

Comparative analysis of the reliability of assessing the psychogenic indicator of the mental health of conscripts using standard methods and by the method of vegetative resonance test

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The strategy of social development of the Armed Forces of the Russian Federation for the period up to 2020 determines that one of the goals and objectives is to preserve and strengthen the health of military personnel, civilian personnel of the Armed Forces, citizens dismissed from military service and their families [17].

The Concept for the Development of the Psychological Service of the Armed Forces of the Russian Federation for 2013–2020 defines the concept of mental health of the personnel of the Armed Forces, which is understood as the state of personnel characterized by mental well-being, resistance to the influence of psycho-traumatic factors [13].

In the Methodology for the work of commanders to preserve the mental health of military personnel, set out in the Appendix to the order of the Minister of Defense of the Russian Federation No. 440 dated September 25, 1998, it is determined that a mentally healthy soldier is mentally developed, sufficiently internally balanced, capable of mastering a military specialty, being in an organized military collective and to endure increased mental and physical stress without consequences for their health [12].

The problem of the mental health of servicemen has been considered in Russian military psychological theory and practice since the 1990s. The approaches are based on the borrowing of modern achievements in the theory and practice of psychology, medicine and related industries for the fulfillment of tasks by military personnel as intended [4].

As the interdisciplinary content analysis of national dissertation research for the period 1990–2015 has shown, the problem of mental health of conscripts is considered from the standpoint of psychological-acmeological, medico-psychiatric, physiological, biological, pedagogical, technical approaches, with a predominance of the psychological and psychiatric approach. To date, there is no single comprehensive approach to solving the problems of strengthening and maintaining the mental health of military personnel. Medical-psychiatric and psychological-acmeological approaches prevail.

In a direct formulation, the problem of the mental health of conscripts has been studied in isolated interdisciplinary studies.

The psychological component of the mental health problem is considered from the standpoint of the system-situational analysis of military activity and the activity approach.

The psychological approach develops the directions of psychoprophylaxis and psychocorrection of the mental health of conscripts.

It is proposed to clarify the priorities of the military psychologist's practical activities in the field of mental health problems of servicemen on the call: to shift the emphasis from the psychiatric paradigm of "mental health" to the medical and psychological "psychophysical health" within the competence of a particular specialist (Kruk V.M., 2005). Numerous experimental material confirms the constructiveness of this approach (Shvab N.F., 2004; Biryulya E.I., 2005; Oleinikova A.S., 2008; Kravtsova L.V., 2012, etc.) [6; 7; eight; nine].

Mental health is defined in terms of levels and the ratio of the "norm" to the class of situations. The levels of mental health of military personnel depend on factors and conditions of military service, personal characteristics of military personnel.

The structural components and features of mental health are: neuropsychic stability / instability; personal stability; adaptability.

The psychological stability of a warrior in the process of military activity is understood as a professional qualitative characteristic of his personality, conditioned by a system of interrelated personal qualities, professional-activity and socio-psychological factors. [eleven; 15; 16].

Based on the research of V.M. Kruk, we believe that the mental health of conscripts should be considered in the narrow and broad sense of the word. In the narrow one - as neuropsychic stability, the absence of signs of maladjustment. In a broad sense - as a state of well-being, which has a pronounced situational character. Depending on the situation, psychophysical health can deteriorate or improve and requires constant assessment. It is necessary to assess the most significant physical and mental stress and the degree of their impact on the mental health resource in order to understand how to influence, to carry out prevention to strengthen. Risk factors for disorders of psychophysical health are, in the narrow sense, the presence of signs of ill health, a certain predisposition to neuropsychological instability,

One of the main indicators of the mental health of conscripts is the psychogenic indicator.

In order to carry out a comparative analysis of the reliability of the assessment of the psychogenic indicator of the mental health of conscripts in the presented study, standard psychological methods and methods of electropuncture diagnostics are used (Table 1).

