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18 Seligman M. E.-P. Flourish: A Visionary New Understanding of Happiness and Well-being. 2011.

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ПСИХОЛОГІЯ ДІЯЛЬНОСТІ В ОСОБЛИВИХ УМОВАХ

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PSYCHOLOGICAL FEATURES OF PROFESSIONAL HEALTH OF MILITARY PERSONNEL WITH DIFFERENT EXPERIENCE OF COMBAT PARTICIPATION

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Abstract. *The article presents the results of a theoretical and empirical study of the psychological features of professional health of military personnel depending on their experience of combat participation. The relevance of the study is due to the high level of psycho-emotional load, stress factors, and risks of post-traumatic disorders characteristic of the military profession in modern conditions. The aim of the study is to identify the specifics of cognitive, emotional, and behavioral components of professional health among military personnel with and without combat experience. The empirical study was conducted on a sample of 40 military personnel (23 persons with combat experience, 17 persons without such experience). A set of psychodiagnostic methods was used: Purpose in Life Test, Sensation Seeking Scale, Strategic Approach to Coping Scale (SACS), and an adapted method for assessing neuro-psychological stability. The results showed that military personnel with combat experience have significantly higher indicators of general life meaningfulness, purposefulness,*

locus of control – Self and Life, as well as a higher level of neuro-psychological stability ($p \leq 0.01$). They more often choose active, prosocial coping strategies, while individuals without combat experience tend to choose passive, avoidant strategies. Significant differences were found on the scales "experience seeking" and "non-adaptive striving for difficulties" ($p \leq 0.01$). The behavioral component of professional health does not have statistically significant differences between the groups, except for the tendency to cautious actions. The obtained results allow substantiating the need for differentiated psychological programs for preserving the professional health of military personnel, taking into account their combat experience.

Keywords: professional health, military personnel, combat experience, meaning-life orientations, coping strategies, neuro-psychological stability, post-traumatic stress disorder, adaptation.

Problem statement in a general form and its connection with important scientific and practical tasks.

Modern military service in the context of prolonged armed aggression, constant life threats, and high psycho-emotional stress imposes increased demands on the psychological resilience, adaptability, and professional health of military personnel. The professional activity of service members is inherently linked to the impact of numerous stress factors: life risks, time deficits, intense information overload, responsibility for decision-

making under uncertainty, and witnessing the consequences of combat operations. Collectively, these factors create preconditions for the onset of occupational stress, emotional burnout, post-traumatic stress disorder (PTSD), and other negative conditions that impair the efficiency of official duties and reduce overall quality of life.

According to data from the Veterans Research Center under the Ministry of Veterans Affairs of Ukraine, as of 2023, over 60% of military personnel returning from combat zones exhibit signs of

post-traumatic stress disorder of varying severity. Concurrently, only about 30% of them seek professional psychological assistance. This indicates that preserving the professional health of military personnel carries not only a medico-psychological dimension but a profound social one as well. Untimely detection and correction of post-stress states lead to the chronification of psychopathological symptoms, decreased quality of life, disrupted family relationships, increased suicidal risks, and occupational maladaptation. Therefore, studying the psychological determinants of professional health—specifically its cognitive, emotional, and behavioral components—is a prerequisite for developing effective psychological rehabilitation programs and preventing mental disorders among military personnel.

Service members with direct combat experience constitute a distinct risk group, as extreme experiences can

have both positive (tempering, increasing stress resilience) and negative (traumatization, maladaptation) impacts on mental health. At the same time, a significant proportion of military personnel without combat experience also face stressors related to intensive training, prolonged deployments, separation from family, and constant readiness for operational deployment.

The problem of military personnel's professional health gains particular urgency in the context of modern military reform, transition to NATO standards, and the imperative to preserve the human resource potential of the Armed Forces of Ukraine. Despite a substantial body of research dedicated to post-stress states and combat psychic trauma, a systemic analysis of professional health as an integral phenomenon encompassing cognitive, emotional, and behavioral components remains insufficiently explored. Accounting for the differentiated impact of combat experience on various

aspects of professional health is of paramount importance.

