



Psychological Well-Being of Ukrainians under Martial Law: Social Implications and Educational Perspectives on Coping Strategies

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Abstract

The aim of the paper was to analyze the influence of martial law on stress practices and the safeguarding of mental well-being among Ukrainians. The goal of the study was to evaluate the psychological comfort of Ukrainian people during an extended period of martial law, and to detect the main anxiety management tactics. To combine a quantitative survey with qualitative expert interviews, a mixed-methods approach was used. The stress level was evaluated using the PSS-10 scale. The psychological comfort was assessed using the WHO-5 index. Descriptive statistics and content analysis of expert interviews were conducted. The standard stress level documented in the survey exceeded the threshold. The lowest scores were observed among respondents from groups of internally displaced individuals and inhabitants of territories under occupation. These results highlight the importance of applying community-based psychosocial programs.

Keywords: Stress Factors, Psycho-Emotional State, Coping Strategy, Displaced Persons, Resilience, Russian-Ukrainian War

1. Introduction

1.1 Background

The characteristic of psychological comfort is an important indicator of mental health (Park, 2023). The current scientific paradigm studies it as a multi-dimensional phenomenon that covers social mechanisms, as well as a person's aptitude to function effectively within society. The maintenance of psychological comfort necessitates an equilibrium among a person's inner resources (Besika, 2021). For Ukrainians, this question has become principally critical due to the continued state of war (over three years), mass migration, shocking involvement in active hostilities, and absence of economic stability. Ukrainians have encountered a wide range of socio-psychological challenges that negatively affect emotional well-being and life goals. They have faced a difficult choice: to leave homes and become internally displaced persons, fleeing shelling and occupation, or become refugees (Riyazahmed, 2021). The change of familiar surroundings and uncertainty about the future are compounded by the loss of loved ones. Daily psychological hardships have reinforced social isolation mechanisms within the worldview of many Ukrainians. The cumulative experience of these factors creates a constant sense of stress, a condition that requires individuals to make daily efforts to find effective strategies for overcoming a critical psychological state (Grossman, 2022).

A separate direction of modern thematic discourse is the specific weight of the educational environment as a means of socio-psychological rehabilitation. Many scientists focus on the protective function of education in conditions of martial law. It is the regular and controlled educational process that ensures the stability of routine and social integration. These means become important elements of maintaining mental health. Some scientists focus on the concept of trauma pedagogy and maintaining people's resilience through the prism of educational programs (Maksymchuk, 2019). Others offer formats for transforming negative life experiences through adaptive strategies for dealing with stress. At the same time, the study of the social consequences of prolonged psychological pressure is studied through the prism of the disintegration of social ties and the desire to implement new systems of public support.

1.2 Research focus

Although the problem is striking in its complexity and scale, systematic and comprehensive studies of the psycho-emotional state of Ukrainians under martial law remain quite limited today. Existing empirical research offers readers selective analyses of individual stress factors such as traumatic experience, PTSD, and social adaptation among displaced persons (Tytarenko, 2024; Rybinska, 2023). As for a comprehensive study that would include the multifactorial influence of situational, social, economic, and demographic aspects on the preservation of psychological well-being of Ukrainians under martial law, it is currently lacking. Such gaps deepen the

problem of developing programmes to support citizens and reduce the efficiency of psychosocial interventions.

The aim of this study is to analyse the psychological well-being of Ukrainians under prolonged martial law and identify key stress management strategies. It is necessary to address several research questions:

R1: Which socio-economic, demographic, and situational factors influencing the psychological well-being of citizens under martial law are the most significant?

R2: Which coping strategies for dealing with these influencing factors are the most common among Ukrainians?

R3: What is the correlation between these strategies and the variables of gender, age, and displacement status among Ukrainian citizens?

The base for defining the methodical and applied implications of this paper lies in its possible input to the advancement and development of state strategies and social programmes expected to support the psychological comfort of residents. The applied results found may be useful in systematising psychological support initiatives and in development tactics to improve national flexibility and to advance the mental health of the residents. It is anticipated that the enactment of real resilience policies will, in the future, help to decrease the undesirable influence of war-related disturbance. These issues hold not only theoretical but also practical implications for the population that endures the trials of war on a daily basis.

