

REDAKCJA
NAUKOWA

**Andrzej
Sęk**

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NA SZEROKĄ SKALĘ W UKRAINIE,
A TAKŻE PRZECIW PAŃSTWOM EUROPY
ŚRODKOWO-WSCHODNIEJ**

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Psychological Well-Being of Individuals Who Experienced Occupation: Results of an Empirical Study

Dobrostan psychiczny osób, które przeżyły okupację: wyniki badania empirycznego

A survey of individuals who have experienced occupation in the de-occupied communities of the Kharkiv region was conducted by Daryna Sementsova, Master of Psychology

Streszczenie

Artykuł poświęcony jest badaniu dobrostanu psychicznego osób, które przeżyły okupację ziem ukraińskich. Życie pod okupacją wywiera silny wpływ na psychikę, wpływając na stan emocjonalny, kontakty społeczne i dobrostan psychiczny. Dobrostan psychiczny jest uważany za kluczowy składnik jakości życia, który przyczynia się do adaptacji do negatywnych okoliczności. Celem badania było zidentyfikowanie i przeanalizowanie cech dobrostanu psychicznego osób, które przeżyły okupację, oraz określenie strategii jego poprawy. W badaniu empirycznym wzięło udział 72 osoby z obwodu charkowskiego, które były pod okupacją. Do oceny PTSD, lęku, frustracji, agresywności, sztywności, subiektywnego i psychologicznego dobrostanu, a także depresji zastosowano kwestionariusz i zestaw metod psychodiagnostycznych. Wyniki wykazały, że większość respondentów ma istniejące PTSD, przy czym najbardziej wyraźne są natrętne wspomnienia. Dominuje średni poziom lęku, frustracji, niski i średni poziom agresywności i sztywności. Większość osób ma niski poziom subiektywnego dobrostanu, nie jest zadowolona ze swojego życia, ma niską ocenę zdrowia fizycznego i kontaktów interpersonalnych. Dobrostan psychiczny według skali K. Rieffa jest na średnim poziomie u większości, ale występują wyzwania w obszarach rozwoju osobistego i celów w życiu. Według metody Becka większość ma minimalną depresję, ale istnieje odsetek osób z łagodną i umiarkowaną depresją. Badanie podkreśla, że osoby, które przeżyły okupację, są znacząco psychicznie ztraumatyzowane, ale większość nie ma poważnych objawów depresyjnych i wykazuje wystarczającą

siłę wewnętrzną. Osoby, które przeżyły okupację, potrzebują ukierunkowanego wsparcia psychologicznego i wskazówek, aby wyzdrowieć.

Słowa kluczowe: dobrostan psychiczny, okupacja, PTSD, lęk, depresja.

Abstract

The article is devoted to the study of the psychological well-being of individuals who experienced occupation of Ukrainian lands. Life under occupation has a strong impact on the psyche, affecting the emotional state, social contacts and psychological well-being. Psychological well-being is considered a key component of the quality of life, which contributes to adaptation to negative circumstances. The aim of the study was to identify and analyze the characteristics of the psychological well-being of individuals who experienced occupation and to determine strategies for its improvement. The empirical study involved 72 people from the Kharkiv region who were under occupation. A questionnaire and a set of psychodiagnostic methods were used to assess PTSD, anxiety, frustration, aggressiveness, rigidity, subjective and psychological well-being, as well as depression. The results showed that the majority of respondents have existing PTSD, with intrusive memories being the most pronounced. The average level of anxiety, frustration, low and medium levels of aggressiveness and rigidity predominate. Most people have a low level of subjective well-being, are not satisfied with their lives, have a low assessment of physical health and interpersonal contacts. Psychological well-being according to the K. Rieff scale is at an average level in most, but there are challenges in the areas of personal development and goals in life. According to the Beck method, most have minimal depression, but there is a percentage of people with mild and moderate depression. The study emphasizes that people who experienced the occupation are significantly psychologically traumatized, but most do not have serious depressive symptoms and show sufficient inner strength. People who experienced the occupation need targeted psychological support and guidance to recover.

Keywords: psychological well-being, occupation, PTSD, anxiety, depression.

In recent years, the global community has witnessed numerous geopolitical conflicts that have resulted in certain regions and territories being occupied. Since 2014, 7% of Ukrainian territory has been occupied. Since the beginning of Russia's full-scale invasion, in addition to Crimea Autonomous Republic, part of Luhansk and Donetsk regions, the territories of Zhytomyr, Zaporizhzhia, Kyiv, Mykolaiv, Odesa, Sumy, Kharkiv, Kherson and Chernihiv regions have been temporarily occupied. Currently, parts of Zaporizhzhia, Mykolaiv, Kharkiv and Kherson regions remain

under occupation. Living under occupation takes a heavy toll on human psychology, affecting their emotional state, social contacts and psychological well-being. Residents of the de-occupied territories are affected by their experiences and need psychological help and support.

Psychological well-being is considered to be one of the key components of the quality of human life and plays a crucial role in the formation of personal resources that contribute to adaptation to negative external circumstances. Under the occupation, well-being, as well as psychological well-being, changes significantly, so it is important to understand what problems a person may face, what factors support or undermine it. Research on this topic can provide important information for psychologists, educators, social workers, and other professionals working with victims of the occupation. The conclusions of the study will be useful for developing strategies for psychosocial support and assistance.

According to scientific research, psychological well-being has been considered in various aspects, namely: subjective happiness experience, well-being and life satisfaction (R. Biswas-Diener, N. Bradburn, E. Diener, C. Diener, T. Kashdan, L. King, R. Lucas, S. Oishi), happiness, personal development and self-education (L. Deci, C. L. M. Keyes, R. Ryan, K. Ryff), hedonistic approach to the well-being problem (E. Diener, D. Kahneman, N. Schwarz); new conceptual approaches to the well-being definition (T. T. C. So, F. A. Huppert) mental health improvement, social well-being (A. Ismail, C. L. Keyes, M. Salama-Younes); happiness and self-realisation of one's own potential (M. E. P. Seligman). E. Erikson, A. Maslow, C. Rogers, C. G. Jung and others also touched upon this problem in the context of positive mental activity.