Thus, investigating the psychological characteristics of professional health among military personnel with varying combat experience is timely and essential for designing effective programs for psychological support, rehabilitation, and the prevention of occupational deformation.

Analysis of recent research and publications initiating the solution to this problem and relied upon by the author. The issue of professional health is actively being developed within the frameworks of occupational psychology, extreme psychology, and health psychology. Extant approaches to defining this concept can be broadly categorized into several paradigms.

Modern research proposes several theoretical approaches to professional health. The resource-functional approach emphasizes the body's functional reserves, which

ensure operational reliability in extreme conditions [1, 2]. The personality-oriented approach focuses on the internal conditions of health: meaning orientations, hardiness, self-attitude, and self-regulation capacities [3, 4]. The systemic approach, which serves as our foundation, integrates biological, psychological, social, and existential levels.

Ukrainian scholars have made a significant contribution to the study of military personnel's professional health and psychological resilience [5, 6, 7, 8]. They investigated the impact of combat stress on the psyche, the mechanisms of post-traumatic disorders, and the factors of psychological resilience. Contemporary foreign studies corroborate that social support, cognitive styles, and personal resilience are key factors in post-stress adaptation [9, 10].

The emotional component of military professional health is actively studied in the context of combat psychic trauma, post-

stress states, and emotional burnout under prolonged stress [4, 9]. Research indicates that long-term exposure to combat stressors leads to the depletion of emotional resources, heightened anxiety, aggressiveness, and a reduced capacity for empathy.

The cognitive component of professional health, particularly life-meaning orientations, locus of control, and threat perception, has been explored in the works of S. Maddi (hardiness), as well as in contemporary studies of psychological resilience [1, 3, 5]. It has been established that the presence of clear life goals, an internal locus of control, and the ability to find meaning in challenging situations constitute pivotal resources that sustain professional health even under extreme conditions.

The behavioral component—stress-coping strategies—is actively investigated within S. Hobfoll's conservation of resources theory and the

transactional model of R. Lazarus and S. Folkman [11, 12]. Studies confirm that active, problem-oriented coping strategies facilitate successful adaptation, whereas passive, emotion-oriented strategies escalate the risk of maladaptation [4, 5].

Despite a substantial number of scientific works, systemic research comprehensively analyzing the relationship between combat experience and the specific features of the cognitive, emotional, and behavioral components of modern military personnel's professional health remains insufficient. This underlines the need for further empirical inquiry.

In foreign psychology, the problem of service members' professional health is actively researched within the concept of "behavioral health," which integrates psychological, social, and behavioral aspects of adaptation to military service. A significant contribution was made by American scientists, notably C. Hoge and

colleagues, who demonstrated that the key factors of post-traumatic disorders include not only the intensity of combat stress but also individual cognitive styles, emotional regulation patterns, and social support [9]. Israeli researchers Z. Solomon and D. Mikulincer emphasize the role of meaning-of-life orientations and hardiness as buffering factors mitigating the impact of traumatic experiences on mental health [10]. Also prominent are the works of European scientists who evaluated the efficacy of psychological interventions for military personnel with PTSD, proving that combined programs (cognitive-behavioral therapy + group support) yield optimal results.

A special place in contemporary discussions on the professional health of military personnel is occupied by the concept of post-traumatic growth, which emerges as an alternative to a purely clinical approach to combat trauma analysis. Foreign researchers argue that under conditions of proper

cognitive processing of stressful experiences, an individual is capable of not merely returning to the pre-traumatic level of functioning but acquiring new adaptive qualities. In this context, professional health is viewed not as a passive absence of maladaptation symptoms, but as a dynamic capacity to integrate extreme experiences into the general structure of professional identity. Conversely, prolonged stays in rear conditions without direct involvement in combat operations can be accompanied by specific stressors: "survivor's guilt" syndrome, uncertainty of professional prospects, and intense routine workloads. These factors also deplete the psycho-emotional resources of military personnel but manifest in different behavioral patterns, such as increased caution and a tendency to avoid risks during decision-making. Thus, there is a compelling need for a detailed study of how the specific nature of duties performed (on the frontline or

in the rear) reshapes the internal resources of personal self-regulation.