2. Literature Review

2.1 Theoretical framework

The academic background of the paper is founded on the transactional theory of stress and managing, established by R. Lazarus and S. Folkman (Wu, 2025). This theory clarifies that a person's practise of stress rises not from the incident itself, but from their specific evaluation of that event. Therefore, the more traumatic an individual sees a condition to be, the more intense the stress response it provokes. Throughout such individual assessment, an individual may use numerous coping tactics in response to stress; moreover, emotion-oriented or problem-oriented (Si, 2023). This arrangement is chiefly actual in Ukrainian citizens' assessment of their personal safety in terms of hostilities and martial law analysis. It provides insight into how the choice of a particular appraisal strategy influences not only individuals' behaviour but also their personal psychological outcomes.

When studying the concept of stress and an individual's mental well-being, it is also important to rely on Martin Seligman's PERMA model of well-being (Chisale, 2022). This model conceptualises psychological well-being as a multidimensional construct based not only on the absence of pathology but also on the presence of regular positive emotions, quality social relationships, engagement in daily life, and the achievement of personal goals, among other factors (Kovich, 2023). The application

of the transactional theory of stress together with the PERMA model makes it possible, within the framework of in-depth analysis, to create a synthesis of factors that determine an individual's stress response with the direct elements that either promote or undermine well-being within a country (Dorri Sedeh, 2024).

Special attention in the context of this study should be given to the role of psychological resilience in the overall aspect of well-being (Troy, 2023). It serves as a moderator of the impact of stressful situations on the behaviour and perception of these situations by individuals. Resilience can be developed under the influence of such factors as social support, cultural practices, prior experience in coping with stressful situations, and the possession of resources that enable adaptation under prolonged stress conditions (Majnarić, 2021).

A separate layer of research on human behavior under martial law is the study of the influence of biological determinants on the perception of stress and the effectiveness of overcoming it. Scientists emphasize the significant impact on psycho-emotional stability of such factors as the quality of nutrition, sleep duration, and the presence of chronic somatic diseases (such as cardiovascular or endocrine disorders) (Kozak, 2024). The aspect of physiological exhaustion, which accompanies a person who has been in conflict environments for a long time, including living in occupied territories or in a zone of active hostilities, also has a significant impact on well-being and behavior. It has been proven that such situations lead to changes in the hypothalamic-pituitary-adrenal axis, provoking immune suppression and cognitive decline (Kruk, 2023).

Separate studies focus on the impact of pharmacology on public health. Thus, the active use of psychotropic substances, frequent self-medication, and the use of alcohol or other psychoactive substances for the so-called dulling of the feeling of stress often act as maladaptive coping strategies, exacerbating disorders (Napryeyenko, 2019).

To study the dynamics of the interaction between stressors, physiological reactions and coping mechanisms, scientists today also use mathematical and computational models of stress (Tsekhmister, 2019). These models allow us to quantitatively assess the relationship between adaptive and maladaptive stress reactions and create relative forecasts regarding the time of transformation of reversible temporary stress into irreversible chronic stress.

2.2 War and postwar psychological problems

Existing studies conducted in areas of active hostilities and in post-war regions (such as Syria, Iraq, and Georgia) demonstrate high levels of depression, anxiety, and PTSD. Syrian studies have revealed a wide range of mental health problems faced by both younger and older generations (Hamza, 2021). Scientific articles examining the mental state of the post-war population in Georgia show that people experience this issue in different ways: while some seek active solutions and turn to mental health professionals, others rely on religious practices or choose chronic avoidance

(Burbach, 2011). The latter approach, as research confirms, worsens the general condition and deepens manifestations of psychopathology (Pinchuk, 2021).

The conceptual model considered in the context of the present study represents a synthesis of three main levels:

- factors determining the stress response – demographic, socio-economic, and personal/situational;
- key coping strategies – types of human behaviour under stress;
- results – components of the PERMA model and symptomatic indicators (depression, PTSD, anxiety) (Cabrera, 2024).