Ukrainian scholars investigate various aspects of psychological well-being, including its essence, structure, and role in the development of future professionals (L. Serdiuk); personal well-being in the professional sphere of life activity (N. Volynets); psychological well-being self-determination (N. Volodarska, I. Danyliuk, O. Penkova, L. Serdiuk, V. Turban, et al.); post-traumatic recovery of life activity (T.M. Tytarenko); ecological and psychological determinants of subjective well-being (O. Vernik, O. Vovchyk-Blakytina, T. Kyrpenko, O. Pavlenko, O. Rudomino-Dusiatska, Yu. Shvalb); personal and situational determinants of well-being under modern life conditions (K. Vasiuk, Yu. Korotsynska, Zh. Sydorenko,

et al.); development of resilience to combat-related trauma (O. Kolesnichenko); the impact of anxiety on women's psychological well-being (O. Briukhovetska, L. Inzhyievska, T. Chausova); professional well-being of defectologist (L. Zhukova, V. Kramchenkova); and the axiological aspect of life (Zh. Virna), and others. The problems of psychological well-being violations caused by the war in Ukraine have been studied by O. Borysova, S. Bubniak, J. Buchik, I. Haletska, O. Zinchenko, O. Znatkova, V. Kerdyvar, Z. Kysarchuk, M. Klymanska, N. Kovalisko, V. Kovich, O. Kulha, H. Lazos, V. Nikitina, Ya. Omelchenko, V. Podshyvalkina, M. Hall, V. Khrystenko, and others.

This article presents the results of an empirical study investigating the psychological well-being and problems experienced by survivors of the occupation.

The object of our study is an individual psychological well-being. Researchers define this concept in different ways according to their own goals and value priorities: a balance between positive and negative feelings of a person, which provides a subjective sense of happiness and overall satisfaction from life (N. Bradburn)¹; is a basic subjective construct that reflects a person's perception, and assessment, their own functioning in relation to their full potential; a complex, integrative phenomenon that characterizes the personality positive functioning, is expressed in the subjective sense of life satisfaction, self-realization, and depends on the subjective quality of the individual's communication with people nearby; a state in which a person experiences positive emotions, interacts positively in social relationships and society, and, most importantly, is free from mental disorders (K. Ryff, C. Keyes)²; the result of satisfying three basic psychological needs significant for psychological growth, integrity, and the experience of well-being (autonomy, competence, relatedness) (R. Ryan & E. Deci)³; the potential capabilities and resources for improv-

¹ Bradburn N. M., *The structure of psychological well-being*, Chicago 1969.

² Ryff C. D., Keyes C. L. M., *The structure of psychological well-being revisited*, "Journal of Personality and Social Psychology" 1995, Vol. 69, p. 719-727.

³ Ryan R.M., Deci E. L., *Self-determination theory and the facilitation of intrinsic motivation, social development, and well-being*, "American Psychologist" 2000, Vol. 55 (1), p. 68-78.

ing and maintaining the individual's mental health (C. Rogers)⁴. They also define it as a subjective individual-personal phenomenon that reflects the individualization processes and differentiation, the self-knowledge objectification through the formation of the psychological well-being image based on the individual's subjective relations with oneself; a multidimensional psychological construct that encompasses a broad sphere of positive states experiences and personal traits, inner comfort and life satisfaction in its various aspects, and the happiness level in assessing the life quality, the need for self-development in the experiencing context and sensing one's own growth as a process of self-improvement, the meaningfulness and purposefulness of development and full-fledged functioning of the individual in the temporal past, present, and future life continuum⁵. It is an integral indicator of the individual's orientation degree toward the realization of the main positive functioning components, as well as the degree of realization of this orientation, which is subjectively expressed in the happiness feeling, satisfaction with oneself and one's life, functions dynamically and thus constitutes a motivational parameter of the personality, the degree of which depends on the realism, structure, integrity (coherence of the past, present, and future), the one's attitudes system and life perspective, including goals, plans, values, and aspirations⁶. It is a complex cultural and psychological phenomenon, where the very idea of well-being is always embedded in and corresponds to certain general cultural notions about the meaning and life value, and the forms of its experience acquire different content and connections with other emotions (Yu. Shvalb)⁷, etc.

⁴ Rogers C.R., *Client-centered Therapy: Its Current Practice, Implications and Theory*, Boston 1951.

⁵ Волинець Н.В., *Психологічні особливості особистісного благополуччя в професійній сфері життєдіяльності: монографія*, Хмельницький 2019.

⁶ Сердюк Л.З., *Структура та функція психологічного благополуччя особистості*, [в:] Актуальні проблеми психології. Т. V: Психофізіологія. Психологія праці. Експериментальна психологія. Вип. 17, Київ, 2017, s. 128.

⁷ *Еколого-психологічні детермінанти суб'єктивного благополуччя особистості: монографія*, Ю. Швалб (ред.), Київ; Львів 2021., s. 23.

As key components of an individual's psychological well-being, K. Ryff and C. L. M. Keis identified: positive relationships with others, characterized by trust and care; self-acceptance (a positive evaluation of oneself and one's life); autonomy (the ability to follow one's own beliefs); competence (control over the environment and the ability to effectively manage one's life); the presence of goals that provide direction and meaning in life; and personal growth as a sense of continuous development and self-realization. According to their view, important aspects of psychological well-being also include age-related characteristics, individual traits, family status, professional activity, education, volunteer work, religious experiences, health status, biological factors, positive social perception, and therapeutic interventions⁸.

A variety of psychological factors influence a person's well-being. Among them are the optimism level, positive experiences, "wealth, satisfaction in the past, optimism for the future, and happiness in the present"⁹, opportunities for self-realisation, purpose life, psychological suffering absence, and the social environment and relationships with others.

Results of an empirical study of the psychological well-being of those who survived the occupation

The purpose of this study is to identify and analyse the peculiarities of the human psychological well-being who have survived the occupation¹⁰. The study aims to gain a deeper understanding of the psychological impact of the occupation on the human psyche, identify the psychological

⁸ Ryff C. D., Keyes C. L. M., *The structure of psychological well-being revisited*, "Journal of Personality and Social Psychology" 1995, Vol. 69, p. 719–727.

⁹ Bloodworth A., McNamee M., Bailey R., *Sport, physical activity and well-being: An objectivist account*, "Sport, Education and Society" 2011, № 17 (4), p. 497–514.

¹⁰ A survey of individuals who have experienced occupation in the de-occupied communities of the Kharkiv region was conducted by Daryna Sementsova, Master of Psychology.

difficulties they face, and identify possible strategies to improve their psychological well-being. The study of these aspects can make a significant contribution to the development of effective psychosocial support programmes and help create conditions for improving the life quality and adaptation affected by stressful situations, including the occupation.

The empirical study of psychological well-being involved 72 people who lived in Kharkiv region during the occupation. Their experiences and feelings provide a unique opportunity to understand how the occupation affects the psychological well-being of an individual. The collected data and analysis allow to understand the effects of the occupation on mental health and develop the recommendations for their support and improve the psychological well-being of those affected.

In order to get to know the respondents in more detail and find out the problems they faced during and after the occupation, a questionnaire was developed that included 9 questions, which allowed us to find out gender, age, education, residence change after 24.02.2022, stay in occupation, duration of stay in occupation, seeking psychological help, and respondents' problems during and after the occupation (see Table 1).