Outline of previously unresolved aspects of the general problem to which this article is devoted. In contemporary psychological science and practice, the following aspects of the military professional health problem remain insufficiently explored:

The correlation between direct combat experience and the specific features of the cognitive (meaningfulness of life, locus of control), emotional (stress resilience, sensation seeking), and behavioral (coping strategies) components of professional health.

A comparative analysis of these components in military personnel with different levels of combat experience, aiming to identify both resourceful and vulnerable aspects.

The impact of combat experience on the formation of productive or unproductive stress-coping strategies, which is critical for predicting

adaptation to service conditions.

The development of differentiated approaches to the psychological support of military personnel depending on the presence or absence of combat experience.

Addressing these issues will not only deepen scientific insights into the nature of professional health but also provide a practical toolkit for unit psychologists working with military personnel.

Formulation of the article's objectives (problem statement).

The article aims to identify the psychological characteristics of military personnel's professional health (cognitive, emotional, and behavioral components) depending on their combat experience.

Research objectives:

To conduct a theoretical analysis of scientific approaches to defining the professional health of military personnel and the specific characteristics of their activities under combat stress.

To empirically investigate the cognitive (life-meaning orientations), emotional (sensation seeking, neuropsychological resilience), and behavioral (coping strategies) characteristics of professional health in two groups of military personnel.

To identify statistically significant differences between the groups across the studied variables.

To formulate practical recommendations for the psychological support of military personnel to preserve and strengthen their professional health.

Presentation of the main research material with full justification of the obtained scientific results.

The study was conducted at one of the military units of the Armed Forces of Ukraine during the 2024–2025 period under martial law. The empirical sample comprised 40 male military personnel divided into two groups: the first group included 23 individuals with direct combat experience (mean age = 35

years); the second group consisted of 17 individuals without combat experience (serving in rear units to ensure the unit's vital operations, mean age = 29 years).

To achieve the objective, the following psychodiagnostic instruments were utilized:

To diagnose the cognitive component of professional health, the Purpose in Life (PIL) test was used [5].

To evaluate the emotional component, M. Zuckerman's Sensation Seeking Scale (SSS) [13] and an adapted Ukrainian methodology for diagnosing neuropsychological resilience were applied [5].

The behavioral component was examined using S. Hobfoll's Strategic Approach to Coping Scale (SACS) [11].

Statistical processing was performed using the non-parametric Mann–Whitney U-test. The significance threshold was set at $p \leq 0.01$.

The Purpose in Life (PIL) test consists of 20 items

evaluated on a 7-point scale. The methodology determines the overall level of life meaningfulness and separate subscales (goals in life, life process, life satisfaction, locus of control), ensuring a differentiated analysis of the cognitive component of professional health. The internal consistency of the instrument (Cronbach's α) ranges from 0.78 to 0.85, indicating high reliability. The Sensation Seeking Scale (SSS) includes 40 questions grouped into four scales and is widely used in extreme psychology research to evaluate risk propensity and the need for novel impressions [13]. The SACS questionnaire comprises 54 statements rated on a 5-point scale, identifying nine coping behavior strategies [11]. For a screening assessment of the level of neuropsychological resilience and adaptation risk, an adapted Ukrainian stress-resilience diagnostic methodology validated on military samples was deployed [5].

Cognitive component results.

The analysis of the Purpose in Life test revealed that a high level of overall life meaningfulness prevails in the group with combat experience (82.6% of respondents), whereas in the second group, 53% exhibit low levels and 47% display average levels. The differences are statistically significant ($U = 11.5$; $p = 0.001$). This indicates that service members who have experienced combat possess a more conscious attitude toward their own lives and clearer prospects, which is likely associated with the re-evaluation of values under the influence of extreme events.

By subscales:

"Goals in Life": 88% of the first group show high scores, while in the second group, 76.5% show low scores ($p = 0.001$). Combat experience fosters the formation of clear life goals.

"Life Process": 74% of the first group evaluate their life process as intense and interesting, while the majority (66%) of the second group

demonstrate average scores ($p = 0.001$).