It is assumed that factors determining stress response influence both the type of coping strategy an individual employs and the effectiveness of that strategy. Initial studies of the condition of Ukrainian citizens during the Russian-Ukrainian war indicate high levels of depressive disorders and anxiety, along with an increasing demand for psychosocial services. However, there is still no systematic study that combines an analysis of the main stress factors with the most common coping strategies, which has become the basis for this article.

3. Methods

3.1 Research design

The research is based on a mixed methodological approach that combines quantitative and qualitative methods. This allowed for a more generalized understanding of the psychological health of Ukrainians in the context of a full-scale war. While the quantitative data address issues of statistical representativeness, the qualitative methods focus on interpreting each respondent's personal experience.

An interdisciplinary group of 10 experts, consisting of the authors of the study as well as psychologists, sociologists, and university lecturers, worked on the research for a period of 12 months (April 2024 – March 2025). Four key stages were included in the study:

1. Preliminary stage with expert group work and data collection development.
2. Ground stage with data gathering over surveys and interviews.
3. Investigative stage with statistical data processing.
4. Overview stage with a unified conceptual model advanced.

The study is a mixed analysis of both primary and secondary data. In order to gather primary data, a survey of 300 respondents was conducted. It included internally displaced persons (IDPs) and residents of areas affected by active hostilities or under occupation. Additionally, 30 semi-structured interviews were carried out with professionals working with vulnerable population groups, such as psychologists, social workers, and educators. The selection of respondents for the study was carried out in accordance with a purposeful sampling strategy. Advertisements about the study were placed on open platforms Facebook and Instagram, briefly describing the

purpose, inclusion criteria (for interviews with specialists), and approximate duration of the interview. The inclusion criteria for psychological assistance specialists included at least two years of professional work experience; experience in interacting with IDPs, veterans, UBD, and persons injured as a result of hostilities. This allowed for territorial coverage of different regions of Ukraine. The average duration of each interview was 45–60 minutes, and all conversations were recorded and transcribed with the consent of the participants.

Work with secondary data involved the analysis of reports from the World Health Organization (WHO,2025), the Ministry of Health of Ukraine (2025), and the Office of the United Nations High Commissioner for Refugees (UNHCR, 2025) concerning the monitoring of mental health among the population in wartime conditions.

3.2 Sample

Before conducting the survey, a stratified random sample consisting of 300 individuals was formed. It was intended to reproduce the main socio-demographic limits, such as age, gender, education, and dislocation status of the respondents (Table 1).

Table 1. Demographic characteristics of the sample (N = 300)

Category	Subgroup	N	%
Age	18–29 years old	72	24.0
	30–44 years old	99	33.0
	45–59 years old	81	27.0
	60+ years old	48	16.0
Gender	Women	174	58.0
	Men	126	42.0
Education	Secondary	87	29.0
	Vocational	66	22.0
	Higher	132	44.0
	Postgraduate	15	5.0
Place of residence	Urban	192	64.0
	Rural	108	36.0
Social status	Internally Displaced Persons (IDPs)	147	49.0
	Local residents	153	51.0

Category	Subgroup	N	%
Regional context	Regions that were under occupation	63	21.0
	Regions with active hostilities	78	26.0
	Relatively safe regions (minimal impact)	159	53.0

Generally, the extent of each division group was relative to its segment in the total model. The age of members ranged from 18 to 65 years. Women reported for 58% of all respondents. Men made up the lasting 42% (Table 2).