Table 1

Methods for assessing the psychogenic indicator of mental health conscripts

Mental indicator health	the study documents	observation	semi-structured interview	expert report	self-reports	psychological testing	survey	method consistent dynamic assessments (LEAP)	vegetative resonant test (ART)	biofunctional diagnostics (segmental diagnostics)
	standard psychological methods								electropuncture methods diagnostics	
Psychogenic						+			+	

As the analysis of the table shows. 1, the standard psychological methods are: examination of documents, observation, semi-structured interviews, expert reports, self-reports, psychological testing, survey, method of sequential dynamic assessment (SEA). The methods of electropuncture diagnostics are: the method of vegetative resonance test (ART) and the method of biofunctional segmental diagnostics (SRS). The methods of ART and SRS are implemented on the hardware and software complexes "IMEDIS" [2; fourteen].

Let us consider the data of the psychogenic indicator in accordance with such standard methods as psychological testing with the use of standardized methods to identify the levels of NPU, and the ART method (Table 2).

table 2

Psychogenic indicator and criteria for assessing mental health conscripts

Index mental health	Standard Methods (CM)	Method pointers vegetative resonance test (ART)		Criteria
		PV	PS	
Psychogenic	high levels of NPU scales, AS, MN, KP	-	-	high
	average levels of NPU scales, AS, MN, KP	1-2 USD	1-5 Art.	average
	low levels of NPU scales, AS, MN, KP	\$ 1-5	1-8 Art.	short

Abbreviated designations:

1. The names of the scales of the standardized methodology "Adaptability-02" (MLO) ": NPU - neuropsychic stability; AC - adaptive abilities; MN - moral normativity; KP - communicative potential).

2. The name of the pointers of the method of the vegetative resonance test (ART): PV - psycho-vegetative loads; PS - mental stress; cu - conventional units; Art. - degree). In order to identify high, medium and low criteria for the psychogenic indicator, the results of psychological testing are analyzed using such standardized methods as: "Forecast-02", "Adaptability-02" (MLO) ", "NPN-A-02 "and the ART method according to signs "Psychovegetative loads" and "Definition of mental state."

In accordance with the "Forecast-02" methodology, the high criterion includes (1st level of neuropsychic stability (9-10 stans)) and (2nd level of neuropsychic stability (6-8 stans)), the average criterion - (3rd level of neuropsychic stability (4-5 stans)), to a low criterion - (4th level of neuropsychic instability (1-3 stans)).

According to the methodology "Adaptability-02 (MLO)", a high criterion is characterized by the corresponding signs (1st level (9-10 stans) and 2nd level (6-8 stans) of neuropsychic stability and the data of the scales: adaptive abilities, moral normativity, communicative potential (6-10 stans); the average criterion is characterized (by the 3rd level (4-5 stans) of neuropsychic stability and the data of the scales: adaptive abilities, moral normativity, communicative potential (4-5 stans)); low criterion characterized by low indicators (level 4 (1-3 stans) of neuropsychic instability and the data of scales: adaptive abilities, moral normativity, communicative potential (1-3 stans)).

Characteristics of the results of the data according to the method "NPN-A-02" on the scales: neuropsychic stability (NPU), hysteria (I), psychasthenia (Ps), Psychopathy (Pn), paranoia (P), schizophrenia (III). The high criterion is characterized by the practical absence of relevant features (8-10 stans); medium - moderate severity of signs (4-7 stans);

low - significant severity of the corresponding signs (1-3 stans).

Psychogenic loads are determined by the ART method and include two types of burdens: psychovegetative loads (PV) and mental state determination (PS).

1. Psychovegetative loads (PV) are determined by indicators: from 1 to 5 conventional units; vegetative burdens of weak, medium, strong and very strong degrees; depressive disorders, endogenous psychoses and disorders between the endogenous, mental and external world.

2. The definition of the mental state (PS) is determined by indicators from 1 to 8 degrees.

A high criterion of the psychogenic factor in assessing the mental health of conscripts using the ART method is the lack of positive test results according to the test indicators "Psychovegetative loads" and "Determination of mental state."

The average criterion is characterized by the results of testing the test-indicator "Psychovegetative loads" (1-3 c.u. ; weak vegetative burdens) and 1-5 tbsp. test-pointer "Determination of mental state".

