă celei fizice, reprezintă un pas în direcția eliminării stigmatizării care, paradoxal, îi împiedică tocmai pe cei mai afectați să solicite ajutor.

Cultura militară, întemeiată pe reziliență și controlul de sine, poate transforma suferința psihică într-o sursă de rușine, depășirea acesteia neputând fi realizată doar prin norme juridice, fiind necesară o schimbare a atitudinii întregii instituții militare.

Deși asistența socială militară nu este reglementată în prezent ca specializare distinctă în legislația românească și nici nu este recunoscută ca ocupație în Clasificarea Ocupațiilor din România, analiza evidențiază necesitatea dezvoltării acestui domeniu de practică în cadrul sistemului de apărare, ordine publică și securitate națională. Ropan (2026) accentuează faptul că statul „trebuie să își modernizeze sistemele de sprijin pentru abordarea corespunzătoare a nevoilor emergente ale veteranilor”.

Asistența socială militară, prin contactul său direct cu persoana afectată și cu familia acesteia, ocupă o poziție privilegiată în această transformare culturală, contribuind la construirea unui mediu în care căutarea ajutorului este percepută ca un act de responsabilitate și nu ca o slăbiciune/ vulnerabilitate. „Asistentul social militar are un rol esențial în acest proces, funcționând ca liant între instituții, familie și minor, în vederea reconstrucției identitare și sociale a acestuia” (Oprina, 2026, p.6)

Bibliografie

American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders* (5th ed.). American Psychiatric Publishing. https://doi.org/10.1176/appi.books.9780890425596

Buhler, A., Fear, N. T., Greenberg, N., & van der Wal, S. (2014). Deployment-related mental health support: Comparative analysis of NATO and allied ISAF partners. *European Journal of Psychotraumatology, 5*(1), Article 23732. https://doi.org/10.3402/ejpt.v5.23732

Bârzan, C. A. (2026). Protecția drepturilor veteranilor din teatrele de operații: cadrul juridic și perspective de reformă. *Revista Română de Asistență Socială Militară, 1*(1). https://doi.org/10.5281/zenodo.18935019

Comisia Europeană. (n.d.). *Asistent social în sectorul militar / asistență socială în sectorul militar*. ESCO – European Skills, Competences, Qualifications and Occupations. https://esco.ec.europa.eu/ro/classification/occupation_main

Hoge, C. W., Castro, C. A., Messer, S. C., McGurk, D., Cotting, D. I., & Koffman, R. L. (2004). Combat duty in Iraq and Afghanistan, mental health problems, and barriers to care. *New England Journal of Medicine, 351*(1), 13–22. https://doi.org/10.1056/NEJMoa040603

Munson, C., & Daley, J. G. (2013). *Social work practice in the military* (Rev. ed.). Routledge.

North Atlantic Treaty Organization. (2019). *A psychological guide for leaders across the deployment cycle* (Standard AMedP-8.10, EDA V1 E 2565). Centrul de Excelență pentru Medicină Militară al NATO. https://www.coemed.org/files/stanags/03_AMEDP/AMedP-8.10_EDA_V1_E_2565.pdf

Oprina, C. (2026). Copiii „războiului" de acasă: Studiu de caz privind impactul absenței parentale și al stresului post-misiune asupra devianței juvenile în familii de militari. *Revista Română de Asistență Socială Militară, 1*(2). https://doi.org/10.5281/zenodo.20554746

Parlamentul României. (1995). Legea nr. 80 din 11 iulie 1995 privind statutul cadrelor militare. *Monitorul Oficial al României*, Partea I, nr. 155 din 20 iulie 1995. https://legislatie.just.ro/Public/DetaliiDocument/6151

Parlamentul României. (2006). Legea nr. 384 din 10 octombrie 2006 privind statutul soldaților și gradaților profesioniști. *Monitorul Oficial al României*, Partea I, nr. 868 din 24 octombrie 2006. https://legislatie.just.ro/Public/DetaliiDocument/76140

Parlamentul României. (2015). Legea nr. 223 din 24 iulie 2015 privind pensiile militare de stat. *Monitorul Oficial al României*, Partea I, nr. 556 din 27 iulie 2015. https://legislatie.just.ro/Public/DetaliiDocument/170060

Parlamentul României. (2020). Legea nr. 168 din 7 august 2020 pentru recunoașterea meritelor personalului participant la acțiuni militare, misiuni și operații pe teritoriul sau în afara teritoriului statului român și acordarea unor drepturi acestuia, familiei acestuia și urmașilor celui decedat. *Monitorul Oficial al României*, Partea I, nr. 715 din 8 august 2020. https://legislatie.just.ro/Public/DetaliiDocument/228752

Rona, R. J., Burdett, H., Bull, S., Jones, M., Jones, N., Greenberg, N., Wessely, S., & Fear, N. T. (2016). Prevalence of PTSD and other mental disorders in UK service personnel by time since deployment: A meta-analysis. *BMC Psychiatry, 16*, Article 333. https://doi.org/10.1186/s12888-016-1049-y

Ropan, I. E. (2026). Responsabilități legale și etice în garantarea drepturilor veteranilor militari. *Revista Română de Asistență Socială Militară, 1*(1). https://doi.org/10.5281/zenodo.18913163

Xue, C., Ge, Y., Tang, B., Liu, Y., Kang, P., Wang, M., & Zhang, L. (2015). A meta-analysis of risk factors for combat-related PTSD among military personnel and veterans. *PLOS ONE, 10*(3), Article e0120270. https://doi.org/10.1371/journal.pone.0120270

4. Articole de sinteză

4.1 Post-Traumatic Stress Disorder (PTSD) in the Armed Forces: Diagnosis, Treatment, and Prevention

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Abstract
Post-traumatic stress disorder (PTSD) is a common problem among military and veterans, affecting between 8% and 25% of those exposed to combat. This article analyzes, in the form of a theoretical and clinical synthesis, the diagnostic criteria according to the DSM-5, the empirically validated treatment modalities and the prevention strategies specific to the military context. About 73% of veterans respond positively to trauma-centered psychotherapeutic approaches, such as Prolonged Exposure Therapy (PE) and Cognitive Processing Therapy (CPT), and SSRI-based drugs based on selective serotonin reuptake inhibitors reduce the risk of relapse by 80%. The paper also highlights the importance of prevention models (primary, secondary and tertiary) by highlighting the important role of military social assistance in supporting affected personnel and their families. This multidisciplinary structure acts as an essential psychosocial buffer, facilitating case

management, systemic support for military, veterans and their families, and post-mission reintegration.
Keywords: combat, diagnosis, military social work, prevention, PTSD, treatment, veteran.