Table 2. Characteristics of the expert sample (N = 30)

Category	Subgroup	n	%
Profession	Psychologists	12	40.0
	Educators (lecturers, teachers)	10	33.3
	Social workers	8	26.7
Work experience	3–5 years	7	23.3
	6–10 years	11	36.7
	Over 10 years	12	40.0
Field of activity	Education (schools, universities)	11	36.7
	Psychological support centres	9	30.0
	Public and international organisations	10	33.3
Experience working with IDPs	Has significant experience	18	60.0
	Has limited/occasional experience	7	23.3
	Has no experience	5	16.7
Experience working with trauma	Work with traumatised children and adolescents	12	40.0
	Work with adults (including veterans)	14	46.7
	Work with families	4	13.3

In the semi-structured interviews, additional taster of expert participants was shaped. Their collection was directed by main parameters such as their expertise in the area of psychosocial sustenance.

3.3 Data analysis

The study was led online. All applicants had a link to a Google Form. It contained 25 questions. They were divided into three key sections (Table 3). Section 1 required respondents to fill in certain anonymous personal data (age, gender, migration status, region of residence, etc.). Section 2 comprised questions connected with the valuation of psycho-emotional state and the main stress aspects. Section 3 fixated directly on coping tactics utilised by persons to calm their state. They combined psychological scales: WHO-5 (2024), PSS test (2025), and Brief COPE (Novopsych, 2025). The access to the questionnaire continued to be open for two days. The gathered data were examined using the SPSS software. The regression analysis was conducted in order to recognise predictors of psychological well-being.

Table 3. Semi-structured interview guide for professionals working with vulnerable population groups

Thematic block	Focus of discussion	Sample questions
1. Perception of stress and threat	Understanding individual and collective experiences of stress	<ul style="list-style-type: none"> • How do you personally perceive the current level of psychological stress among the population you work with? • In your experience, what are the main sources of stress for civilians during wartime?
2. Coping strategies and support mechanisms	Exploring behavioural and emotional coping patterns	<ul style="list-style-type: none"> • What coping strategies do your clients most often employ when facing traumatic experiences? • What forms of social or institutional support seem to be most effective?
3. Psychological resilience and well-being	Examining factors that promote resilience and psychological recovery	<ul style="list-style-type: none"> • How would you describe the role of resilience in adaptation to prolonged stress? • What factors, in your opinion, contribute most to restoring psychological well-being?

Stage 2 involved interviews conducted with 30 participants. They were organised online via Google Meet (25–30 minutes). This stage protracted over 10 days due to participants' divergent work schedules, accessibility, and personal conditions. The

semi-structured protocol allowed for combining standardised questions with opportunities to enlarge on topics founded on participants' comprehensive responses. NVivo 12 software was used for the thematic analysis of the interview data. The interview protocol was created by the authors on the basis of the Transactional Theory of Stress and Coping (Hirooka, 2021) and validated through expert review by two psychologists and one social work specialist.

Overall, when analysing the survey and interview data, it is possible to identify the following variables: independent variables (social and migration status of respondents, social support, and exposure to traumatic events); dependent variables (parameters of psychological well-being measured by the WHO-5 Well-being Index (2024) and the Perceived Stress Scale (Cohen, 1988)); and the mediating variable (coping strategies, identified based on the Brief COPE Inventory).

3.4 Ethical issues

During the course of the study, ethical principles and international standards of academic integrity were strictly followed. All participants received and signed written informed consent forms prior to the survey or interview, with the option to withdraw from participation at any stage. This necessity was based on the fact that the study involved human subjects in interviews and surveys describing such topics as stress and psychological traumas. Particular attention was given to the trauma-informed approach: three members of the expert group who acted as interviewers were trained to manage potential participant reactions when working with traumatic memories. In cases of crisis escalation (four instances), participants were provided with psychological support and additional contact information for psychological assistance centers. Each respondent was briefed on the study's objectives, assured of complete anonymity, and informed of the guaranteed right to withdraw at any stage of the study. Data collection procedures were designed to minimize potential psychological discomfort, ensuring the integrity and confidentiality of the empirical social science research.