Table 1 – General characteristics of the research participants (own work)

N	Characteristics	Results
1	Gender	Women:83,3% Men: 16,7%
2	Age	18-29 years old – 11.1% 30-40 years old – 13.9% 41-55 years old – 55.6% 56-65 years old – 19.4%
3	Residential change	Have not changed their residence place – 83.3% Changed their residence place and returned – 11.1%. Changed residence place and temporarily live elsewhere – 5.6%
4	Education	Secondary education – 22.2% Higher education – 63.9 % Incomplete higher education – 13.9 %
5	Being under occupation	100% of people
6	Seeking psychological help	“No, there is no need” – 58.3% “No, but would like to” – 19.5% “Yes” – 11.1% “Difficult to answer” – 11.1%

A psychodiagnostic techniques set was also used: "PTSD Self-Assessment Scale (PCL-5)", "Self-Assessment of Anxiety, Frustration, Aggression, and Rigidity" (adapted version of the G. Eysenck), "The Modified BBC Subjective Well-being Scale (BBC-SWB)", "The scale of psychological well-being" by K. Ryff (adapted by M. Lepeshynsky), "Beck's Depression Inventory (BDI)".

Psychological problems of the occupation survivors

The influence of war on a person is always destructive. People have to go through traumatic events on a daily basis, and they face a number of problems, ranging from the the ability loss to meet their basic needs to psychological problems. In any case, the well-being sense in various aspects disappears. Here are the main problems, including psychological ones, faced by occupation survivors, which we identified through the survey

According to psychologists (A. Maslow, P. Young, W. Cannon), psychological problems of an individual are closely related and largely correlated with the satisfaction level of his or her basic needs. For example, A. Maslow notes that people who have most of their basic needs met can be considered mostly satisfied, i.e. psychologically well-adjusted, and therefore, the most complete (and healthy) creativity can be expected from them¹¹.

According to A. Maslow's hierarchical human needs system, the most important needs for a person are physiological needs, the need for safety, love, respect and self-realisation. The most powerful of all needs are physiological needs (the need for food, water, shelter, rest, and sexual needs). According to Maslow, "In concrete terms, this means that a person who is extremely deprived of everything in life is likely to be motivated by physiological needs rather than any other. A person who lacks food, security, love and respect is likely to crave food more than anything else." Moreover, "if all the needs are not met, and then physiological needs

¹¹ Maslow A. H., *A Theory of Human Motivation*, "Psychological Review" 1943, № 50, s. 372.

dominate the body, all other needs may simply not exist or be pushed to the background"¹². These needs are the most important for survival.

During the war, under occupation, the provision level of basic needs is significantly reduced or even impossible. According to the respondents, there was a real threat to their lives and health due to hostilities and heavy shelling in the community, arrests, repression and enemy brutality, which has a significant psychological impact, causing strong fear emotions, helplessness, uncertainty, leading to constant expectations of danger, tension (even during relatively calm periods), psychological disorders, depression and apathy. The hostilities often put people in a position to choose between the danger of staying at home and the risk of moving to safer areas.

In occupied territories where hostilities are taking place, there is often a food shortage due to inadequate supply and critical restrictions on and control of resources by the occupying forces. Feeling hungry, being uncertain about whether there will be enough food and drinking water, and having limited access to them can lead to decreased energy levels, loss of vitality, stress and apathy. These issues affect both physical and mental health, increasing the risk of depression and anxiety disorders.

The loss of housing due to destruction or illegal occupation is also psychologically challenging for people under occupation. This is exacerbated by the inability to restore or fairly demand the return of housing through public authorities, as well as by limited or restricted access to social services. This causes a sense of loss, injustice, frustration, hopelessness and significantly worsens their psychological well-being.

Another equally important problem during the occupation is the limited access to medical supplies. This is a serious factor, as vital medicines, medical procedures and medical care may not be available. People who constantly use stabilising medicines or need regular treatment and medical support may face the threat of deteriorating health due to their lack of access.

The lack of light can have serious consequences for the physical and psychological well-being of people under occupation, primarily affecting their mental state. Lack of lighting in the dark can cause stress, anxiety

¹² Ibid., s. 372.

and a sense of insecurity, especially in the context of occupation. Providing a light source is important for maintaining a sense of security and normalising sleep. Lack of basic living conditions (electricity, gas and water supply), items, clothing and footwear can also create additional discomfort for people in the occupied territories, leading to unsanitary conditions, diseases and epidemics.

Another important human need is the need for security, which is the need to be protected from physical and psychological dangers from the world around us and to be sure that physiological needs will be met in the future.

Life under occupation is full of various dangers: threats to life, repression, arrests, physical violence, rape, loss of housing, property, work, health, inability to provide a decent life for oneself and family, etc. All of this can lead to constant feelings of fear or terror, as well as a sense of instability and loss of control over one's own life. There may also be a fear for one's own life, as well as for the lives of one's family and friends. Terror is caused by the cruelty and situations unpredictability. Anxiety is caused by constant stress resulting from threat and uncertainty. People worry about their own safety and the future of their loved ones. Excessive anxiety can affect their daily functioning. For a person who has been in danger for a long time, the search for safety can become a dominant goal, for him or her "almost everything seems less important than safety (even sometimes physiological needs that are met are now underestimated). A person in this state, if it is extreme enough and chronic enough, can be described as living almost for safety"¹³.

Constant stress, anxiety, fear and uncertainty caused by insecurity can lead to physical and emotional fatigue, exhaustion, panic attacks, apathy, vulnerability, a loss of energy, an inability to cope with one's usual duties and activities, and a feeling of helplessness and uncertainty about the future. In contexts of instability, uncertainty and unpredictability, as well as the constant threat of possible hostilities, these states can deepen and continue even after the threats and dangers have been eliminated. This can lead to anxiety, post-traumatic stress disorder, obsessive-compulsive

¹³ Ibid., s. 374.

disorder and depression, as well as other disorders. This, in turn, can affect family relationships, social interaction, and quality of life in general.

Children are particularly affected by insecurity. An unreliable, unsafe or unpredictable world causes a child to feel anxious and unsafe. As A. Maslow notes, "the ordinary child's encounter with new, unfamiliar, strange, uncontrollable stimuli or situations too often causes danger or a reaction of terror, such as loss or even separation from parents for a short time, encountering new faces, new situations or new tasks, the sight of strange, unfamiliar or uncontrollable objects, illness or death"¹⁴. A child should be provided with a safe, orderly, predictable, organised world that he or she can rely on, where unexpected, uncontrollable or other dangerous things do not happen, and where there are omnipotent parents who protect and defend him or her from evil.

At the same time, in emergency situations such as war, occupation, physical violence or societal disorganisation, the need for security acts as an active and dominant mobiliser of all the body's resources, enabling survival and the ability to cope with many difficulties¹⁵.