1. INTRODUCTION

Service members and veterans frequently encounter traumatic experiences that can severely impact their mental health. Post-Traumatic Stress Disorder, commonly known as PTSD, develops following exposure to extreme events, such as combat operations, terrorist attacks, or severe accidents. This condition is not a sign of weakness, but rather a normal reaction of the human body to abnormal situations. Understanding PTSD is essential for military social workers, whose primary role is to support personnel and their families during difficult times.

International epidemiological studies reveal significant variations in PTSD prevalence, depending on the specific characteristics of the armed forces and their level of risk exposure:

- **Ethiopia:** affects approximately 22% of service members;
- **United States:** affects up to 25% of veterans exposed to combat;
- **United Kingdom:** affects 18% of service members wounded in combat;
- **Canada:** registers a rate of approximately 8% among military personnel

(Tedla et al., 2024; VA, n.d.).

These statistical disparities can be explained by the specific ways each military institution prepares its soldiers and supports them post-deployment. By comparison, within the general population, only about 6% of individuals develop PTSD during their lifetime, which clearly demonstrates the increased vulnerability generated by the military environment (Goldstein et al., 2016).

1.1. Research Hypotheses

Based on the specialized literature, the following working hypotheses were formulated:

- PTSD is more prevalent among service members exposed to combat compared to the general population;
- Trauma-focused cognitive-behavioral therapies exhibit high efficacy in reducing PTSD symptomatology;
- Pharmacotherapy based on selective serotonin reuptake inhibitors (SSRIs) contributes significantly to symptom reduction;
- Resilience-based prevention programs show limited effects and require further improvement;
- Military social work plays a critical role in the recovery of affected personnel, serving as an indispensable pillar in case management.

2. METHODOLOGY

The present paper is a narrative review of the literature, conducted through a critical analysis of scientific articles published in indexed international journals. The documentation process involved querying reference databases such as PubMed, PsycINFO, and the Cochrane Library, alongside consulting official reports published by the US Department of Defense (DoD) and the Department of Veterans Affairs (VA).

Studies published within the last 15 years addressing the specific diagnosis, prevention, and treatment of PTSD in the military context were selected. No primary field research or interviews were conducted; all information originates from peer-reviewed, previously published sources.

3. RESULTS AND DISCUSSION

3.1. Understanding PTSD and Its Identification: Clinical Presentation and Diagnostic Criteria according to the DSM-5

PTSD is a disorder that develops following exposure to a major trauma. The *Diagnostic and Statistical Manual of Mental Disorders* (DSM-5), used by clinicians and researchers worldwide, classifies the specific manifestations of this condition into four major symptom clusters:

- **Intrusion or re-experiencing:** the individual relives the traumatic event through nightmares, distressing memories, or flashbacks;
- **Avoidance:** the individual avoids places, people, or situations associated with the traumatic event;
- **Negative alterations in cognitions and mood:** feelings of guilt, profound sadness, or a loss of interest in previously enjoyed activities;
- **Hyperarousal and reactivity:** a state of constant alertness, disturbed sleep, irritability, and concentration difficulties.

Guina et al. (2016) point out that the modifications introduced by the DSM-5 in 2013 substantially altered the perspective on diagnosing PTSD. For instance, the requirement for an immediate emotional reaction (such as fear or helplessness) is no longer mandatory. Furthermore, indirect exposure to trauma, such as viewing graphic images from an attack scene, can now be taken into consideration. These changes have practical implications for service members, as the diagnosis influences both clinical treatment and eligibility for veteran benefits (p. 1).

3.2. Who is at Risk of Developing PTSD? Risk Factors and Resilience Predictors

Not all service members who experience traumatic events go on to develop PTSD. Risk factors identified in the literature include: female biological sex (women appear to be more vulnerable), direct combat participation, handling human remains, a high number of deployments (especially exceeding four), low individual resilience, lack of social support, and the co-occurrence of depression. A study conducted at a military hospital in Ethiopia showed that 22% of admitted service members met the criteria for PTSD; those with extreme combat exposure faced a risk nearly five times higher of developing the disorder compared to non-exposed personnel (Tedla et al., 2024).

Conversely, protective factors also play a major role. Pietrzak et al. (2010) demonstrated that psychological resilience and post-deployment social support protect against the onset of PTSD. Soldiers who have someone to rely on, and who receive active help from their families and communities, have a significantly higher chance of recovery without developing a chronic disorder. These findings underscore the crucial importance of social work within the military environment (p. 188).

3.3. PTSD Treatment: Psychotherapy versus Pharmacotherapy

PTSD treatment is broadly divided into two main categories: psychotherapy and pharmacotherapy. International clinical guidelines, such as the VA/DoD Clinical Practice

Guideline (2017), recommend three types of psychotherapy as first-line treatments: Prolonged Exposure (PE) therapy, Cognitive Processing Therapy (CPT), and Eye Movement Desensitization and Reprocessing (EMDR). These modalities have been rigorously tested across numerous studies and have proven effective in reducing symptoms for the majority of patients.