4. Results

RQ1. Changes in stress and well-being indicators depending on demographic characteristics

The descriptive statistical analysis discovered that the usual stress level measured by the PSS-10 scale for the whole sample was 23.4 points (SD = 6.2) (Figure 1). It corresponded to a raised level of apparent stress among participants. More than one-third of respondents displayed high stress scores of 25 points or more. A diminished level of stress (below 15 points) was recorded in only 14.5% of participants. The psychological well-being index (WHO-5) was also observed and was around 48.6 points (SD = 14.2). It is meaningfully below the recognised norm characteristically recorded during peacetime. The lowermost points of psychological well-being were

stated among internally displaced persons ($M = 44.2$) as well as inhabitants of territories that had been under occupation ($M = 42.5$).

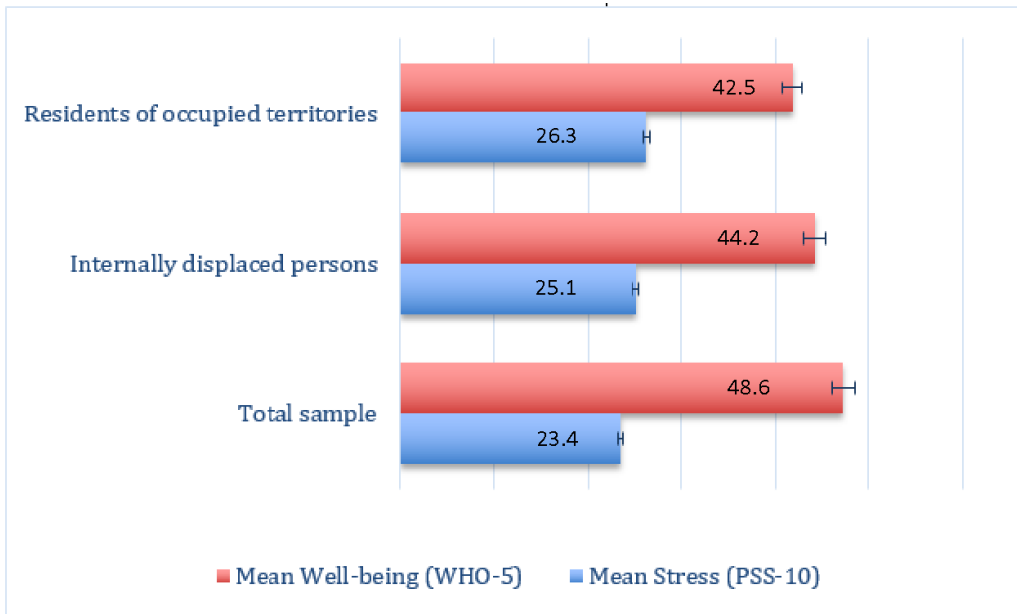


Figure 1. Average levels of stress and psychological well-being

In terms of stress levels by gender, female respondents described advanced scores ($M = 24.6$). The average score among males was minor ($M = 20.7$), $p < 0.01$. An examination of the statistical data grounded on age distribution exposed that the most susceptible group was made up of respondents aged 18 to 29. They most often reported feeling anxiety, sleeplessness, and problems with socialization, amongst other issues.

Comment by Participant 27 (female, 27 years old, IDP from Donetsk region): “It is difficult for me to plan anything in my life, even a day ahead. I constantly feel that everything could collapse again, that life could end at any moment”.

Comment by Participant 45 (male, 18 years old, resident of a village in the Kyiv region that was under occupation): “I try to keep living; to study, I’ve found a part-time job. I live almost a normal life during the day. But when night comes, and I go to sleep, a flood of horrible memories from February–March 2022 comes back to me. I’m afraid to sleep”. Thus, the key statistical data indicate high levels of stress and reduced psychological well-being among respondents. This inclination is chiefly obvious amongst young people, women, and displaced people.

RQ2. Main Coping Strategies for Stress

Through a content analysis of the gathered data, it was possible to categorise common behavioural forms among respondents that can be defined as leading coping tactics. One of the main parameters was social sustenance (Figure 2). According to respondents, they most often sought it from relatives and friends. Sixty-two percent of respondents reported that support from their close social circle helps them to minimise anxiety and regain a sense of self during moments of despair. Among internally displaced persons, this figure rose to 71%, indicating the importance of social connections in a new environment. Respondent 61 (male, 35 years old, IDP) stated: “I probably wouldn’t have endured without the help of my friends. The most important thing is that we don’t even need words to support each other”.