Low criterion - 1-5 conventional units; strong vegetative burdens of the test-index "Psychovegetative loads" and 1-8 tbsp. test-pointer "Determination of mental state". A low criterion of psycho-vegetative loads indicates a stressful state, general depression of the mental state, a tendency to depression, an insufficient degree of self-regulation skills, a pronounced limitation of mental resources, problems of psychophysical well-being, including those hidden or underestimated by the subject.

The ascertaining experiment was carried out in accordance with the methodological concept on the basis of the 1st Separate Rifle Guard Brigade of the Ministry of Defense of the Russian Federation (Moscow).

At the first stage of the ascertaining experiment, the problem was solved to identify the dynamics of the mental health of conscripts in different periods of military service. To carry out the ascertaining experiment under the conditions of a quasi-experiment, military personnel in the amount of 220 people are involved.

The passage of military service involves the allocation of 5 stages of adaptation of conscripts:

1. Preparatory stage - a course for a young soldier, preparation for taking the Oath (the first month of service at the Training Center).

2. The stage of primary adaptation - the distribution of military personnel who have taken the oath, by divisions, appointment to positions, preparation for duty on guard (the first three months after the call).

3. Stage of secondary adaptation - passing of service - 1st (winter) training period.

4. Stage of secondary adaptation - passing of service - 2nd (summer) period of training.

5. The stage of readaptation - the withdrawal of conscripts from the guard, preparation for transfer to the reserve.

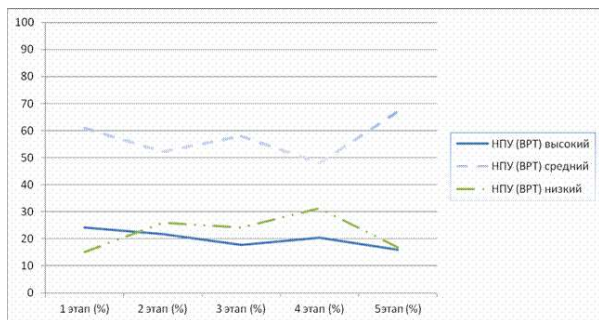
Four groups of servicemen are distinguished, differing in the degree of adaptation at the stage of mastering a military specialty and activities in the conditions of military service: servicemen with a high degree of adaptation, servicemen with an average and low degree of adaptation, as well as servicemen with maladjustment.

The data of neuropsychic stability (hereinafter referred to as NPU) are investigated as a conventional unit of the psychogenic indicator (Table 3).

Dynamics of psychogenic indicator data among conscripts at the stages of military service using standard methods and the ART method (the number of servicemen and their% ratio)

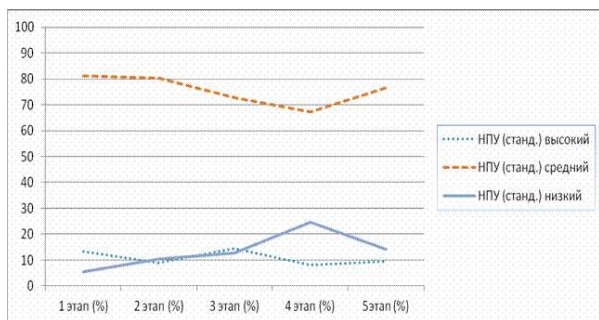
Methods	Data psychogenic indicator (NPU)	Stages of military service									
		Stage 1		Stage 2		Stage 3		Stage 4		Stage 5	
		w / sl	(%)	w / sl	(%)	w / sl	(%)	w / sl	(%)	w / sl	(%)
ART	high	53	24.1	48	21.8	39	17.7	45	20.5	35	15.9
	average	134	60.9	115	52.3	128	58.2	106	48.2	148	67.3
	short	33	15.0	57	25.9	53	24.1	69	31.3	37	16.8
	Total military personnel; %	220	100	220	100.0	220	100.0	220	100.0	220	100.0
CM	high	29	13.2	9.1	4.1	32	14.5	8.2	3.7	21	9.5
	average	179	81.3	177	80.4	160	72.8	148	67.3	168	76.4
	short	12	5.5	23	10.5	28	12.7	54	24.5	31	14.1
	Total military personnel; %	220	100.0	220	100.0	220	100.0	220	100.0	220	100.0

In fig. 1 shows the graphs of the dynamics of identifying high, medium and low indicators of mental stability of conscripts at different stages of military service using the ART method.