The largest comparative study to date was published by Sloan et al. (2022) in *JAMA Network Open*. The researchers compared PE and CPT among 916 American veterans across 17 medical centers. The results indicated that both therapies are highly effective, though PE demonstrated slightly better outcomes. Approximately 73% of participants in the PE group responded positively to treatment, compared to 66% in the CPT group. Furthermore, 40% of those treated with PE no longer met the diagnostic criteria for PTSD, compared to 32% in the CPT group. However, this difference was not statistically significant enough to declare one treatment definitively superior to the other. The authors concluded that the choice of therapy should ultimately align with patient preference.

Clinical Success Indicator	Prolonged Exposure Therapy (PE)	Cognitive Processing Therapy (CPT)
Positive treatment response rate	73%	66%
Full PTSD diagnostic remission rate	40%	32%

A major challenge highlighted by the study was the high dropout rate, as more than half of the participants discontinued treatment prematurely: 56% in the PE condition and 47% in the CPT condition. This emphasizes the urgent need for enhanced support systems to help service members remain engaged throughout the therapeutic process.

From a pharmacological perspective, the most widely utilized treatments are selective serotonin reuptake inhibitors (SSRIs), specifically sertraline and paroxetine. These medications are prioritized by the VA/DoD guidelines. Marshall et al. (2001) demonstrated that paroxetine significantly reduces symptoms of avoidance, hyperarousal, and re-experiencing in patients with chronic PTSD. In their study, 62% of those treated with paroxetine responded positively, compared to only 32% in the placebo group (p. 1982). Similarly, Davidson et al. (2001) showed that sertraline is highly effective in preventing relapse: only 5% of patients who continued sertraline treatment experienced a relapse, compared to 26% of those switched to a placebo. This represents an approximate 80% reduction in relapse risk (p. 1974).

3.4. PTSD Prevention: Resilience Programs

Preventing PTSD has become a primary objective for modern armed forces. In the United States, large-scale programs such as *Battlemind* and *Comprehensive Soldier Fitness* (CSF) have been implemented. *Battlemind* was designed as a post-deployment training program to help soldiers process their experiences and transition smoothly back into civilian life. While initial evaluations were promising, subsequent studies yielded mixed results. Adler et al. (2008) found that psychological group debriefing—a key component of *Battlemind*—does not reduce PTSD symptoms and may even exacerbate them in certain individuals (p. 253).

The *Comprehensive Soldier Fitness* (CSF) program, launched in 2009, stands as the most ambitious initiative of its kind, reaching over one million soldiers. The program incorporates resilience training, online learning modules, and periodic assessments. Nonetheless, the Institute of Medicine (2012), a prestigious US institution, critically evaluated the initiative and concluded that clear empirical evidence demonstrating that CSF prevents or reduces PTSD is lacking. The official report states that *"none of the DoD and VA programs have demonstrated evidence of effectiveness in preventing PTSD"* (Institute of Medicine, 2012, p. 97). This finding serves as an important cautionary note: prevention programs must be rigorously tested before being deployed at a systemic scale.

3.5. The Role of Military Social Work in Integrated Case Management

Military social workers hold a central role in the systemic management of PTSD. Rubin, Weiss, and Coll (2013), in the *Handbook of Military Social Work*, outline their core competencies: comprehensive knowledge of war-related trauma, a deep understanding of PTSD symptoms, familiarity with suicide prevention protocols, and the ability to coordinate care across multiple institutional boundaries. Social workers are frequently the first professionals to interface with a struggling service member or their family, positioning them uniquely to identify early warning signs of the disorder.

A concrete example of best practice is found within the US Army's Combat Stress Control (CSC) teams. These teams—composed of psychologists, psychiatrists, and social workers—operate directly within operational theaters to provide immediate psychological first aid to soldiers in distress. They conduct informational briefings, hold informal discussions with troops, and intervene rapidly during crises. The guiding principle is that assistance must be provided as close to the soldier as possible, as quickly as possible, and as simply as possible. This model could be highly translatable to the Romanian military context, where social workers can become an essential pillar of the institutional mental health infrastructure (Institute of Medicine, 2012, pp. 5-7).

3.6. Limitations of the Study

The current review paper has several methodological and conceptual limitations that must be considered when interpreting its conclusions:

- The paper does not rely on primary empirical research (such as field interviews, surveys, or original clinical trials) but is rather a narrative review of existing literature. Consequently, the validity of these findings is closely tied to the accuracy and methodological rigor of the reviewed studies;
- The overwhelming majority of the specialized literature and validated clinical guidelines (e.g., VA/DoD, Sloan et al., 2022) originate from the Anglo-Saxon space, particularly the United States;
- The direct generalizability of these models to the Romanian Armed Forces may be constrained by significant cultural, budgetary, structural, and institutional value system differences;
- There is a pronounced shortage of recent clinical and epidemiological studies published in international databases regarding PTSD incidence and case management among Romanian service members returning from international missions;
- The documentation and analysis process was strictly limited to studies published in Romanian and English within the last 15 years, leaving open the

possibility that relevant research published in other languages or restricted institutional reports was omitted.

4. CONCLUSIONS

The analysis of the specialized literature highlights that post-traumatic stress disorder remains a military public health issue of undeniable severity, affecting approximately 22% to 25% of personnel exposed to combat. Nevertheless, the clinical prognosis is significantly improved by the existence of highly effective therapeutic protocols: approximately 73% of veterans respond positively to cognitive-behavioral therapies (PE, CPT), and SSRI medications reduce relapse rates by roughly 80%.

Regarding prevention, resilience programs like *Comprehensive Soldier Fitness* have not yet demonstrated their intended efficacy and require further empirical evaluation.

Military social work plays an essential role across all stages of care: from the early identification of symptoms to treatment coordination and the long-term psychosocial reintegration of veterans. Social workers can contribute significantly to reducing the stigma surrounding mental health issues within the military, fostering a climate of trust where service members feel safe seeking help without fear of professional repercussions.

