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Gender, age and cultural characteristics of professional resilience in psychologists working in Ukraine's security and defence sector

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Abstract. This article provided a comprehensive analysis of the gender, age and cultural factors that determined professional resilience in psychologists working in Ukraine's security and defence sector (SDS). Professional resilience was considered an integral psychological characteristic that combined the ability to adapt to extreme conditions, effectively perform official duties and maintain personal well-being. The aim of this scientific article was to develop an integrative conceptual model of professional resilience of SDS psychologists in Ukraine, which takes into account the interaction of three key determinants – gender, age and cultural characteristics – and was aimed at improving the effectiveness of psychological support in the context of contemporary challenges to national security. The methodological basis of the study was formed by approaches from military and organisational psychology, the theory of psychological resilience, as well as empirical data from international sources adapted to the Ukrainian context. Particular attention was paid to practical recommendations for the implementation of resilience development programmes that take into account the gender, age and cultural characteristics of the target group. The study found that gender differences influence the choice of stress coping strategies, the level of emotional regulation, and the propensity to use social support. Age characteristics determined the balance between accumulated experience and flexibility in learning new approaches, which was crucial in the dynamic environment of the SDS. Cultural factors, in particular regional traditions, ethnopsychological attitudes, and organisational norms, determined the perception of psychological assistance and the level of acceptance of innovative working methods. The results obtained have significant practical potential: they can be used to optimise the training of military and law enforcement psychologists, improve the system of moral and psychological support, and develop interventions aimed at reducing the risk of professional burnout

Keywords: social support; professional burnout; age factors; cultural context; coping strategies; emotional regulation

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Introduction

In the context of full-scale war, Ukraine's security and defence sector, particularly psychologists working in this sector, perform an extremely responsible mission. They ensure the moral and psychological stability of personnel and support their psycho-emotional well-being in conditions of active combat stress, constant danger and high professional demands. Gender factors include differences in stress experiences, emotional regulation methods, and the influence of social roles and organisational structures. The age aspect concerns changes in resources, experience, and burnout risks at different stages of a career, from a young specialist to an experienced veteran. The cultural component covers regional characteristics, organisational subcultures, and interdepartmental interaction practices.

The Connor-Davidson resilience scale (CD-RISC) is often used in international literature to measure psychological resilience. A study by D. Liu *et al*. (2015) found that this scale is invariant across genders and age cohorts, allowing it to be applied across a wide demographic spectrum. This makes it possible to use the CD-RISC as a reliable tool in the Ukrainian context, while maintaining validity requirements. The United States and Norway have jointly developed a resilience training programme for Ukrainian military personnel, emphasising the need to adapt psychological and psychiatric support to the realities of war. This initiative is described in the AUSA (2023) publication and demonstrates the current practical demand for structured support from psychologists. Thus, the urgency of the research lies in combining theoretical analysis with practical examples of adapted interventions that strengthen the methodological justification.

According to S. Brooks *et al*. (2015), the gender aspect of the problem lies in the lack of standardised approaches to taking gender-related differences into account in the formation of resilience. Practice shows that female psychologists are more likely to experience a double burden – professional and family – which can reduce their level of resourcefulness. At the same time, men in the SDS face another challenge – the culturally conditioned norm of "emotional restraint", which complicates the application of preventive self-regulation strategies.

The age aspect manifests itself in differences between young professionals and experienced psychologists. The former may have lower tolerance to chronic stress due to a lack of previous experience working in combat conditions, while experienced professionals are at higher risk of professional burnout and secondary traumatisation. However, there are no large-scale empirical studies in the Ukrainian scientific field that systematically compare these age groups in the context of SDS. The cultural dimension of the problem covers the influence of regional and organisational traditions on the formation of coping strategies. For example, psychologists working in frontline areas often develop a more pragmatic and short-term approach to emotional regulation, while in regions far from combat operations, long-term strategies for maintaining well-being prevail. At the same time, there are virtually no systematic studies analysing cultural factors within the SDS.

The problem is exacerbated by the lack of adapted methods for measuring professional resilience for the Ukrainian SDS. Although the Connor-Davidson resilience scale (CD-RISC) and other instruments have international validity, their adaptation for Ukrainian military and law enforcement psychologists has not been completed. The lack of local norms and comparative indicators makes it impossible to develop individualised resilience enhancement programmes. Therefore, the essence of the scientific problem lies in the fact that, in the context of ongoing hostilities and significant psychological stress, SDS of Ukraine need a scientifically based model of professional resilience for psychologists that takes into account gender, age and cultural characteristics and is supported by valid diagnostic tools and adapted intervention programmes.