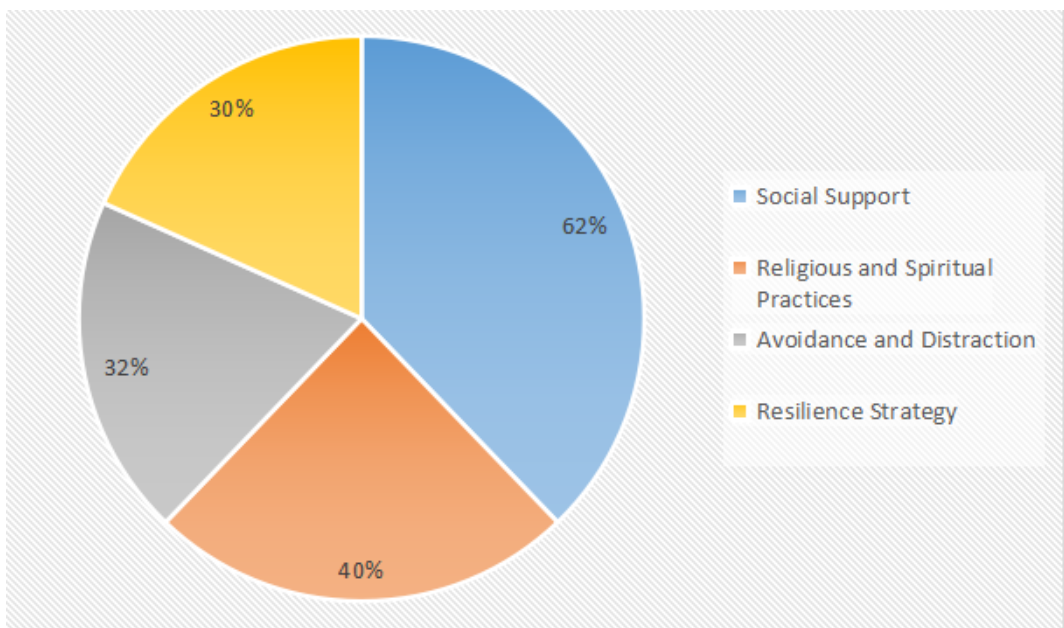


Figure 2. Distribution of the most common coping strategies among respondents

The second most common strategy among respondents was the use of religious and spiritual practices. More than 40% of participants confirmed that regular prayers or even attending religious services help them to stay strong during the most difficult moments of life. Among respondents aged 50 and older, this figure reached 54%.

Another leading strategy was avoidance and distraction. Nearly one-third of respondents indicated that they had limited their consumption of news, use of social media, and conversations with friends and acquaintances about the war. This tactic was most common among individuals aged 18 to 29.

The final strategy in this list was resilience. Thirty percent of respondents noted that they make deliberate efforts to channel their anxiety into “productive activities.”

Members stated coping with stress through sports, volunteering, and education. This strategy was most common among men aged 18 to 45 from frontline regions.

Content analysis of interviews with experts working in the field of psychosocial support also confirmed the findings obtained from the respondent survey (Table 4). Experts reported that among their clients, the most common coping strategy was social support from family and friends (78%). The second most frequent strategy was spiritual practices (61%), followed by active engagement (56%). Avoidance of triggers ranked fourth (46%), which partially coincides with the results derived from the survey data.

Table 4. Distribution of coping strategies based on expert interview data

Strategy	Percent age of experts who mentioned it (%)	Analytical comments	Illustrative quote from the interview
Social support and community cohesion	78%	Experts emphasised that mutual support within families, communities, and among displaced persons is a key resource for psychological resilience.	<i>“In times of crisis, people look for a shoulder nearby. Even in an unfamiliar community, horizontal connections form quickly.”</i> (psychologist, Kyiv)
Religious and spiritual practices	61%	It was noted that turning to faith and religious rituals is particularly common among older population groups and residents of rural areas.	<i>“Prayer or attending church is a ritual that helps to bring order to chaos.”</i> (sociologist, Lviv)
Avoidance of informational triggers	44%	A significant proportion of respondents consciously limit their access to news and social media to avoid additional anxiety.	<i>“People are learning to filter information — they don’t read everything anymore, because it destroys the nervous system.”</i> (psychotherapist, Dnipro).