Looking forward, it is imperative to develop empirical studies tailored specifically to the cultural and institutional context of the Romanian Armed Forces, implement culturally optimized prevention programs, and increase investment in specialized trauma and psychosocial rehabilitation training for military social workers.

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6.REFERENCES

Adler, A. B., Litz, B. T., Castro, C. A., Suvak, M., Thomas, J. L., Burrell, L., ... Bliese, P. D. (2008). A group randomized trial of critical incident stress debriefing provided to U.S. peacekeepers. *Journal of Traumatic Stress, 21*(3), 253-263. doi: 10.1002/jts.20342. PMID: 18553407

Davidson, J., Pearlstein, T., Londborg, P., Brady, K. T., Rothbaum, B., Bell, J., Maddock, R., Hegel, M. T., & Farfel, G. (2001). Efficacy of sertraline in preventing relapse of posttraumatic stress disorder: Results of a 28-week double-blind, placebo-controlled study. *American Journal of Psychiatry, 158*(12), 1974-1981. https://doi.org/10.1176/appi.ajp.158.12.19

Department of Veterans Affairs/Department of Defense. (2017). *VA/DoD clinical practice guideline for the management of posttraumatic stress disorder and acute stress*

disorder (Version 3.0). Washington, DC: Department of Veterans Affairs/Department of Defense. https://www.healthquality.va.gov/guidelines/MH/ptsd/

Goldstein, R.B., Smith, S.M., Chou, S.P. *et al.* The epidemiology of DSM-5 posttraumatic stress disorder in the United States: results from the National Epidemiologic Survey on Alcohol and Related Conditions-III. *Soc Psychiatry Psychiatr Epidemiol* 51, 1137–1148 (2016). https://doi.org/10.1007/s00127-016-1208-5

Guina, J., Welton, R.S., Broderick, P.J. *et al.* DSM-5 Criteria and Its Implications for Diagnosing PTSD in Military Service Members and Veterans. *Curr Psychiatry Rep* 18, 43 (2016). https://doi.org/10.1007/s11920-016-0686-1

Institute of Medicine. (2012). *Treatment for posttraumatic stress disorder in military and veteran populations: Initial assessment*. Washington, DC: National Academies Press. https://www.nationalacademies.org/read/18724/chapter/1#v

Marshall, R. D., Beebe, K. L., Oldham, M., & Zaninelli, R. (2001). Efficacy and safety of paroxetine treatment for chronic PTSD: A fixed-dose, placebo-controlled study. *American Journal of Psychiatry, 158*(12), 1982-1988. https://doi.org/10.1176/appi.ajp.158.12.1982

Pietrzak, R. H., Johnson, D. C., Goldstein, M. B., Malley, J. C., Rivers, A. J., Morgan, C. A., & Southwick, S. M. (2010). Psychosocial buffers of traumatic stress, depressive symptoms, and psychosocial difficulties in veterans of Operations Enduring Freedom and Iraqi Freedom: The role of resilience, unit support, and postdeployment social support. *Journal of Affective Disorders, 120*(1–3), 188–192. https://doi.org/10.1016/j.jad.2009.04.015

Rubin, A., Weiss, E. L., & Coll, J. E. (2013). *Handbook of military social work*. Hoboken, NJ: John Wiley&Sons.

Sloan, D. M., Marx, B. P., Lee, D. J., Resick, P. A., & the STRONG STAR Consortium. (2021). Comparison of prolonged exposure vs cognitive processing therapy for treatment of posttraumatic stress disorder among US veterans: A randomized clinical trial. *JAMA Network Open, 4*(10), e2136921. https://doi.org/10.1001/jamanetworkopen.2021.36921

Tedla, A., Asnakew, S., Legas, G., Munie, B. M., Tareke, M., & Beka, M. (2024). Post-traumatic stress disorder among military personnel admitted at the Northwest Command Level Three Military Hospital, Bahir Dar, Ethiopia, 2022: An institution-based cross-sectional study. *Frontiers in Psychiatry, 15*, Article 1410630. https://doi.org/10.3389/fpsyt.2024.1410630

U.S. Department of Veterans Affairs. (n.d.). *How common is PTSD in veterans?* https://www.ptsd.va.gov/understand/common/common_veterans.asp

5. Articole de opinie

5.1 Asistența socială militară - factor esențial în pregătirea pentru război

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Notă editorială: Articolele de opinie publicate în *Revista Română de Asistență Socială Militară* exprimă exclusiv punctele de vedere ale autorilor și nu reprezintă în mod necesar poziția redacției, a instituțiilor de apartenență ale autorilor sau a colaboratorilor revistei.

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Afirmația din titlu poate părea provocatoare la prima vedere, însă argumentele prezentate în continuare urmăresc să evidențieze complexitatea și necesitatea asistenței sociale militare în asigurarea componentei umane în situații de conflict.

Dacă pornim de la definiția consacrată în dicționare, constatăm că asistența socială, în sens larg, este o disciplină academică și o profesie fundamentată pe practică. Din această perspectivă se justifică existența sistemului de formare în domeniu, prin facultățile de profil din universitățile din țară. Totodată, instituțiile specializate din acest sector pun în aplicare, sub coordonarea și finanțarea statului, principiile și obiectivele specifice acestei definiții.

Astfel, asistența socială se preocupă de indivizi, familii, grupuri, comunități și de societate în ansamblu, într-un demers orientat spre satisfacerea nevoilor de bază, îmbunătățirea funcționării sociale, stimularea autodeterminării, asumarea responsabilității colective, menținerea sănătății optime și promovarea bunăstării generale.

Din această definiție, consider important să ne concentrăm asupra ideii de „îmbunătățire a funcționării sociale". Funcționarea socială poate fi înțeleasă ca fiind capacitatea unui individ de a-și îndeplini rolul social în raport cu sine, cu mediul social imediat și cu societatea în ansamblu.