The study of professional resilience in the field of security and defence has become particularly relevant in recent years due to the extreme challenges faced by both military personnel and the psychologists who work with them. Contemporary scientific works emphasise the integration of gender, age and cultural factors into the system of training and support for specialists. R. Sirko & V. Slobodianyk (2024) have demonstrated that the development of "self-preserving behaviour" in representatives of the security and defence sector through training and psychoeducational programmes is an important factor in reducing professional trauma and strengthening resilience. O. Nyzovets-Kropta (2024), in summarising research conducted during the war, notes that the key factors in maintaining the professional resilience of Ukrainian psychologists are social support, self-regulation skills, and the presence of meanings and values that give their work a sense of significance. O. Kokun *et al*. (2022) emphasise that psychological resilience is the ability to function effectively under combat stress. The authors highlight the role of individual resources, social support and special training programmes as basic mechanisms for developing professional resilience. International studies focus on gender differences. For example, L. Denneson *et al.* (2021) in a national longitudinal study of US veterans after suicide attempts found that women have lower levels of self-compassion and autonomy, as well as higher risks of recurrent crisis states. This necessitates gender-specific support programmes.

An analysis of resilience training programmes for police officers conducted by A. Moreno *et al.* (2024) showed that the most effective programmes are integrated programmes that combine mindfulness, biofeedback and organisational practices. The authors emphasise that effectiveness largely depends on the cultural and organisational adaptation of programmes. J. Andersen *et al.* (2023) developed a "biological approach" to resilience development based on heart rate variability training. Studies have shown that this technique not only reduces the manifestations of post-traumatic stress, but also reveals gender differences in response to intervention. Thus, modern research confirms that gender, age, and cultural factors are decisive in the formation of professional resilience among psychologists in the security and defence sector.

The aim of the article was to develop a comprehensive integrative model of professional resilience among psychologists in the security and defence sector of Ukraine, in particular through the prism of three interrelated determinants: gender, age and cultural context.

Materials and Methods

The study of professional resilience among psychologists in Ukraine's SDS, accounting for gender, age, and cultural specifics, requires the application of a combined (mixed-methods) approach. This allows for the combination of quantitative methods to obtain valid statistical data and qualitative methods for an in-depth understanding of specialists subjective experiences. The research sample involved psychologists working in various SDS subdivisions, including the armed forces of Ukraine, the national guard, the state border guard service, and the national police. The representativeness of the sample was ensured through stratification by sex, age categories (under 30 years, 31-45 years, and over 45 years), and region of service (frontline regions and rear regions).

Quantitative methods involve the use of standardised psychometric instruments to measure resilience. The main instrument proposed is the Connor-Davidson resilience scale (CD-RISC-25), which has proven reliability and validity in military contingents (Campbell-Sills & Stein, 2007). To assess related variables, is planned for use the Maslach burnout inventory (MBI) to determine the level of professional burnout and the perceived stress scale (PSS) to measure the subjective level of stress. Qualitative methods include semi-structured interviews and focus groups. Qualitative methods included semi-structured interviews and focus groups. These allowed for the identification of unique

coping strategies that might be determined by gender, age, or cultural factors. To increase data reliability, the method of triangulation was used, which involves comparing the results of the quantitative and qualitative analyses.

The data collection procedure included a comprehensive approach, which began with informing participants in advance about the purpose of the study, its procedures and ethical aspects, ensuring their informed consent. This was followed by a survey using standardised questionnaires, which allowed structured data to be collected. To gain an in-depth understanding of the participants' experiences, interviews and focus groups were organised, which were recorded and transcribed for further analysis.

Qualitative analysis of the data obtained from semi-structured interviews and focus groups revealed key stress management strategies used by SDS psychologists. Fifty psychologists participated in the study, distributed by gender and age in proportion to the sample size. Interviews were conducted online via Zoom during May-June 2025. The focus groups included 6-8 participants each, lasted an average of 90 minutes, and were organised offline in rear regions. The interview structure included 15 open-ended questions aimed at identifying personal experiences, coping strategies, and factors influencing resilience. The focus groups were oriented towards discussing collective support practices and challenges faced by psychologists. The final stage involved data analysis, including statistical methods such as correlation, regression and variance analysis, as well as thematic analysis of qualitative data. This approach ensured a comprehensive study and interpretation of the results.

Ethical standards comply with the Declaration of Helsinki of the World Medical Association "Ethical Principles for Medical Research Involving Human Subjects" (1964) and the Code of Ethics for Psychologists (1990). Confidentiality and the participant's right to refuse participation without negative consequences are respected (APA, 2017). The chosen methodological approach provides a comprehensive disclosure of the phenomenon of resilience in SDS psychologists, allowing to identify not only the level of resilience, but also the mechanisms of its formation and maintenance in specific service conditions.

Results and Discussion

A detailed analysis of the results of quantitative and qualitative research methods allows for a comprehensive assessment of the phenomenon of professional resilience among psychologists in the SDS of Ukraine. Studying the professional resilience of psychologists in the SDS of Ukraine requires the integration of knowledge from related fields: military psychology, occupational psychology, intercultural psychology, and gender studies. International and Ukrainian experience shows that resilience is considered a multidimensional construct that includes individual psychological resources, social support, and organisational conditions.