Rice. 1. Dynamics of indicators of mental stability of conscripts at different stages of military service using the ART method

In fig. 2 shows the graphs of the dynamics of identifying high, medium and low indicators of mental stability of conscripts at different stages of military service using standard methods.

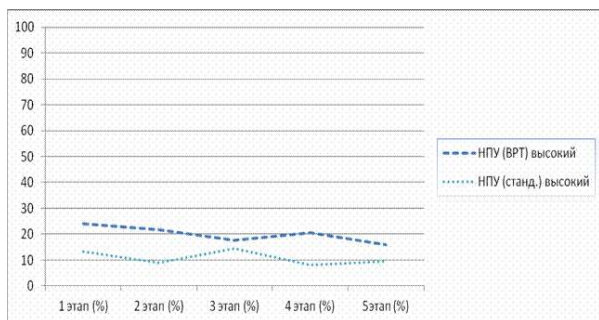


Rice. 2. The dynamics of identifying high, medium and low indicators of mental stability of conscripts at different stages of military service using standard methods

According to the results of a primary psychological study of the mental stability of a young recruitment of 220 people, at the first stage of military service, the following data were obtained:

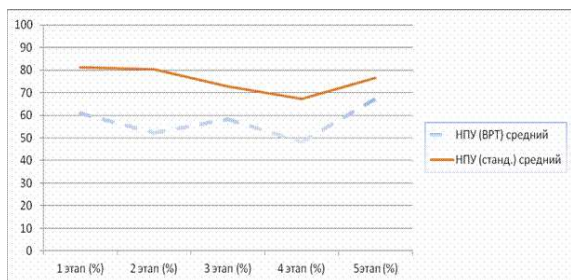
- 1.1. The ART method revealed: high rates of mental stability of conscripts - 24.1% (53 people); average indicators - 60.9% (134 people); low rates - 15% (33 people).
- 1.2. SM were identified: high rates - 13.2% (29 people); medium - 81.3% (179 people); low rates - 5.5% (12 people).
- At the second stage of military service, the indicators of the mental stability of conscripts were distributed as follows: 2.1. The ART method revealed: high rates - 21.8% (48 people); medium - 52.3% (115 people); low rates - 25.9% (57 people).
- 2.2. SM were identified: high rates - 9.1% (20 people); medium - 80.4% (177 people); low rates - 10.5% (23 people). At the third stage of military service (1st period of study):
- 3.1. The ART method revealed: high rates of mental stability of conscripts - 17.7% (39 people); average indicators - 58.2% (128 people); low rates - 24.1% (53 people).
- 3.2. SM were identified: high rates - 14.5% (32 people); medium - 72.8% (160 people); low rates - 12.7% (28 people). At the fourth stage of military service (2nd period of study):
- 4.1. The ART method revealed: high rates - 20.5% (45 people); average indicators - 48.2% (106 people); low rates - 31.1% (69 people).
- 4.2. SM were identified: high rates - 8.2% (18 people); medium - 67.3% (148 people); low rates - 24.5% (54 people). At the fifth stage of military service (preparation for transfer to the reserve):
- 5.1. The ART method revealed: high rates - 15.9% (35 people); medium - 67.3% (148 people); low rates - 16.8% (37 people).
- 5.2. SM were identified: high rates - 9.5% (21 people); medium - 76.4% (168 people); low rates - 14.1% (31 people).

Comparative graphical analysis of the dynamics of high indicators of mental stability of conscripts at different stages of military service (Fig. 3) allows us to state the following:



Rice. 3. Dynamics of high indicators of mental stability of conscripts at different stages of military service, identified by standard methods and the ART method