Under the occupation, the survey results show that social ties are significantly disrupted, and therefore, the needs for love, affection and belonging are not met or not fully met. Under the occupation, the aggressors are trying to change people's affiliation with Ukraine and the Ukrainian people into hostility, the occupiers can interfere in the personal lives of citizens, violating their rights and freedoms, people around them can manifest themselves in a completely different way (for example, supporting the occupation authorities, cooperating with them), which leads to the destruction of the usual relationships between acquaintances, friends, neighbours and other community members and often makes it impossible to support and help each other in the difficult conditions under occupation.

Lack of love, affection and belonging can lead to a person feeling the absence of friends, loved ones or children more acutely than ever¹⁶. In the context of the occupation, this is significantly exacerbated by the

¹⁴ Ibid.

¹⁵ Ibid., s. 376.

¹⁶ Ibid.

restriction of ties with family and friends, especially when people find themselves on different sides of the frontline. According to the respondents, the most difficult challenges were the inability to receive news and reliable, objective and trustworthy information due to the lack of mobile and internet connections, restrictions on freedom of speech and information resources, which leads to rumours and panic, lack of support from family and friends, fear for the future, and a sense of isolation. In addition, the hostile information space, where there is no true information about the state of hostilities and events in Ukraine and the region, as well as aggressive Russian propaganda, negatively affect the psychological well-being of a person under occupation. All of this can have a number of negative consequences: psychological discomfort and a sense of inner tension due to a lack of usual social contact; fear for loved ones and a sense of loss of control over the situation and one's life due to uncertainty; anxiety disorders and depression due to loneliness and a lack of support; insomnia, neuroses, and a deterioration in general health due to constant stress caused by danger to relatives. Social isolation and a loss of connection with reality can be caused by fear and distrust of others, while reduced self-esteem and a deterioration in health can be caused by internal conflicts and a lack of certainty in one's beliefs. Problems in establishing new social contacts can exacerbate psychological problems, while disruption to internal balance and a sense of loss of belonging can be caused by changes in social norms and interactions. Emotional instability and a loss of meaning in life can also occur. In such conditions, people become vulnerable to manipulation and propaganda from the occupiers, who can alter or hide facts to achieve their goals.

One of the important elements of psychological well-being is self-esteem, as well as respect and recognition from others. As noted by A. Maslow, "all people in our society (with a few pathological exceptions) have a need or desire for a stable, firm, usually high self-esteem, self-respect, and respect for others"¹⁷. The scientist defines a firmly grounded self-esteem as "something that is firmly based on real capabilities, achievements and respect from others". The need for respect, in his opinion, is, firstly, "the desire for strength, for achievement, for adequacy, for

¹⁷ Ibid., s. 379.

confidence in the face of the world, and for independence and freedom"; secondly, it is "the desire for reputation or prestige (defined as respect or honour from other people), recognition, attention, importance, or gratitude"¹⁸. By satisfying this need, a person can feel confident, feel value, strength, ability and adequacy to be useful and necessary in the world.

Under occupation, the enslaved people are usually devalued and humiliated, their achievements, competences and values are not recognised and denied. This can lead to feelings of inferiority, weakness and helplessness, which in turn "causes either basic discouragement or compensatory or neurotic tendencies"¹⁹. This condition is exacerbated by problems with employment. The inability to get a job can affect various aspects of life and psychological well-being:

- Firstly, job loss can disrupt financial stability, causing anxiety and uncertainty about the future. Without an income, a person may feel dependent on others, which can lead to stress and damage self-esteem.
- Secondly, work can be a source of self-identity and social recognition for many people; the loss of this aspect can cause a sense of significance loss, especially in a conflict situation;
- Thirdly, uncertainty about future professional development can cause anxiety and stress; a person may lose sight of their career goals, which can affect their overall mental state.
- Fourthly, the lack of work opportunities can affect social relations; a person may feel alienated from society and collective activities, which causes feelings of loneliness and isolation.

Under the occupation, a person also does not have full opportunities for development, self-improvement and self-realisation, as enterprises, scientific institutions, educational, leisure, service and other sectors do not function properly. When a person does not do what he or she is capable, he or she may experience dissatisfaction and anxiety. A. Maslow notes: "What a person can be, he or she should be" and calls this need the need for self-actualisation²⁰. Personal growth as a sense of continuous development and self-realisation is an important component of

¹⁸ Ibid., s. 382.

¹⁹ Ibid.

²⁰ Ibid., s. 385.

psychological well-being. While stressful situations arising under occupation can complicate this process, making it difficult and even painful, they can also present a challenge and provide a powerful stimulus for personal growth.

The occupation can deprive a person of clear life goals and prevent them from finding meaning in their existence when faced with constant stress and threats. The lack of prospects, purpose in life, uncertainty, instability and unpredictability of life under occupation can lead to a sense of despair, when a person loses faith in the future, and doubts about their own ability to control their life. It can also lead to anxiety, feelings of helplessness and vulnerability, and a sense that one's existence has no meaning.

After the occupation, people face a number of complex problems that determine their daily life rhythm and mental state. This is an adaptation period to new realities, where psychological support and counselling are important to help people recover psychologically, find the meaning of life, set clear goals for the future and overcome material and psychological problems.

The emotional state of society is unpredictable and ranges from euphoria to negative manifestations. The population periodically experiences periods of great optimism, caused by the successes of the Ukrainian Armed Forces, which are widely celebrated and discussed in the media. Such moments are filled with faith and hope for a better future, but these periods of euphoria are often accompanied by negative emotions set that arise from the realisation of the price that society has paid for these successes. An example, this is the situation after the de-occupation of settlements, when at first people experience boundless joy, relief and faith in the best, but positive emotions quickly change to negative ones, such as fear, despair and panic, when the horrific crimes committed by the occupying army are revealed, and all the negative consequences (destruction, losses, etc.). This emotions fluctuation reflects the complexity of the psychological state of society, which is forced to adapt to the challenges and stresses associated with war and occupation. This phenomenon is becoming the focus of research aimed at understanding the impact of occupation events on the emotional stability and citizens' well-being.

Given the sustained restrictions such as curfews and document checks, the population may initially feel some hope that the conflict will end

quickly and they can return to their normal lifestyle. However, as time passes and hostilities continue for an extended period of time, this hope may begin to fade, and negative mental health conditions such as depression and panic may increase. The long-term implementation of martial law can also lead to depression among the population, who must cope with daily challenges under restrictions and threats. Uncertainty and fear of the future can have a negative impact on the overall mental state of an individual.

Psychological support and the effective adaptation strategies development are becoming main tasks for ensuring the mental well-being and rehabilitation of the occupation survivors.

Research results with psycho-diagnostic methods

To determine the presence and severity of post-traumatic stress disorder symptoms, we used the PCL-5 methodology. The results of the survey used in this methodology are presented in Fig. 1. This shows the distribution of respondents based on their total score, enabling us to assess the presence or absence of PTSD.