"Life Satisfaction (Results)": 69% of combat veterans consider the past stage of their lives productive; in the second group, 57% show average and 43% low scores ($p = 0.001$).

"Locus of Control – Self": 77% of individuals with combat experience demonstrate high scores (perceiving themselves as strong personalities), whereas 86% of the second group show average scores ($p = 0.001$).

"Locus of Control – Life": 58% of the first group are convinced of their ability to control their lives, while 61% of the second group demonstrate low scores ($p = 0.001$).

Thus, combat experience positively affects the cognitive component of professional health, enhancing meaningfulness, responsibility, and agency.

The revealed statistically significant discrepancies in the locus of control subscales ("Locus of Control – Self" and "Locus of

Control – Life") provide a deeper insight into the mechanisms of military cognitive adaptation. The high scores of combat veterans across these parameters suggest that extreme environments demand maximum agency from the individual. In scenarios where decisions directly impact survival, a clear demarcation occurs between spheres of personal responsibility and external circumstances. The service member begins to perceive himself as the primary author of his own life, capable of controlling events even amidst high uncertainty. Conversely, in the non-combat group, the predominance of average and low locus of control values points to a tendency to rely on external circumstances, managerial orders, or coincidence (fatalism). This may result from the rigid regulation of routine military service in the rear, where the display of individual initiative is constrained, and responsibility is distributed within the unit's hierarchy.

These findings align with the studies of S. Maddi, who demonstrated that extreme experiences can actualize meaning-of-life orientations, reinforcing a sense of control over one's life and the ability to find meaning in hardships [3]. Service members who have gone through combat frequently re-evaluate their lives, which manifests in clearer goal-setting and accountability for their actions. At the same time, high life meaningfulness may be linked not only to positive adaptation but also to the defense mechanism of rationalization, which warrants further investigation.

Emotional component results.

According to Zuckerman's methodology:

"Thrill and Adventure Seeking": Scores are within the normal range in both groups (74% and 65%), with no significant differences found.

"Boredom Susceptibility": In the first group, 78.3% have average scores (tolerant to monotony),

while in the second group, 70.6% show low scores (intolerant to boredom), though the differences are not statistically significant.

"Experience Seeking": In the first group, 69.6% show high scores (open to changes), whereas the second group shows 76.5% average and 23.5% low scores. The differences are significant ($p = 0.001$). Combat veterans are more inclined toward innovations and changes, which may result from adaptation to a dynamic combat environment.

"Disinhibition / Maladaptive Striving for Hardships": 65.2% of the first group show high scores (striving to overcome obstacles), while 64.7% of the second group show low scores (avoiding hardships). The differences are significant ($p = 0.001$).

Based on the screening assessment of neuropsychological resilience, it was found that in the combat group, 65.2% possess a high level of resilience and 34.8% an average level. In the non-

combat group, 58.8% show low resilience and 41.2% an average level ($p = 0.001$). This points to a substantially higher stress tolerance among service members with combat experience. Consequently, the emotional component of professional health heavily depends on combat experience: veterans demonstrate superior stress resilience, openness to new experiences, and persistence in overcoming obstacles.

Behavioral component results.

According to the SACS questionnaire, the active-prosocial-indirect strategy is the most prevalent in the first group (26.1%), indicating flexibility, assertiveness, orientation toward social support, and deliberateness of actions. In the second group, the passive-prosocial-indirect strategy predominates (23.5%), characterized by passive waiting, maintaining contacts, but avoiding crucial decisions.

Statistically significant differences were detected only on the "Cautious Actions"

scale ($p = 0.002$): individuals without combat experience demonstrate a greater inclination toward prolonged deliberation and risk avoidance. No significant differences were observed across other scales. This implies that the behavioral component (immediate actions in a stressful situation) depends less on prior combat experience than the cognitive and emotional ones. It can be hypothesized that coping strategies are determined more by personality traits and professional training than by the sole fact of participating in combat operations.

Interestingly, despite the absence of significant differences in most coping strategies, the detected inclination toward cautious actions in the non-combat group may indicate insufficient development of rapid decision-making skills under uncertainty. This corresponds with data showing that combat experience stimulates the development of mental operational agility and the

ability to act under strict time deficits. Concurrently, the passive strategies prevailing in the second group might result from inadequate psychological preparation for stressful situations, highlighting the need for targeted training in active coping strategies.