Asistența socială militară, consolidată și dezvoltată în cadrul Universității de Vest din Timișoara, reprezintă o realizare academică importantă. Dacă inițial aceasta s-a concentrat asupra dezvoltării conceptului prin analiza situației veteranilor din teatrele de operații, a pensionarilor militari și a familiilor acestora, în perspectivă este necesară extinderea lui astfel încât să devină o componentă relevantă în mobilizarea și motivarea resursei umane pentru pregătirea în eventualitatea unui conflict armat.

O scurtă precizare se impune și în legătură cu utilizarea termenului „apărare" în domeniu, care, în opinia mea, își pierde treptat adecvarea în contextul actual. Evoluțiile de după 1990, inclusiv transformările din sfera conflictelor armate, a strategiilor geostrategice și a politicilor militare ale statelor europene și ale structurilor NATO, au reconfigurat substanțial

sensul acestui concept. Într-o perspectivă istorică, merită reamintit faptul că, înainte de Al Doilea Război Mondial, multe state aveau ministere de război, instituții orientate explicit spre pregătirea pentru conflict.

După anul 1990, pregătirea pentru război a cunoscut un proces accentuat de diminuare. În statele Europei de Vest, iar ulterior și în alte spații europene, s-au adoptat măsuri de reducere a efectivelor militare active și a volumului de tehnică de luptă, cu efecte resimțite și în țările foste socialiste.

Reducerea succesivă a numărului de militari, în special a cadrelor, a afectat semnificativ potențialul militar al statului. La aceasta s-a adăugat, spre sfârșitul ultimului deceniu al secolului al XX-lea, renunțarea la serviciul militar obligatoriu, fapt care a modificat profund mecanismele tradiționale de organizare a mobilizării, ce trebuie activate în condițiile unei amenințări de război.

Renunțarea la serviciul militar obligatoriu a însemnat și transformarea raportului dintre cetățean și stat în privința pregătirii pentru apărare și mobilizare, până la o anumită limită de vârstă stabilită prin lege.

Trecerea la o armată complet profesionistă și suspendarea serviciului militar obligatoriu au generat provocări structurale importante în ceea ce privește constituirea, pregătirea și menținerea rezervei operaționale.

În prezent, prin participarea la structurile NATO, Armata Română funcționează într-un cadru aliat, iar instruirea comună cu armatele altor state, participarea la teatre de operații și redistribuirea anumitor unități militare se desfășoară în logica angajamentelor asumate în cadrul organizației.

În actualul sistem, o parte a rezerviștilor chemati la instruire depășesc deja vârsta de 50 de ani. Recent, în spațiul public au fost prezentate exerciții de rechemare și reinstruire a unor rezerviști, pentru acomodarea cu noile echipamente și proceduri. Situația ridică întrebări legitime privind capacitatea reală de mobilizare și adaptare a resursei umane disponibile.

Rezultă astfel necesitatea elaborării unui cadru legislativ și instituțional care să permită, în condiții clare și previzibile, pregătirea tinerilor pentru îndeplinirea obligațiilor legale privind apărarea națională. Aceasta nu este o sarcină simplă, iar modul în care tema este abordată la nivel strategic și administrativ merită o atenție sporită.

Războiul din Ucraina, reconfigurarea priorităților de securitate în Europa și relansarea industriei de apărare au determinat numeroase state să adopte măsuri de consolidare a capacității de apărare și de pregătire a resursei umane. În acest context, pregătirea forței umane pentru situații de conflict devine o preocupare majoră.

Deoarece problema depășește cadrul național și presupune cooperare între state aliate, sistemul de asistență socială militară trebuie conceput într-o formă adaptată noilor realități. Acesta trebuie să păstreze specificul național, dar și să poată fi integrat într-un cadru european și aliat. Complexitatea subiectului impune cercetare interdisciplinară, la care să participe atât instituțiile militare, cât și cele civile, pentru construirea unui model coerent de asistență socială militară în condiții de conflict.

În paralel, investițiile în armament și tehnică de luptă sunt deja vizibile la nivel european. Alocările bugetare și instrumentele financiare disponibile sunt direcționate tot mai mult spre contracte de apărare, cu efecte economice inegale de la o țară la alta. În cazul României, beneficiile industriale și tehnologice directe ale acestor procese rămân încă limitate.

Sistemul de pregătire pentru război, în funcție de contextul internațional, poate fi structurat în mai multe variante.

O primă variantă este cea existentă în prezent: statul menține o armată activă finanțată de la buget, iar pregătirea societății civile este orientată spre apărare. În acest cadru, Armata Română funcționează ca parte a forțelor NATO, iar instruirea este construită pe tehnica și procedurile compatibile cu standardele alianței. În asemenea condiții, deciziile naționale în domeniul securității sunt puternic influențate de angajamentele și mecanismele politice europene și euroatlantice.

În această variantă, asistența socială militară rămâne, în esență, o componentă specializată a sistemului social național, fără transformări majore de substanță.

A doua variantă este mult mai complexă și presupune, în opinia mea, o abordare mai apropiată de cerințele reale ale mobilizării pentru apărare. În această logică, componenta umană trebuie considerată esențială: tehnica și armamentul nu au valoare operațională fără personal pregătit, instruit și capabil să le utilizeze eficient. În procesul de recrutare și pregătire, tinerii au un rol prioritar.

Combatanții care au depășit vârsta de 50 de ani, chiar dacă pot fi mobilizați în baza obligațiilor legale și a jurământului militar, se integrează mai dificil în cerințele luptătorului modern. O primă limitare ține de faptul că mulți dintre ei au fost instruiți pe tehnică militară și armament care nu mai corespund în prezent standardelor operaționale actuale. O a doua limitare este reprezentată de constrângerile fizice și sociale specifice acestei categorii de personal. În acest context, tinerii reprezintă principalul potențial uman pentru constituirea sistemului de pregătire pentru război.

Sunt necesare cel puțin două etape distincte. Prima etapă este cea a pregătirii militare, asemănătoare, în linii generale, stagiului militar. Aceasta este indispensabilă. Succesul într-un conflict armat nu poate fi construit pe baza unor efective nepregătite, trimise în teatru de operații fără instruirea necesară.