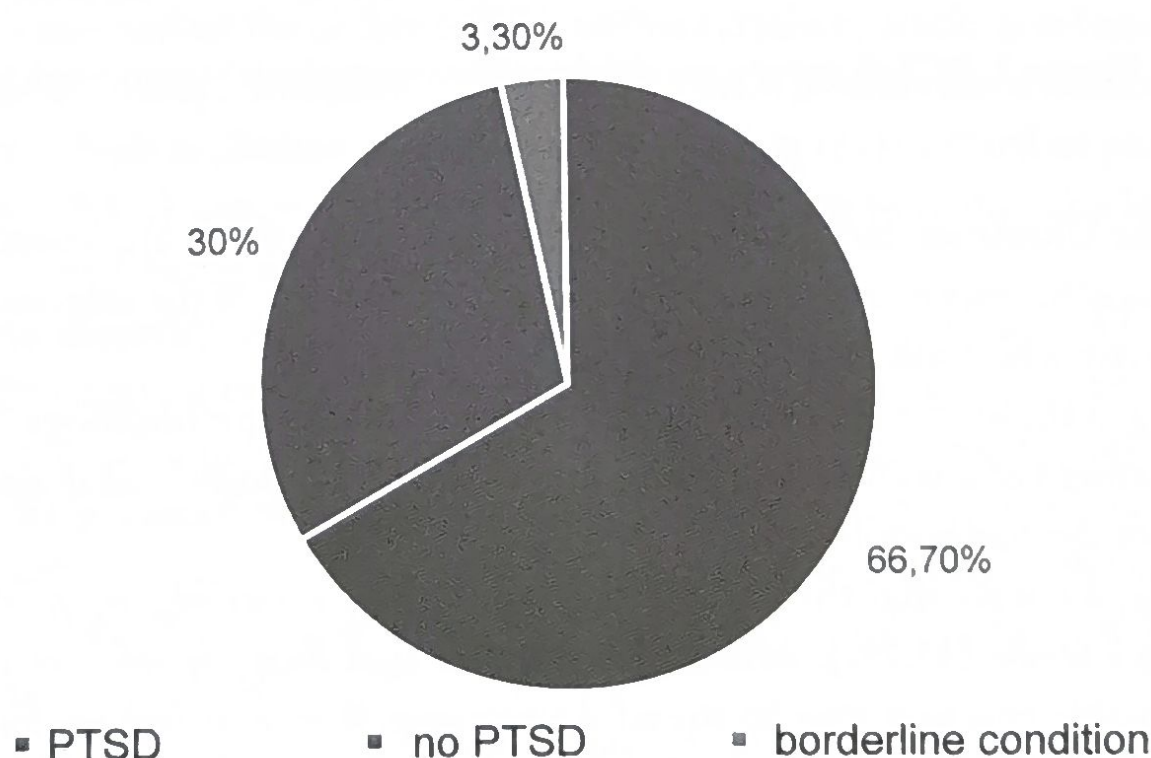


Figure 1. Results of the PCL-5 survey (quantitative analysis) (own work)

Each sector presented in the diagram (Fig. 1) shows different levels of PTSD severity: “no PTSD”, “borderline condition” and “PTSD”. In Fig. 1, the majority of respondents (66.7%) have PTSD, 30% of respondents have borderline condition, and 3.3% have no PTSD.

A qualitative analysis of PTSD manifestations suggests that the most pronounced symptom in the respondents group is intrusive memories (1.78), somewhat less pronounced are avoidance (mean score – 1.6) and changes in arousal and reactivity (1.57), and the least pronounced are negative thoughts and emotions (1.42) (see Fig. 2). This indicates a fairly strong psychological trauma of persons who were under occupation and its impact on the emotional state of respondents.

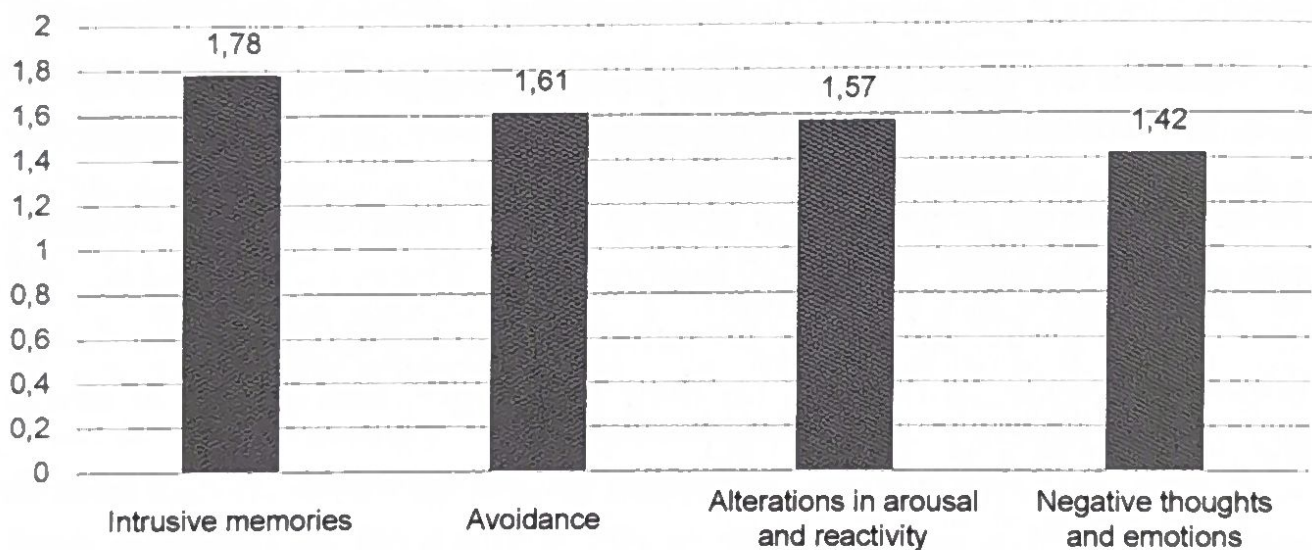


Figure 2. PCL-5 survey results (qualitative analysis) (own work)

The Ukrainian territories occupation is a strong traumatic event that has significantly affected the psychological well-being of the respondents majority who took part in our research.

Fig. 3 shows the results of the survey based on the methodology “Self-assessment of anxiety, frustration, aggression and rigidity” (adapted version of the methodology by H. Eysenck).