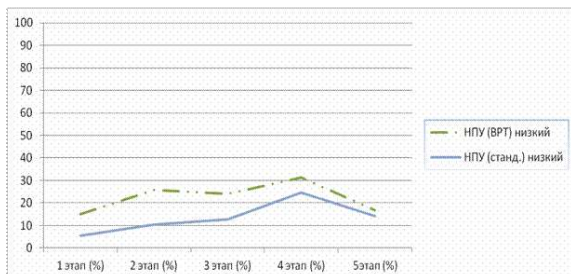
1. High indicators of the mental stability of servicemen, revealed by the ART and SM method, at all stages of military service correlate with the assessment criteria for low scales.
2. At all stages of service, approximately twice as many conscripts who showed high indicators of mental stability were identified using the ART method compared to with standard methods.
3. The maximum discrepancies in the number of servicemen who showed high indicators of mental stability were revealed at the 1st stage (ART - 24.1%; SM - 13.2%); on the 2nd stage (ART - 21.8%; SM - 9.1%); and at the 4th stage (ART - 20.5%; SM - 8.2%).
4. The minimum difference in the number of identified servicemen with high levels of mental stability is characteristic of the 3rd stage of service (ART - 17.7%; SM - 14.5%). An analysis of the graphs of the dynamics of the average indicators of the mental stability of conscripts at all stages of military service (Fig. 4) shows:
  1. Criteria for assessing the results of data on SM are high scales, according to the ART method - they vary from medium scales (from 1st to 4th stages) to high scales (5th stage of service).
  2. The number of servicemen who showed average indicators of mental stability identified by the SM exceeds the number of such servicemen identified by the ART method.



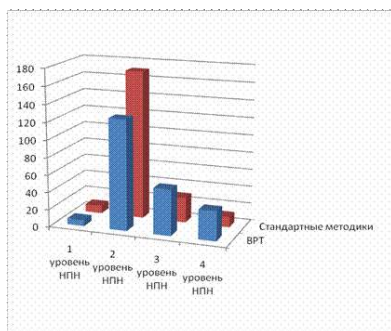
Rice. 4. Dynamics of average indicators of mental stability of conscripts at all stages of military service, identified by standard methods and the method of ART

3. The maximum number of average indicators at the 1st and 2nd stages was revealed by the SM (81.3% and 80.4%).
4. The minimum number of average indicators were identified at the 4th stage of SM (67.3%) and by the ART method (48.2%). Analysis of the graphs of the dynamics of low indicators of mental stability (Fig. 5) indicates that:
  1. The criteria for assessing low indicators for both SM and the ART method are low scales.
  2. At the 1st stage of military service, low indicators of mental stability are detected three times more by the ART method than by the standard methods (ART-15%; SM - 5.5%); at two times more at the 2nd stage (ART - 25.9%; SM - 10.5%) and at the 3rd stage (ART - 24.1%; SM - 12.7%).
  3. At the 2nd and 3rd stages of service, the low indicators of mental stability, revealed with the help of ART, are almost identical (25.9% and 24.1%), which gives grounds to assert about more reliable data in comparison with the data obtained by the CM, and the performance of a barrier function for the further distribution of military personnel, depending on mental health groups.
  4. There is a tendency towards an increase in low indicators of mental stability from the 3rd stage of service to the 4th, in connection with an increase in functional duties, responsibility and the loads of military service (at the 3rd stage: ART - 24.1%; SM - 12.7%; at the 4th stage: ART - 31.3%; SM - 24.5%).
  5. The research results are maximally approximated, both using standard methods and using the ART method, at the 4th stage (ART - 31.3%; SM - 24.5%) and at the 5th stage (ART - 16.8%; SM - 14.1%).

Thus, the most pronounced are the average indicators of the mental stability of conscripts, identified both by standard methods and by the ART method. Assessment criteria range from medium to high scales. High indicators of mental stability, revealed by the method of ART and SM, are relatively stable at all stages of military service. The evaluation criteria are low scales. Low indicators of mental stability are intermediate values. The evaluation criteria are also low scales.



Rice. 5. Dynamics of low indicators of mental stability of conscripts at all stages of military service, identified by standard methods and the ART method



Rice. 6. The quantitative and percentage ratio of identifying the levels of NHL of conscripts by the ART method and standard methods. Level 1 NPU: ART method - 7 (3.2%), std. methods - 9 (1.4%); Level 2 NPU: ART method - 127 (57.7%), std. methods - 171 (77.7%); 3 level of NPU: 53 (24.1%), std. methods - 28 (13.2%); Level 4 SNP: ART method - 33 (15.4%), std. methods - 12 (5.4%).