Tinerii trebuie motivați nu doar prin stimulente financiare, ci și prin măsuri de asistență socială militară. Cadrul legislativ aferent acestei componente trebuie să fie suficient de clar și atractiv pentru a susține disponibilitatea de înrolare și participarea la pregătire.

Până în prezent, în condițiile în care opțiunile profesionale ale tinerilor s-au diversificat, iar interesul pentru cariere militare s-a modificat, motivația tradițională bazată exclusiv pe patriotism nu mai poate fi considerată suficientă. În contextul integrării europene și al globalizării, mecanismele clasice de motivare trebuie completate cu stimulente socio-economice concrete și cu garanții instituționale credibile.

Statul poate identifica și alte forme de sprijin și facilități, însă asistența socială militară rămâne un element nodal în pregătirea pentru conflict.

A doua etapă este mobilizarea pentru război, o etapă extrem de dificilă. Dacă prima etapă reușește să creeze un cadru atractiv pentru tineri, atunci statul poate obține disponibilitatea legală și morală necesară pentru înrolare și instruire. În lipsa acestei baze, mobilizarea devine mult mai dificilă. De aceea, facilitățile și măsurile de sprijin trebuie dezvoltate și diversificate. În acest proces, asistența socială militară are un rol important, atât în plan legislativ, cât și organizațional.

Există și o a treia variantă, costisitoare și nesigură din perspectiva coeziunii sociale necesare într-un conflict armat. Aceasta presupune completarea armatei regulate și a rezervelor mobilizabile cu personal contractual provenit din zone private de securitate. La prima vedere, această opțiune ar modifica relativ puțin structura asistenței sociale militare. În realitate, însă, ea ar putea genera costuri ridicate și dificultăți suplimentare privind coeziunea, loialitatea

instituțională și spiritul colectiv necesar într-un război de apărare. Din acest motiv, o asemenea soluție trebuie evaluată cu prudență.

Istoria României oferă și exemple relevante privind relația dintre sacrificiul militar și promisiunile sociale ale statului. Promisiunea regelui Ferdinand privind împroprietărirea soldaților întorși din Primul Război Mondial rămâne un reper semnificativ pentru modul în care statul poate construi încredere și disponibilitate pentru serviciul militar.

Închei cu o aspirație simplă: mai mult adevăr, mai multă responsabilitate și mai multă luciditate în raport cu prezentul.

6. Ghid de publicare pentru autori / Author Guidelines

6.1 Format articol

6.1.1 *Format și limbă / Format and Language*

RO: Materialele se transmit în format .doc / .docx, în limba română sau engleză. Pentru textul în română, diacriticele sunt obligatorii.	EN: Manuscripts must be submitted in .doc / .docx format, in Romanian or English. Proper grammar and clarity are required.

4.1.2 *Structura articolului / Article Structure*

- Dimensiune / Length: 4–8 pagini / pages.
- Formatare / Formatting: Times New Roman, 12 pt, spațiere 1,5 / 1.5 line spacing.
- Rezumat & Cuvinte-cheie / Abstract & Keywords: Obligatoriu în limba articolului; versiunea bilingvă (RO+EN) este puternic încurajată / *Required in the language of the manuscript; bilingual (RO+EN) is highly recommended.*
- Stilul de citare / Citations: Stilul / Style APA 7th Edition.
- Etică și integritate / Ethics & Integrity: Utilizarea instrumentelor de inteligență artificială generativă pentru redactarea conținutului științific este permisă numai dacă este declarată în mod explicit. Autorii rămân pe deplin responsabili pentru conținutul manuscrisului. / The use of generative AI tools is permitted only if fully disclosed by the authors. Authors remain fully responsible for the accuracy, originality, and integrity of their manuscript.

6.1.3 *Declarații obligatorii / Mandatory Statements*

Autorii au obligația de a insera la sfârșitul manuscrisului / *Authors are required to include the following at the end of the manuscript:*

Conflict de interese / Conflict of Interest: „Autorul declară că nu există niciun conflict de interese / *The author declares no conflict of interest.*”

Finanțare / Funding: „Cercetarea nu a primit finanțare specifică / *This research received no specific grant.*”

6.2 Politica de evaluare inter pares / Peer Review Policy

Toate manuscrisele transmise spre publicare în *Revista Română de Asistență Socială Militară* sunt supuse unui proces de evaluare inter pares de tip dublu anonim (double-blind peer review) / All manuscripts submitted for publication in the *Romanian Journal of Military Social Work* undergo a double-blind peer review process.

În cadrul acestui proces, identitatea autorilor nu este dezvăluită evaluatorilor, iar identitatea evaluatorilor nu este dezvăluită autorilor. Scopul procedurii este de a asigura imparțialitatea, obiectivitatea și calitatea științifică a articolelor publicate. / In this process, the authors' identities are concealed from the reviewers, and vice versa. The purpose of this procedure is to ensure impartiality, objectivity, and the scientific quality of the published articles.

După verificarea preliminară realizată de redacție, fiecare manuscris este transmis spre evaluare către cel puțin doi recenzori independenți, specializați în domeniul tematic al articolului. / Following a preliminary editorial screening, each manuscript is sent to at least two independent reviewers who specialize in the respective thematic field.

Criterii de evaluare:

- relevanța temei pentru domeniul asistenței sociale militare;
- originalitatea și contribuția științifică;
- rigoarea metodologică;
- claritatea și coerența argumentării;
- respectarea normelor etice și academice;

actualitatea și adecvarea bibliografiei.

Evaluation Criteria:

- relevance of the topic to the field of military social work;
- originality and scientific contribution;
- methodological rigor;
- clarity and coherence of the argumentation;
- compliance with ethical and academic standards;
- currency and adequacy of the references.