Fig. 3 shows that the respondents are mostly experiencing medium anxiety levels (47.2%), which may indicate that most people are in an acceptable reaction state to stressful situations, they may feel anxious or nervous, but this does not interfere with their daily functioning. Low levels of anxiety indicate a relatively calm approach to life for about a third

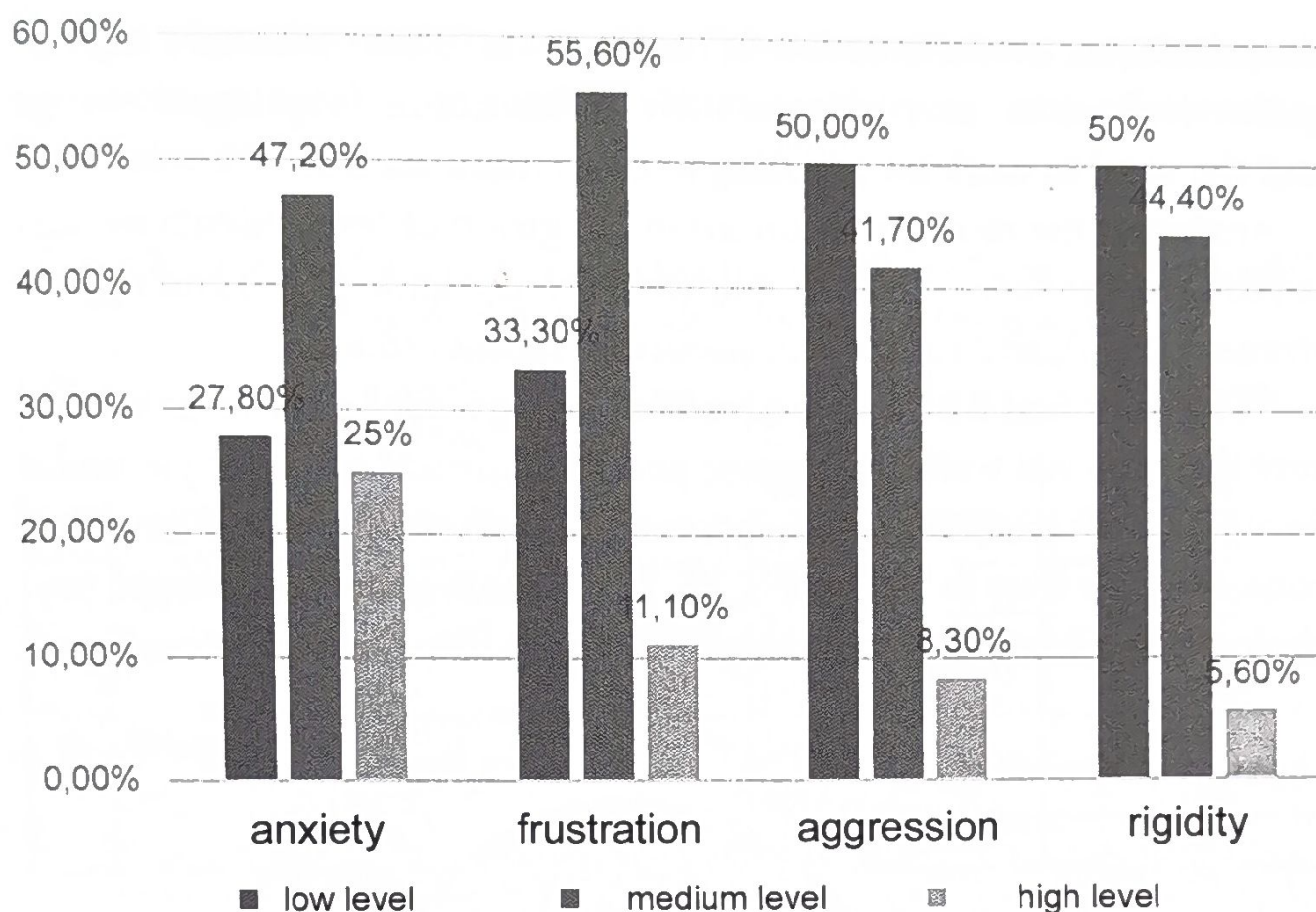


Figure 3. Results of the survey based on the methodology "Self-assessment of anxiety, frustration, aggression and rigidity" (own work)

of the group (27.8%), while those with high levels (25%) may need additional attention and support.

In terms of frustration, the most common level is medium (55.6%), which may reflect the ability to cope with a certain setbacks level and difficulties, although not without emotional stress. Low levels of frustration indicate high resilience and self-esteem in more than a third of participants (33.3%), while high levels (11.1%) may be a potential challenges sign in well-being and behaviour.

The majority of respondents also showed low (50%) and medium (41.7%) aggression levels. A low level of aggression is a calm indication and controlled behaviour, while a medium level of aggression may indicate the presence of internal tension, which sometimes manifests itself in conflict situations. A high level of aggression is present in the smallest number of respondents (8.3%) and signals the need to develop anger management skills.

Rigidity is mostly represented at low (50%) and medium (44.4%) levels, which may indicate flexibility in behaviour and decision-making. At

the same time, a small number of respondents (5.6%) showed a high rigidity level, which may indicate their difficulties in adapting to change and the need to work on adapting to new circumstances.

Anxiety is the most pronounced in the group of respondents we surveyed (average score – 10.17), followed by frustration (8.86) and aggressiveness (7.78), and the least pronounced rigidity (6.89).

“The Modified BBC Subjective Well-being Scale” allowed us to measure the personal well-being sense and life satisfaction of people under occupation, in particular, how successful, satisfactory and fulfilling they consider their lives to be (see Fig. 4). The criteria assessed included psychological well-being, physical health and well-being, and relationships²¹.

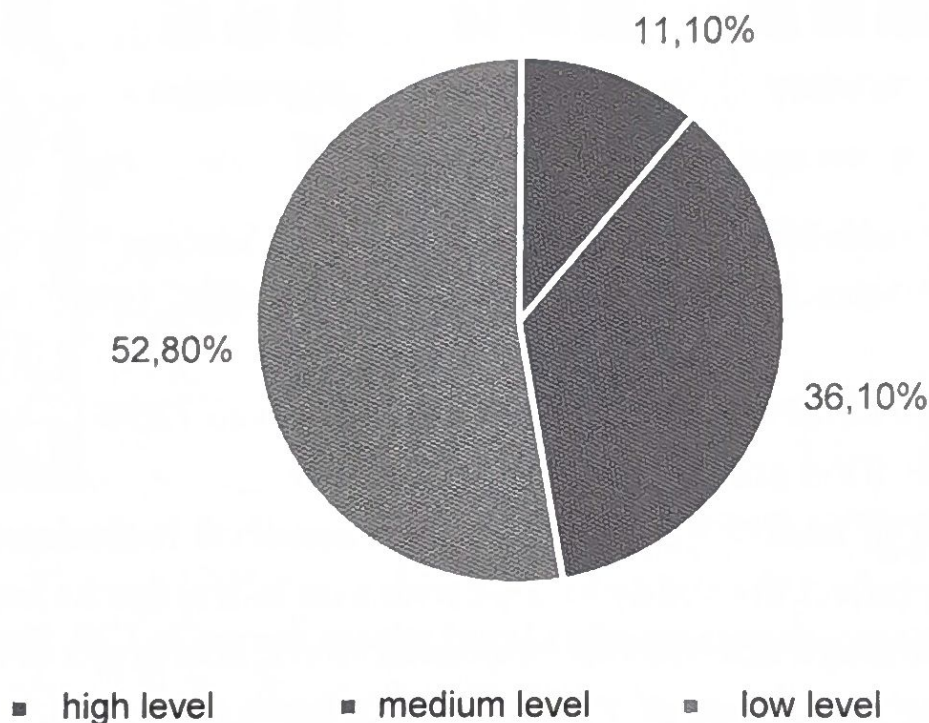


Figure 4. Subjective well-being of individuals who have experienced occupation (own work)