The ART method allows detecting 2 times more servicemen with borderline states - the 3rd level of the NPS (satisfactory) - 24.1% than the study by the SM - 13.2%. This category of conscripts requires additional psychological and pedagogical attention, assignment to the dynamic observation group.

The results obtained using the ART method make it possible to identify conscripts assigned to the 4th level of neuropsychic instability, 3 times more - 15.4% than detection by standard methods - 5.4% and provide more reliable information about psychophysical distress. This category of servicemen is not allowed to guard duty. Servicemen are sent for additional psychiatric examination for further military service.

Thus, the implementation of the 1st stage of the ascertaining experiment makes it possible to obtain a reliable picture of the mental health indicators of conscripts at different stages of military service in the conditions of spontaneously organized activities to strengthen it.

In the process of military service, there are many examples confirming an unreliable forecast of a positive assessment of the psychogenic indicator of the mental health of conscripts, based on the use of standard research methods: servicemen who showed high and good levels of adaptation and mental stability at the first stages of service showed unsatisfactory levels at subsequent stages services - violations of military discipline, hazing relationships, unauthorized abandonment of a unit, informed and uninformed use of uncontrolled substances without a doctor's prescription, etc.

In the process of individual interviews with servicemen and their parents, studying personal data, the results of a medical examination, analyzing requests for medical assistance to a medical center of a military unit, 58.6% of conscripts who had undergone various psychosomatic diseases, 11.8% who received craniocerebral trauma, 1 serviceman (0.5%) who made a suicidal attempt before being drafted into the RF Armed Forces.

As a comparative analysis of the socio-psychological study of replenishment servicemen shows, despite the decline in the detection rates of servicemen with signs of an unsatisfactory level of neuropsychic stability to 4.6% (from 12.12% in 2002), there remains a high overall level of servicemen with signs of nervous - mental instability (3 and 4 levels of NHRI) (27.66%). Every third replenishment soldier is characterized by inadequate behavior and self-esteem, which, with increased physical and emotional stress, can lead to nervous breakdowns and deviant behavior. These servicemen are not allowed to carry out combat duty, guard duty, and add to the lists of persons requiring increased psychological and pedagogical attention. This, in turn, increases the load on the rest of the personnel of subunits and military units. Over the past four years, there has been no significant change in the number of replenishment servicemen who committed suicidal attempts before conscription.

The hypothesis about the informativeness of the approach with the identification of the psychogenic indicator of the mental health of conscripts is confirmed. This information makes it possible to increase the efficiency and adequacy of the formulated proposals, which, when taken into account, leads to the strengthening of the mental health of conscripts, the improvement of psychophysical well-being in the process of service and has a positive effect on the reduction of violations and the performance of professional tasks.

The ART method makes it possible to construct the work of a psychologist in a significantly different way compared to other methods of diagnosing psychophysical problems, in some cases to reduce the time of diagnosis, to select the optimal (from the available in the arsenal of a psychologist) methods and strategies of correction, to ensure effective control of its effectiveness [5]. The ART method allows a trained psychologist to quickly carry out qualified diagnostics of a wide range of mental and physical health problems of servicemen.

The data obtained are qualitatively different from the technologies and methods traditionally used for these purposes in the pedagogical and promedical models of strengthening psychophysical well-being [3].

Thus, the analysis carried out confirms that the mental health of conscripts is exposed to risks, deterioration, due to the difficulties of military service, adaptation to the conditions of service. Accordingly, the task of officials and specialists in psychological work can be formulated as strengthening the mental health of conscripts. In the broad sense of the word, this is the activity of the subjects of psychological work to form mental stability, i.e. cognitive, motivational and situational-activity components. In the narrow sense of the word, this is a purposeful activity of psychologists aimed at:

- assessment of the initial state of mental health, the dynamics of its manifestation in the process of performing tasks as intended, identifying the factors of difficulties;
- development of recommendations to officials to prevent disruptions and significant deterioration in the health of military personnel;
- preservation and development of adaptive capabilities to fulfill the tasks of military activity;
- educating officials and personnel, promoting the importance of a responsible attitude to promoting mental health;
- training in techniques of self- and mutual assistance in assessing mental health;
- overcoming the factors of difficulties in military activity;
- Conducting targeted activities to improve mental health.