Strategy	Percent age of experts who mentioned it (%)	Analytical comments	Illustrative quote from the interview
Active engagement (volunteering, work, sports)	56%	Experts pointed to the rise of volunteering practices, which have become not only a way to help others but also a form of self-therapy.	<i>“Volunteering is a way to regain control and feel useful.”</i> (clinical psychologist, Kharkiv)
Professional psychological support	39%	Despite limited access, the number of people seeking help from psychologists and psychotherapists is increasing, particularly among young people.	<i>“Previously, seeking help from a psychologist was a taboo, but now it is becoming normal even in small towns.”</i> (mental health expert, Odesa)

RQ3. Distribution of coping strategies by age, gender, and IDP status

As a result of the comparative analysis, a number of statistically significant differences were identified:

1. Gender differences – among women, the most frequent coping strategy was social support (68% compared to 55% among men, $p < 0.05$). The second most common strategy for women was religious practices (46% compared to 34%). Men, on the other hand, more often chose to change their type of activity, such as engaging in physical exercise, to cope with stress (40% compared to 27%).
2. Age alterations – amongst younger respondents (18–29 years old). The most shared strategy was information escaping (35%). The use of digital platforms for escapism as well (e.g., seeing videos or playing online games). In contrast, older respondents aged 50 and above tended to rely more on spirituality and stable social connections.
3. IDP status – among displaced persons, the need for social support reached 71%. Thirty-three percent of individuals reported finding relief through volunteering activities.

Respondent No. 107 (female, 41 years old, displaced from the Kherson region) said: "Volunteering has brought new meaning into my life. A year ago, it felt like I had no control over anything, but now I feel a certain sense of inner peace."

Thus, the research findings demonstrate that despite the presence of high stress levels among many respondents, most of them actively seek ways to cope with it. A wide range of strategies is employed to achieve a certain level of psychological well-being. Among the key factors influencing the choice of coping strategies are demographic characteristics, IDP status, and the region of residence. Therefore, psychological reactions to wartime conditions represent not only an individual response but also a traceable group behaviour pattern shaped by contextual living conditions.

5. Discussion

According to the research results, a high level of stress and low indicators of psychological well-being were confirmed among Ukrainian citizens, particularly within such population groups as internally displaced persons, residents of territories that had been under occupation, and those living in areas of active hostilities. Interpreting the obtained findings through the lens of the stress and coping theory developed by Lazarus and Folkman demonstrates that the foundation of an individual's psychological response to a stressor lies not in the event itself (the war), but in how the person perceives and appraises the situation, as well as the strategies chosen to manage it (Ahmed, 2022). Overall, it was found that the majority of respondents do not rely solely on one type of coping strategy but instead successfully combine several: both problem-focused strategies (such as volunteering and physical activity) and emotion-focused strategies (such as social support, spiritual practices) are actively used.

The submission of the PERMA model of comfort, containing the notions of optimistic emotions, engagement, relationships, meaning, and accomplishment, allowed for a profounder understanding of the rise and expansion of individual pliability during the war (Farmer, 2021). This feature is strictly connected to another criterion, the accomplishment. It reproduces attainment in new extents. Many Ukrainians are getting new occupations, completing specialised, medical, or military training courses. It raises a sense of renewed resilience. Therefore, despite prolonged crisis circumstances, people are still able to seize and practise the optimistic aspects of well-being.