Rezultatul evaluării:

- acceptare fără modificări;
- acceptare cu modificări minore;
- reevaluare după modificări majore;

respingere.

Review Outcomes:

- accept without revisions;
- accept with minor revisions;
- reconsider after major revisions;
- reject.

Decizia finală privind publicarea aparține corpului de evaluatori științifici. / The final decision regarding publication rests entirely with the Peer-Review Board. La décision finale de publication est prise par le Comité d'évaluation scientifique (Peer-Review Board).

Durata estimată a procesului de evaluare este de 4–6 săptămâni. / The estimated peer-review period is 4–6 weeks.

6.3 Declarații și politici editoriale / Editorial Policies and Author Declarations

6.3.1 Drepturi de autor și licență (Copyright):

Autorii păstrează drepturile de autor asupra lucrărilor publicate. Prin trimiterea manuscrisului, autorii acordă *Revistei Române de Asistență Socială Militară* dreptul de primă publicare. Autorii sunt responsabili pentru conținutul lucrării.

Authors retain copyright of their published work. By submitting a manuscript, authors grant the Romanian Journal of Military Social Work the right of first publication. Authors are solely responsible for the content of their manuscripts.

6.3.2 Originalitatea manuscrisului / Originality of the Manuscript

Manuscrisul trebuie să fie original, să nu fi fost publicat anterior și să nu fie în curs de evaluare la o altă revistă.	Submitted manuscripts must be original, must not have been previously published, and must not be under consideration by another journal.

6.3.3 Datele autorului / Author Information

▪ nume complet; ▪ afilierea instituțională; ▪ ORCID (opțional); ▪ e-mail; ▪ autorul corespondent.	▪ full name; ▪ institutional affiliation; ▪ ORCID (optional); ▪ e-mail address; ▪ corresponding author	▪ nom complet; ▪ affiliation institutionnelle; ▪ ORCID (facultatif); ▪ adresse électronique; ▪ auteur de correspondance

6.3.4 Tabele și figuri / Tables and figures

Toate figurile și tabelele trebuie numerotate consecutiv și însoțite de titlu și sursa datelor, dacă este cazul.	All tables and figures must be numbered consecutively and include captions and source information where applicable.

6.3.5 References

Minimum 10–15 referințe bibliografice, dintre care majoritatea publicate în ultimii 10 ani (cu excepția lucrărilor clasice).	Minimum 10–15 bibliographic references, most of which were published in the last 10 years (excluding classic works).

6.3.6 Corespondența cu autorii

Toată corespondența privind manuscrisul se realizează prin e-mail.	All correspondence regarding the manuscript is done via email.

7. Tematici recomandate pentru autori / Recommended Topics for Authors

Următoarea listă are un caracter orientativ, fără a fi exhaustivă. Consiliul editorial primește cu interes articole de cercetare originale, articole de tip review, studii de caz, analize de politici și contribuții interdisciplinare care abordează asistența socială militară și domeniile conexe. / The following list is illustrative rather than exhaustive. The Editorial Board welcomes original research articles, review papers, case studies, policy analyses, and interdisciplinary contributions addressing military social welfare and related fields.

1. Asistență socială militară • Asistența socială militară: concepte, modele și practică profesională • Cadrul juridic al asistenței sociale militare în România și în statele membre NATO • Modele comparative internaționale de asistență socială militară • Protecția socială a personalului militar • Servicii sociale pentru personalul activ, veterani și pensionari militari	**1. Military Social Work** • Military social work: concepts, models, and professional practice • Legal framework of military social work in Romania and NATO member states • International comparative models of military social work • Social protection of military personnel • Social services for active-duty personnel, veterans, and military retirees

- Asistența socială în misiunile NATO, ONU și UE
- Cele mai bune practici în asistența socială militară
- Etica profesională în asistența socială militară

- Social work in NATO, UN, and EU missions
- Best practices in military social work
- Professional ethics in military social work

2. Familiile militarilor și sprijinul comunitar

- Reziliența familiei în contextul militar
- Suport psihosocial pentru familiile militarilor
- Consiliere pentru familii în timpul desfășurărilor militare
- Impactul desfășurărilor pe termen lung asupra soților/soțiilor și copiilor
- Provocări cu care se confruntă soții/soțiile militarilor în accesarea unui loc de muncă
- Relocarea și adaptarea familiei
- Crescerea copiilor în familiile militare
- Educația copiilor în familiile militare
- Sprijin comunitar și inițiative de voluntariat
- Echilibrul dintre viața profesională și cea familială în rândul personalului militar

2. Military Families and Community Support

- Family resilience in the military context
- Psychosocial support for military families
- Counseling for families during military deployments
- Impact of long-term deployments on spouses and children
- Challenges faced by military spouses in accessing employment
- Family relocation and adaptation
- Parenting in military families
- Education of children in military families
- Community support and volunteer initiatives
- Work–family balance among military personnel

3. Veterani, Reintegrare și Incluziune Socială

- Reintegrarea socială și profesională a veteranilor
- Prevenirea excluziunii sociale în rândul veteranilor
- Servicii de sprijin pentru militarii răniți
- Reintegrarea după pensionarea militară
- Politici de sprijin pentru veterani
- Studii de caz privind reintegrarea de succes

3. Veterans, Reintegration, and Social Inclusion

- Social and professional reintegration of veterans
- Prevention of social exclusion among veterans
- Support services for wounded service members
- Reintegration after military retirement
- Veteran support policies
- Successful reintegration case studies

4. Sănătate mintală, traumă și bunăstare

- Tulburarea de stres posttraumatic (PTSD): prevenire, diagnostic și tratament
- Reziliența psihologică în rândul personalului militar
- Gestionarea stresului și anxietății
- Promovarea sănătății mintale
- Prevenirea dependențelor
- Activitate fizică și stiluri de viață sănătoase
- Doliu în rândul familiilor militare
- Durerea nerezolvată la copiii militarilor căzuți în război
- Durerea nerezolvată la soții/soțiile militarilor căzuți în război
- Intervenții psihosociale pentru personalul militar, veterani și familiile acestora