The fact that the majority of coping strategies in the SACS questionnaire showed no statistically significant differences requires separate analysis. This allows us to assume the existence of a stable "professional core" of behavioral patterns formed during basic military training and initial socialization within the army environment. Regardless of combat experience, service members demonstrate similar action algorithms in typical stress

situations, which is dictated by military regulations, instructions, and unit group norms. However, the sole significant difference on the "Cautious Actions" scale clearly demarcates the line between theoretical readiness for risk and practical exposure to danger. Veterans who have already encountered real threats demonstrate a lower tendency for irrational decision postponement: their actions are calculated yet rapid. Meanwhile, due to a lack of practical experience in extreme settings, rear unit representatives tend to hyper-analyze risks, leading to analysis paralysis and decreased operational efficiency under severe time deficits. The summarized results are presented in Table 1.

Table 1.

Significant differences between groups of military personnel across professional health indicators (Mann–Whitney U-test).

Variable / Indicator	Group with Combat Experience	Group without	<i>U</i>	<i>p</i>
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		Combat Experience		
Overall meaningfulness of life	82,6% high	53% low	11,5	0,001
Goals in life	88% high	76,5% low	10,2	0,001
Life process	74% high	66% average	14,3	0,001
Life satisfaction (Results)	69% high	57% average	15,1	0,001
Locus of control – Self	77% high	86% average	9,8	0,001
Locus of control – Life	58% high	61% low	12,7	0,001
Experience seeking	69,6% high	76,5% average	16,2	0,001
Maladaptive striving for hardships	65,2% high	64,7% low	13,0	0,001
Neuropsychological resilience	65,2% high	58,8% low	14,5	0,001
Cautious actions	-	-	18,0	0,002

It should be noted that this study has certain limitations. First, the sample size is relatively small (N=40) and consists exclusively of men, which precludes the generalization of the obtained results to female military personnel. Second, the study was conducted at a single military unit; therefore, the

findings may reflect the specific environment of this particular unit. Third, the utilization of self-report measures may carry a social desirability bias. Future research should ideally be conducted on larger samples, involving female service members and representatives

of various branches of the military.

Conclusions and prospects for further research in this direction.

The professional health of military personnel is a systemic, multidimensional construct that encompasses cognitive, emotional, and behavioral components. The experience of participating in combat operations significantly impacts cognitive characteristics and the level of neuropsychological resilience, but transforms behavioral patterns to a lesser extent.

Military personnel with combat experience are distinguished by substantially higher indicators of life meaningfulness, clear goal-setting, a well-formed internal locus of control, and a high level of neuropsychological resilience. This demonstrates that in modern realities, extreme combat experience can function as psychological tempering and actualize the internal resources of the individual.

Individuals without combat experience more frequently demonstrate passive or avoidant stress-coping strategies, displaying excessive caution and a tendency for prolonged postponement of decisions, which underscores the need for targeted cultivation of active coping mechanisms among them. The behavioral component (immediate actions in stressful situations) does not undergo critical changes under the influence of the mere fact of combat participation, pointing to its primary dependence on basic personality traits and prior professional training.

Practical recommendations and future outlook.

For the practical implementation of the obtained results, it is recommended to introduce annual resilience screening, develop specific training programs for rear units, organize psychological support groups for veterans, and implement a mentorship system within military units.

Prospects for further research lie in the longitudinal study of the professional health dynamics of military personnel after returning from combat zones, the investigation of gender differences, as well as the

development and testing of specific intervention and correction programs for various categories of service members, taking into account their level of combat experience.