As shown in Fig. 4, a high level of subjective well-being was found in only 11.1%, an average level – in 36.1%, and a low level – in 52.8% of respondents. The occupation majority survivors are generally dissatisfied with their lives and assess them as not good enough.

²¹ Pontin P., Schwannauer M., Tai S., Kinderman M., *A UK validation of a general measure of subjective well-being: the modified BBC subjective well-being scale (BBC-SWB)*, “Health and Quality of Life Outcomes” 2013, № 11 (1), s. 150.

Also was analysed the results of the survey about psychological well-being subscales, physical health and well-being, and relationships (see Table 2).

Table 2. Results of the survey with the methodology “The Modified BBC Subjective Well-being Scale” (by scales) (own work)

Nº	Scale	Level	Percentage
1	Psychological well-being	Low	30,6%
		Medium	55,6%
		High	13,8%
2	Physical health and well-being	Low	66,7%
		Medium	22,2%
		High	11,1%
3	Relationships	Low	55,6%
		Medium	33,3%
		High	11,1%

As shown in Table 2, the respondents majority (55.6%) have an average level of psychological well-being, which allows them to cope with everyday problems and challenges. 30.6% have a low well-being level, which indicates significant emotional difficulties and dissatisfaction with life. A high psychological well-being level was found among the smallest number of respondents (13.8%), who have good emotional health and are generally satisfied with their lives.

As for the respondents' satisfaction with their physical health, the majority of participants (66.7%) also showed a low level. This indicates physical health problems or physical activity lack. An average physical health level and well-being was found among 22.2% of respondents and a high level – 11.1%. So, it can be argued that one third of the occupation survivors have good health and are fairly physically active.

The results analysis of the “relationships” scale showed that the majority of respondents have a low level (55.6%), which indicates difficulties in relationships and dissatisfaction with interpersonal contacts. The average level was found in 33.3% and the high level in only 11.1% of respondents, who have healthy social ties, mutual understanding and support.

Therefore, most survivors of the occupation have a low subjective well-being level, with psychological well-being at an average level, and

a much lower assessment of their own physical health and interpersonal contacts.

"The scale of psychological well-being" (C. Ryff, adaptation by M. Lepeshynskyi) is an effective tool for measuring various psychological well-being aspects and allows the deeper psychological state understanding and life quality of an individual.

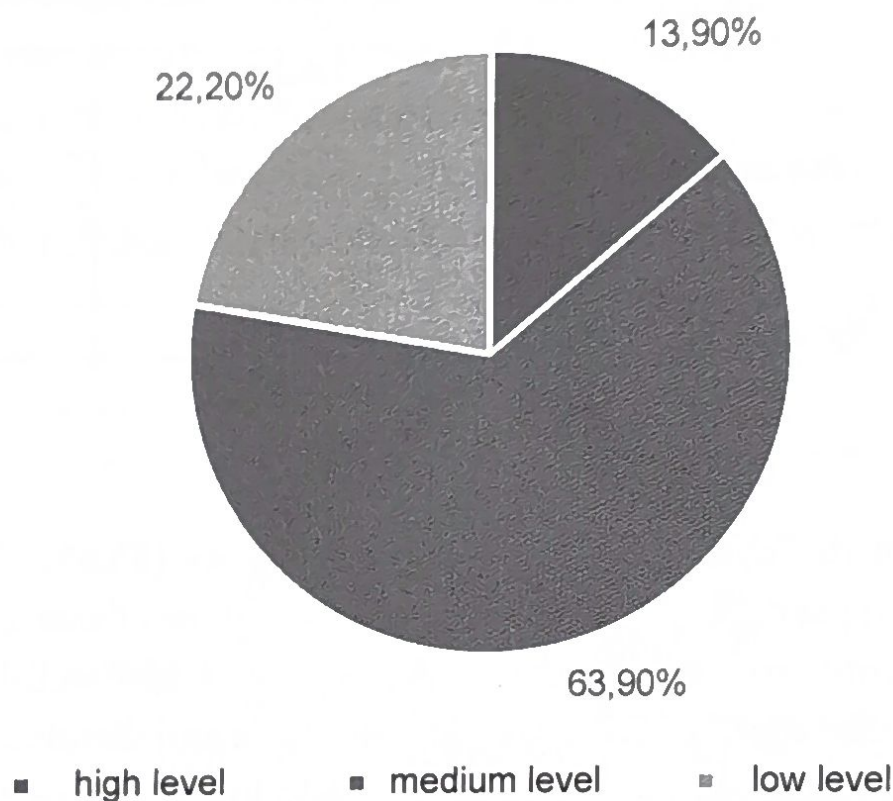


Figure 5. The level of psychological well-being according to the scale of psychological well-being by C. Ryff (own work)

As it is shown in Fig. 5, the majority (63.9%) of occupation survivors have an average psychological well-being level, with 22.2% of respondents having a low psychological well-being level and 13.9% having a high level, which largely correlates with the results of "Modified BBC Subjective Well-being Scale" (see Fig. 4 and Table 2).

The subscales survey results, which give a more complete and detailed picture of the psychological well-being of survivors of the occupation, are presented in Table 3.

As shown in Table 3, the survey results show that the majority of respondents (72.2%) experience an average level and 16.7% of respondents experience a low positive relationships level with others, which may be due to isolation experiences and difficulties in showing empathy and

Table 3. Survey results according to «The scale of psychological well-being» methodology by C. Ryff (subscales) (own work)

Nº	Scale	Level	Percentage
1	Positive relationships with others	High	11,1%
		Medium	72,2%
		Low	16,7%
2	Independence	High	22,2%
		Medium	66,7%
		Low	11,1%
3	Environment management	High	11,1%
		Medium	77,8%
		Low	11,1%
4	Personal growth	High	11,1%
		Medium	63,9%
		Low	25,0%
5	Goals in life	High	8,3%
		Medium	80,6%
		Low	11,1%
6	Self-acceptance	High	19,4%
		Medium	63,9%
		Low	16,7%
7	Total score	High	13,9%
		Medium	63,9%
		Low	22,2%

care as a result of stressful events, such as the occupation. At the same time, 11.1% have a high score on this subscale, which indicates their ability to maintain close and trusting relationships despite difficult life circumstances.