4. Mental Health, Trauma, and Well-being

- Post-traumatic stress disorder (PTSD): prevention, diagnosis, and treatment
- Psychological resilience among military personnel
- Stress and anxiety management
- Mental health promotion
- Prevention of addictions
- Physical activity and healthy lifestyles
- Bereavement among military families
- Unresolved grief in children of fallen service members
- Unresolved grief in spouses of fallen service members
- Psychosocial interventions for military personnel, veterans, and their families

5. Leadership, Etică și Cultură Organizațională

- Leadership etic în organizațiile militare

5. Leadership, Ethics, and Organizational Culture

- Leadership militar
- Cultură organizațională în forțele armate
- Coduri de onoare și etică militară
- Egalitatea de gen și diversitatea în forțele armate
- Disciplina militară și valorile profesionale

- Ethical leadership in military organizations
- Military leadership
- Organizational culture in the armed forces
- Codes of honour and military ethics
- Gender equality and diversity in the armed forces
- Military discipline and professional values

6. Politici publice, legislație și protecție socială

- Politici publice care sprijină personalul militar și familiile acestuia
- Pensii militare
- Beneficii și drepturi sociale
- Accesul la asistență medicală și servicii sociale
- Evoluții legislative care afectează personalul militar
- Oportunități educaționale și programe de burse

6. Public Policy, Law, and Social Protection

- Public policies supporting military personnel and their families
- Military pensions
- Social benefits and entitlements
- Access to healthcare and social services
- Legislative developments affecting military personnel
- Educational opportunities and scholarship programmes

7. Securitate, Apărare și Provocări Militare Contemporane

- Securitatea regională a Mării Negre
- Strategiile NATO și apărarea regională
- Evoluția conflictelor armate contemporane
- Amenințări hibride
- Informații militare și securitate
- Protecția infrastructurii critice
- Cibersecuritate militară
- Rolul dronelor în războiul modern
- Dezinformare și propagandă

7. Security, Defence, and Contemporary Military Challenges

- Black Sea regional security
- NATO strategies and regional defence
- Evolution of contemporary armed conflicts
- Hybrid threats
- Military intelligence and security
- Protection of critical infrastructure
- Military cybersecurity
- The role of drones in modern warfare
- Disinformation and propaganda

8. Istorie militară și lecții învățate

- Istorie militară
- Lecții învățate din conflicte recente
- Analize tactice ale războiului contemporan
- Studii de caz militare istorice
- Analiza unor bătălii semnificative
- Portrete ale unor militari și veterani eroi

8. Military History and Lessons Learned

- Military history
- Lessons learned from recent conflicts
- Tactical analyses of contemporary warfare
- Historical military case studies
- Analysis of significant battles
- Portraits of distinguished military personnel and veterans

9. Educație, Dezvoltare Profesională și Cultură Militară

- Educație profesională pentru personalul militar
- Tranziție în carieră și reconversie profesională
- Învățare pe tot parcursul vieții
- Gestionarea timpului
- Comunicarea în cadrul familiilor militare
- Terminologie militară
- Recenzii ale literaturii militare
- Recenzii de documentare și filme militare

9. Education, Professional Development, and Military Culture

- Professional education for military personnel
- Career transition and professional reconversion
- Lifelong learning
- Time management
- Communication within military families
- Military terminology
- Military literature reviews
- Reviews of military documentaries and films

10. Interviuri, perspective și experiențe de teren
- Interviuri cu asistenți sociali militari
- Interviuri cu psihologi, medici și alți specialiști
- Interviuri cu soți/soții de militari
- Experiențe din misiunile militare
- Perspective ale veteranilor
- Practici inovatoare în asistența socială militară

10. Interviews, Perspectives, and Field Experiences
- Interviews with military social workers
- Interviews with psychologists, physicians, and other specialists
- Interviews with military spouses
- Experiences from military deployments
- Perspectives from veterans
- Innovative practices in military social work

11. Subiecte emergente
- Inteligența artificială și asistența socială militară
- Transformarea digitală a serviciilor sociale militare
- Schimbările climatice și operațiunile umanitare militare
- Asistența umanitară și răspunsul în caz de dezastre
- Implicațiile etice ale tehnologiilor militare emergente
- Provocări viitoare pentru bunăstarea socială militară

11. Emerging Topics
- Artificial intelligence and military social work
- Digital transformation of military social services
- Climate change and military humanitarian operations
- Humanitarian assistance and disaster response
- Ethical implications of emerging military technologies
- Future challenges for military social welfare

Rubrici permanente (opțional)

Jurnalul poate include și secțiuni recurente, cum ar fi:
- Articole de sinteza
- Articole de opinie
- Veteranul ediției
- Inovație în asistența socială militară
- Recenzii de cărți din domeniul asistenței sociale militare, securității și apărării
- Actualizări privind politicile publice și legislația în domeniul militar și al protecției sociale
- Rapoarte de conferințe și evenimente științifice din domeniul militar și al asistenței sociale
- Interviuri cu specialiști în asistență socială militară, psihologie, medicină militară și domenii conexe
- Studii de caz în asistența socială militară
- Exemple de bune practici în asistența socială militară
- Experiențe din misiuni și operații militare
- Perspective ale veteranilor și familiilor militarilor

Rubrics (optional)

The journal may also include recurring sections such as:
- Veteran of the Issue
- Innovations in Military Social Work
- Book Reviews in Military Social Work, Security, and Defence
- Policy and Legislative Updates in Military Affairs and Social Protection
- Conference and Scientific Event Reports in Military Affairs and Social Work
- Interviews with Experts in Military Social Work, Psychology, Military Medicine, and Related Fields
- Case Studies in Military Social Work
- Best Practices in Military Social Work
- Experiences from Military Missions and Operations
- Perspectives of Veterans and Military Families

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