#### Literature

1. Biryulya E.I., Kruk V.M. Psychological possibilities of medical and psychological examination of military personnel using BRT methods // Abstracts and reports of the XI International conference "Theoretical and clinical aspects of the use of bioresonance and multiresonance therapy." - M.: IMEDIS, 2005.
2. Vasilenko A.M., Gotovsky Yu.V., Meizerov E.E. and other Electropuncture vegetative resonance test. Methodical recommendations No. 99/96. - M.: Scientific-practical. center of trad. Ministry of Emergency Situations. - M., 2006.
3. Health-saving technologies of psychophysical reliability in the activities of a specialist in psychological work. // Ed. prof. G.I. Semikin. - M.: MGTO im. N.E. Bauman, 2008. -- 358 s.
4. Crook V.M. Military psychology and psychotherapy // Military psychology: methodology, theory, practice: Teaching method. allowance. - M.: VU, 1996.
5. Crook V.M. An experimental study of ensuring the personal reliability of a specialist. // University Bulletin (State University of Management), 2011. - №24. - Pp. 39-42.
6. Crook V.M., Endrzhhevsky A.A., Schwab N.F. Vegetative resonance test as a method of psychological diagnostics of servicemen who abuse psychoactive substances and requiring dynamic observation // Abstracts and reports of the XI International conference "Theoretical and clinical aspects of the use of bioresonance and multiresonance therapy." - M.: IMEDIS, 2005.
7. Kruk V.M., Martinovich A.S. The experience of psychological testing of a serviceman's psychophysical health problems using the ART method. Abstracts and reports of the conference of psychologists Ministry of Emergency Situations. - M., 2006.
8. Kruk V.M., Martinovich A.S. Diagnostics of the problems of psychophysical health of young people with health-preserving bioresonance technology // Coll. works of the 9th scientific and technical conferences. Research Institute RL MSTU them. N.E. Bauman, 2007.
9. Kruk V.M., Martinovich A.S., Kravtsova L.V. Bioresonance diagnostics and therapy as a factor of reliability in the prevention of drug use in the Armed Forces of the Russian Federation // Topical issues of moral and psychological support of drug control authorities: Materials of the interdepartmental scientific-practical conference dedicated to the 5th anniversary of the Federal Drug Control Service of Russia. - Khabarovsk, 2008. - pp. 60-64.
10. Lebedev I.B., Oleinikova A.S. Psychological conditions and factors of strengthening mental health: Psychology of education, No. 1, Moscow: SSU, 2013. - P.107-121.
11. Maklakov A.G. Fundamentals of psychological support for professional health of military personnel: Dis. ... doct. psychol. sciences. - St. Petersburg, 1996. -- 392 p. RSL OD.
12. Order of the Minister of Defense of the Russian Federation of September 25, 1998 No. 440 "On the system of work of officials and control bodies to preserve and strengthen mental health of servicemen of the Armed Forces of the Russian Federation."
13. Order of the Minister of Defense of the Russian Federation of August 7, 2013 No. 573 "On the development of the psychological service of the Armed Forces of the Russian Federation." Appendix No. 1 to Order of the Minister of Defense of the Russian Federation of 2013 No. 573. Concept for the development of the psychological service of the Armed Forces of the Russian Federation.
14. The program of the reliability of the personnel of the Armed Forces of the Russian Federation in terms of psychophysical health. Approved by the State Secretary - Deputy Minister of Defense of the Russian Federation dated 04.12.2009, No. 205/2/853.
15. Psychological psychotherapy in the conditions of military activity: A textbook for students and cadets of universities / Under total. ed. P.A. Korchemny and A.N. Kharitonov. - M.: VU, 2000.
16. Sekach M.F. Acmeological foundations of self-regulation of the mental stability of military command personnel: Dis. ... doct. psychol. sciences. - M., 1999.
17. The strategy of social development of the Armed Forces of the Russian Federation for the period up to 2020 (approved at a regular meeting of the Collegium of the Ministry of Defense of Russia on March 28, 2008 g.) (Russian military education, No. 5 (52), 2008).

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