A comparative analysis of the Ukrainian condition and the practises of people in other regions touched by war allowed identifying resemblances and alterations in how citizens live through and expressively develop such proceedings. Syria and Afghanistan practices demonstrate that the most actual coping tactics are social sustenance and religious practices (Solberg, 2023). Similarly, in Ukraine, this background experiences a notable alteration. The practice of volunteering has changed into an influential tool of self-discipline and support. Concerning Georgia

military events, the consolidation of family groups played a critical role in reinstating psychological resilience (Shkvarok, 2025). Therefore, the Ukrainian outcomes align with global tendencies while also stressing the exclusivity of the phenomenon of civic volunteering as an explicit factor of pliability:

1. In terms of educational psychology, new programmes of psychosocial support should aim at promoting resilience. They could be joined to secondary and higher education curricula.
2. The mental health strategy at the level of governmental institutions should expand the network of accessible mental health services.
3. For community initiatives, a significant feature of speaking about stress management is the advancement of volunteer activities that can provide mutual support as well as personal therapy for the volunteers themselves.

Several limitations were recognised during the course of the study. The major trial lies in the incomplete availability of resources. It leads to a highly irregular supply of psychological facilities across regions. Characteristically, the areas most affected by the war agonise in terms of the greatest lack of quality psychological aid. In addition, the Ukrainian society is still surrounded by a persistent stigma associated with mental health problems. This stigma is most obvious in connections with inhabitants of small towns and rural areas. It results in a low degree of help-seeking behaviour even in critical circumstances. An additional persistent issue is the inadequate number of capable mental health professionals.

Particular attention should be paid to the possibilities of transforming the educational process into a coping tool. As the results of this study demonstrate, the involvement of individuals who have been in conditions of stress caused by martial law for a long time to participate in professional courses, training on providing assistance and language programs acts as a "cognitive anchor". It is such an anchor that gives the individual the opportunity to regain the desired sense of control over their own lives (Zhylin, 2022). Education in wartime is not only a tool for acquiring knowledge, but first of all a form of social therapy that helps to structure time, endowing it with meaning and significance. Thus, the integration of the psychological component into educational programs is not just a recommendation, but a necessary condition for the transformation of collective trauma into post-traumatic growth.

The main conclusion of this paper is that, despite the very problematic conditions of war, the Ukrainian people possess and reveal a strong capacity for the renovation of their mental health and resilience. Through the submission of the Stress and Coping Theory and the PERMA context, it was possible to evaluate the coping strategies that validate their highest efficiency among diverse social groups. The results may serve as a basis for the development of governmental and volunteer programmes in the arena of mental health, as well as instructive initiatives intended to teach people how to interrelate with stress and support others.

6. Conclusions

Given the results of the investigation, numerous coping tactics have established as an influential tool for Ukrainians in dealing with stress factors in terms of war. The regular stress index score was 22.8 out of 40, giving the PSS-10 scale. The comfort indicator was notably small. An average value of 48.6 (SD = 14.2), which is meaningfully below the regularising range. The lowermost scores were noted amongst internally displaced persons (M = 44.2) and residents of territories that had been under occupation (M = 42.5). A thorough content analysis in cooperation acknowledged four main coping strategies most often used by Ukrainian citizens. It was the social provision, spiritual performances, escaping, and active resilience-oriented activities.

The results show the notion that the suitable selection of coping tactics contributes to the conservation of psychological well-being even in protracted crisis circumstances. Issues that really influence citizens' resilience comprise social support and active engagement (such as volunteering and sporting). The results can aid in evolving psychosocial programmes and practical approaches by governmental and volunteer organizations focused on reinforcing the population's mental resilience.

The main approvals at the state level are the educational programmes on psychological resilience involvement and the establishment of psychological assistance. The introduction of resilience training modules in higher education institutions can be of great support. Fostering cooperation with NGOs and mental health organizations at the international level is desirable.

In the upcoming perspective, it will be significant to conduct a longitudinal study in order to examine probable deviations in the psychological comfort of Ukrainian citizens (refugees, internally displaced persons, and people of formerly occupied territories). An additional significant course would be a contrasting analysis of psychological comfort among residents of Eastern European states to assess the efficiency of different coping strategies in post-conflict backgrounds.

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