Independence was found to be high in 22.2% of respondents and medium in 66.7% of respondents, indicating their sufficient independence and ability to withstand social pressure as a response to the need for self-preservation and self-assertion under occupation. A low independence level was found in 11.1% of participants, indicating that their well-being depends on the others' opinions, which may also be a stress consequence and instability.

The majority of respondents (77.8%) have an average environmental control level, which emphasises a control sense over their own lives and a positive perception of personal progress, and the same number

of respondents have high and low environmental control levels (11.1% each).

The majority of respondents showed an average personal growth level (63.9%). A quarter of the respondents (25%) showed a low personal growth level, and only 11.1% showed a high level, which may indicate a lack of internal resources and the desire of survivors for self-development, apparently due to difficult living conditions and frustration.

The majority of respondents (80.6%) have medium-level goals in life, 11.1% have low-level goals, and 8.3% have high levels. It can be stated that the internal sense of consciousness and meaningfulness of their life path is somewhat insufficient among survivors of the occupation. Therefore, it is important to work on defining goals in life, which will help them to recover better and faster from traumatic events.

Self-acceptance was found among respondents at an average level in 63.9%, at a high level in 19.4% and at a low level in 16.7%, which suggests that individuals who have lived through occupation have a critical attitude towards themselves and need psychological support to improve their self-esteem. However, one-fifth of all is capable of maintaining a positive attitude toward themselves and their past, even in light of the hardships they have experienced.

The C. Ryff Psychological Wellbeing Scale survey results indicate sufficient internal strength and respondents resilience, as well as existing challenges and problems, and the need for targeted support to improve survivors of the occupation emotional well-being. It is important to provide additional psychological assistance and psychological support for those with low scores on these subscales in order to support their psychological recovery, improve their psychological well-being and further development and self-improvement.

The "Beck's Depression Inventory" methodology allowed us to identify depression symptoms and determine their severity. The survey results conducted using this methodology are presented in Figure 6.

As it is shown in Fig. 6, the majority of people (58.3%) have minimal depression, which indicates general satisfaction with life, the absence of serious psycho-emotional problems, resilience to stress and the ability to positively perceive life circumstances among individuals who have experienced occupation. Mild depression (subdepression) is present in 27.8%

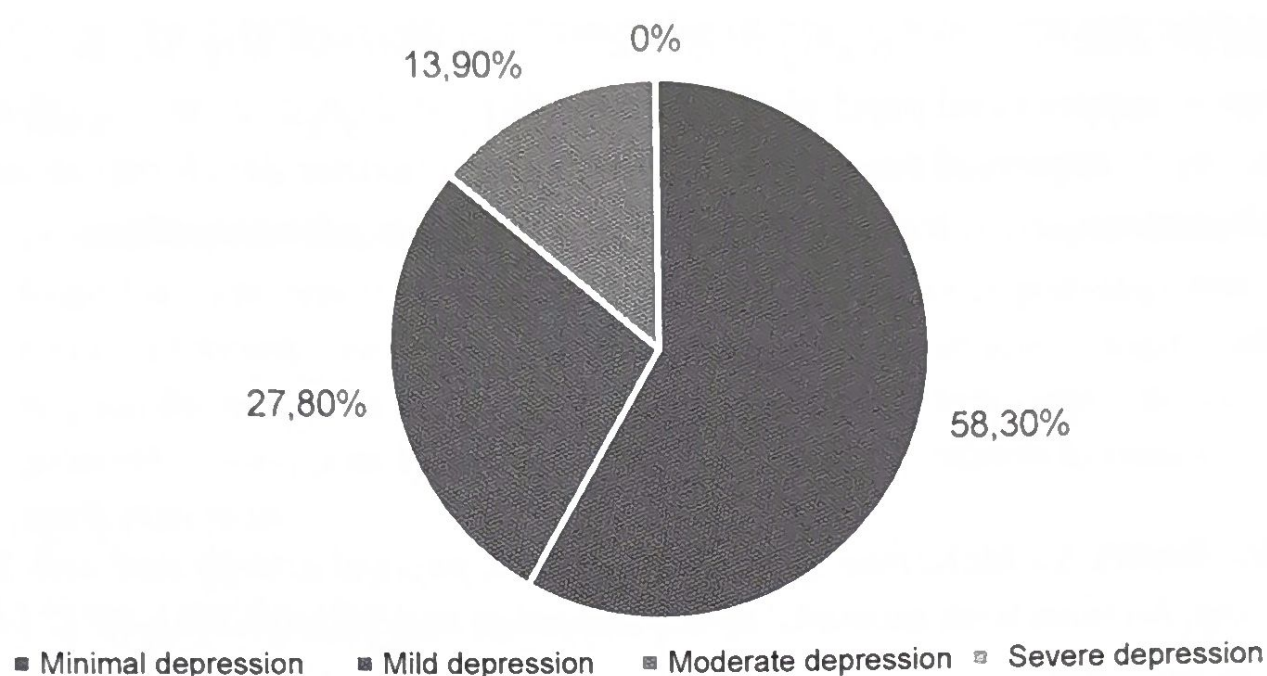


Figure 6. Results of the survey using “Beck’s Depression Inventory” methodology (own work)

of respondents, which may reflect periodic experiences of low mood or difficulties that do not reach the clinical depression level, but still require attention to prevent further emotional state deterioration. Moderate depression was detected in 13.9% of respondents, which may signal more serious psychological problems that affect their ability to function, and these individuals require professional attention and possible intervention. No severe depression (moderate severity) was detected in the respondents group we studied.

The majority of respondents are people without depressive symptoms, but there is a certain percentage of people with various depression manifestations who need attention and possible help from a psychologist. This emphasises the importance of timely diagnosis and support for people with emotional difficulties who have experienced the occupation.

Individuals who have experienced occupation exhibit significant psychological trauma, with their mental state being substantially impaired, as evidenced by heightened anxiety, frustration, and aggression. The majority of them are generally dissatisfied with their lives, have a low level of subjective well-being, an average psychological well-being level, and a low satisfaction level with their physical health and interpersonal contacts. At the same time, the survey results indicate the absence of serious depressive symptoms and sufficient internal strength and resilience of the majority of respondents. A timely response to existing challenges

and problems, high-quality diagnostics, and effective targeted psychological support and psychological counselling will contribute to a speedy recovery, improved emotional well-being, and further development and self-improvement individuals who have experienced occupation.

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