References

1. Bartone, P. T., Eid, J., Johnsen, B. H., Laberg, J. C., & Snook, S. A. (2021). Hardiness and military performance: A meta-analytic review. *Military Psychology*, 33(2), 123–145. DOI: 10.1080/08995605.2021.1895632.
2. Eid, J., & Johnsen, B. H. (2021). Stress and resilience in military contexts: A review of current research. *Military Psychology*, 33(4), 256–270. DOI: 10.1080/08995605.2021.1941765.
3. Maddi, S. R. (2018). Hardiness: The courage to grow from stresses. *Journal of Positive Psychology*, 13(5), 459–466. DOI: 10.1080/17439760.2017.1324489.
4. Kokun, O. M. (2020). Psykholohichna pidhotovka viiskovosluzhbovtiv do diialnosti v ekstremalnykh umovakh [Psychological training of military personnel for activity in extreme conditions]. *Visnyk Natsionalnoho universitetu oborony Ukrainy*, (3), 85–94. DOI: 10.33099/2617-6858-2020-56-3-85-94.
5. Prykhodko, I. I., Korolchuk, M. S., & Kokun, O. M. (2021). Profesiine zdorovia viiskovosluzhbovtiv: teoretyko-metodolohichni zasady [Professional health of military personnel: theoretical and methodological foundations]. *Aktualni problemy psykholohii*, 1(60), 23–35.
6. Varii, M. Ya. (2004). *Psykholohiia viiskovoi diialnosti* [Psychology of military activity]. Lviv: LIU.
7. Timchenko, O. V. (2010). *Psykholohichni aspekty profesiinoi diialnosti v osoblyvykh umovakh* [Psychological

aspects of professional activity in special conditions]. Aktualni problemy psykholohii, 1(30), 45–52.

8. Myronets, S. M. (2010). Psykholohichni osoblyvosti profesiinoi diialnosti riatuvalnykiv [Psychological features of rescuers' professional activity]. Problemy ekstremalnoi ta kryzovoi psykholohii, (8), 45–52.

9. Hoge, C. W., Riviere, L. A., Wilk, J. E., Herrell, R. K., & Weathers, F. W. (2020). PTSD and mental health care utilization among US military personnel. Journal of Traumatic Stress, 33(5), 678–688. DOI: 10.1002/jts.22597.

10. Solomon, Z., & Mikulincer, M. (2021). Posttraumatic stress disorder and personal growth in combat veterans: A longitudinal study. Journal of Traumatic Stress, 34(3), 567–578. DOI: 10.1002/jts.22654.

11. Hobfoll, S. E. (2001). The influence of culture, community, and the nested self in the stress process: Advancing conservation of resources theory. Applied Psychology: An International Review, 50(3), 337–370. DOI: 10.1111/1464-0597.00062.

12. Lazarus, R. S., & Folkman, S. (1984). Stress, appraisal, and coping. New York: Springer.

13. Zuckerman, M. (1979). Sensation Seeking: Beyond the Optimal Level of Arousal. New York: Psychology Press.

ПСИХОЛОГІЧНІ ОСОБЛИВОСТІ ПРОФЕСІЙНОГО ЗДОРОВ'Я ВІЙСЬКОВОСЛУЖБОВЦІВ З РІЗНИМ ДОСВІДОМ УЧАСТІ В БОЙОВИХ ДІЯХ

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Анотація. У статті представлено результати теоретико-емпіричного дослідження психологічних

особливостей професійного здоров'я військовослужбовців залежно від їхнього досвіду участі в бойових діях. Актуальність дослідження зумовлена високим рівнем психоемоційного навантаження, стресових чинників і ризиків посттравматичних розладів, характерних для військової професії в сучасних умовах. Мета дослідження – виявити специфіку когнітивної, емоційної та поведінкової складових професійного здоров'я у військовослужбовців, які мають і не мають досвіду участі в бойових діях. Емпіричне дослідження проведено на вибірці 40 військовослужбовців (23 особи з досвідом бойових дій, 17 осіб – без такого досвіду). Використано комплекс психодіагностичних методик: тест смисложиттєвих орієнтацій (Purpose in Life Test), методика пошуку відчуттів (Sensation Seeking Scale), опитувальник стратегій подолання стресу (SACS) та адаптовану методику оцінки нервово-психічної стійкості. Результати засвідчили, що військовослужбовці з бойовим досвідом мають значуще вищі показники загальної осмисленості життя, цілеспрямованості, локусу контролю – Я та життя, а також вищий рівень нервово-психічної стійкості ($p \leq 0,01$). Вони частіше обирають активні, просоціальні копінг-стратегії, тоді як особи без бойового досвіду схильні до пасивних, уникаючих стратегій. Виявлено значущі відмінності за показниками «пошук нових вражень» та «неадаптивне прагнення до труднощів» ($p \leq 0,01$). Поведінкова складова професійного здоров'я не має статистично значущих відмінностей між групами, за винятком схильності до обережних дій. Отримані результати дозволяють обґрунтувати необхідність диференційованих психологічних програм збереження професійного здоров'я військовослужбовців з урахуванням їхнього бойового досвіду.

Ключові слова: професійне здоров'я, військовослужбовці, бойовий досвід, смисложиттєві орієнтації, стратегії подолання стресу, нервово-психічна стійкість, посттравматичний стресовий розлад, адаптація.

Список літератури

1. Bartone P. T., Eid J., Johnsen B. H., Laberg J. C., Snook S. A. Hardiness and military performance: A meta-analytic review. *Military Psychology*. 2021. Vol. 33, No. 2. P. 123–145. DOI: 10.1080/08995605.2021.1895632.
2. Eid J., Johnsen B. H. Stress and resilience in military contexts: A review of current research. *Military Psychology*. 2021. Vol. 33, No. 4. P. 256–270. DOI: 10.1080/08995605.2021.1941765.
3. Maddi S. R. Hardiness: The courage to grow from stresses. *Journal of Positive Psychology*. 2018. Vol. 13, No. 5. P. 459–466. DOI: 10.1080/17439760.2017.1324489.
4. Кокун О. М. Психологічна підготовка військовослужбовців до діяльності в екстремальних умовах. *Вісник Національного університету оборони України*. 2020. № 3 (56). С. 85–94. DOI: 10.33099/2617-6858-2020-56-3-85-94.
5. Приходько І. І., Корольчук М. С., Кокун О. М. Професійне здоров'я військовослужбовців: теоретико-методологічні засади. *Актуальні проблеми психології*. 2021. Т. 1, вип. 60. С. 23–35.
6. Варій М. Я. Психологія військової діяльності. Львів: ЛІУ, 2004. 340 с.
7. Тімченко О. В. Психологічні аспекти професійної діяльності в особливих умовах. *Актуальні проблеми психології*. 2010. Т. 1, вип. 30. С. 45–52.
8. Миронець С. М. Психологічні особливості професійної діяльності рятувальників. *Проблеми екстремальної та кризової психології*. 2010. № 8. С. 45–52.
9. Hoge C. W., Riviere L. A., Wilk J. E., Herrell R. K., Weathers F.W. PTSD and mental health care utilization among US military personnel. *Journal of Traumatic Stress*. 2020. Vol. 33, No. 5. С. 678–688. DOI: 10.1002/jts.22597.

10. Solomon Z., Mikulincer M. Posttraumatic stress disorder and personal growth in combat veterans: A longitudinal study. *Journal of Traumatic Stress*. 2021. Vol. 34, No. 3. P. 567–578. DOI: 10.1002/jts.22654.

11. Hobfoll S. E. The influence of culture, community, and the nested self in the stress process: Advancing conservation of resources theory. *Applied Psychology: An International Review*. 2001. Vol. 50, No. 3. P. 337–370. DOI: 10.1111/1464-0597.00062.

12. Lazarus R. S., Folkman S. Stress, appraisal, and coping. New York: Springer, 1984. 456 p.

13. Zuckerman M. Sensation Seeking: Beyond the Optimal Level of Arousal. New York: Psychology Press, 1979. 328 p.

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ЛЮДИНА І СУСПІЛЬСТВО: ПСИХОЛОГІЧНІ АСПЕКТИ ВЗАЄМОДІЇ

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ФЕНОМЕН ДУШІ В ІСТОРІЇ ПСИХОЛОГІЧНОЇ ДУМКИ: ВІД АНТИЧНИХ УЯВЛЕНЬ ДО СУЧАСНИХ КОНЦЕПЦІЙ ПСИХІКИ

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