According to the results of a survey conducted using standardised tools, data was collected from 320 psychologists working in various SDS departments. The sample included 45% men and 55% women, with the following age distribution: under 30 years old – 30%, 31-45 years old – 50%, over 45 years old – 20%. The regional distribution of participants included frontline areas (60%) and rear regions (40%). The main results obtained using the Connor-Davidson resilience scale (CD-RISC-25) showed an average resilience level of 72.5 points (out of a possible 100). Statistically significant correlations were found between resilience levels and participant age: psychologists aged 31-45 demonstrated higher scores compared to other age groups. According to the Maslach burnout inventory (MBI), 40% of participants showed signs of professional burnout, which correlated with lower resilience scores. The perceived stress scale (PSS) showed that psychologists from frontline areas had higher stress levels compared to those working in rear areas.

Qualitative data analysis using thematic coding revealed key aspects that influence the professional resilience of SDS psychologists. One

of the most important factors is the role of social support provided by colleagues, family, and friends. This support promotes emotional resilience and helps psychologists better cope with professional challenges. It was also found that psychologists actively use personal strategies to reduce stress, such as meditation, physical activity, and hobbies. These practices help reduce stress levels and maintain psychological well-being. In addition to personal strategies, an important factor is the influence of organisational culture on professional resilience. The availability of supervision and training programmes contributes to the development of professional skills and supports psychologists in their work. These organisational measures are key to building resilience and preventing professional burnout. The results of the analysis highlight the importance of both personal and organisational factors in supporting the professional resilience of SDS psychologists.

The results of the study confirm the importance of a combined approach to studying resilience in SDS psychologists. Quantitative data revealed general trends, such as the influence of age and region of service on the level of resilience, while qualitative methods revealed subjective experiences and unique coping strategies. The correlations identified between resilience, professional burnout, and stress underscore the need to develop targeted interventions aimed at supporting psychologists, especially in frontline regions. Qualitative analysis also highlighted the importance of organisational measures, such as supervision and training, in enhancing resilience. The professional resilience of psychologists in the SDS of Ukraine is the result of a combination of individual, social, and organisational factors. Based on an analysis of international and Ukrainian studies, three key factors can be identified that determine its formation: gender, age, and cultural characteristics.

Gender influences both the perception of stressful situations and the choice of coping strategies. For example, a study by G. Wagnild & H. Young (1993) showed that female professionals in high-stress situations are more likely to use emotionally-oriented strategies, including seeking social support, while men tend to take a problem-oriented approach. In the context of the SDS of Ukraine, this may mean the need for gender-sensitive training programmes that take into account differences in stress coping styles and the specifics of psychological assistance to military personnel of different genders.

The age aspect of resilience formation manifests itself in varying levels of stress resistance and flexibility of adaptation strategies at different stages of a career. Young psychologists (under 30) often have high levels of motivation but lower levels of experience, which increases the risk of emotional exhaustion. Experienced professionals (over 45 years old) have established coping models, but sometimes show less willingness to implement new working methods (Britt *et al.*, 2016). This requires the development of differentiated professional development programmes for different age groups.

The cultural context in the SDS of Ukraine includes not only regional differences (frontline or rear areas), but also the organisational culture of different departments. For example, psychologists of the national guard often work in mixed conditions (peacekeeping operations, public order protection, combat operations), which requires high flexibility, while psychologists of the state border guard service focus on stable operational work with rotational risks. These differences shape different resilience profiles and must be taken into account when developing methodological recommendations.

Combining gender, age and cultural factors allows for the formation of an integrative model of resilience, which involves adapting diagnostic tools (e.g., CD-RISC) to Ukrainian realities, developing flexible training programmes that take into account the needs of different groups, and integrating culturally relevant coping strategies into daily practice. In conclusion, the development of resilience among psychologists in Ukraine's security and defence sector is a multidimensional process that requires targeted support at the individual, organisational and state policy levels.

Gender characteristics of professional resilience among psychologists in Ukraine's security and defence sector. Significant attention is paid to the gender aspects of resilience in the global literature. For example, a study by L. Campbell-Sills & M. Stein (2007) showed that women in samples of military and law enforcement personnel demonstrate a higher level of emotional sensitivity, but at the same time more often use socially oriented coping strategies, which correlates positively with CD-RISC indicators. This indicates the potential protective effect of gender-specific strategies in stressful conditions, although in the Ukrainian context such relationships have not yet been systematically studied. Stress coping studies consistently record systemic differences between women and men: women more often resort to emotionally-oriented strategies (seeking emotional support, verbalising experiences, rumination), while men resort to direct problem-oriented coping or avoidance and denial (Tamres *et al.,* 2002). In terms of professional resilience, this means that the basic sets of behavioural strategies during intense work stress differ, and therefore training and supervision approaches for SDS psychologists must be gender-sensitive, taking into account which strategies each group spontaneously activates and which ones need targeted development.

Large sample studies show that women on average report higher levels of chronic and daily stress and more often use emotionally and uniquely oriented coping styles, while men more often use rational and non-emotional coping (Matud, 2004). Combined with meta-analysis data, this provides two practical guidelines for SDS: female psychologists need to systematically strengthen their arsenal of problem-oriented and stimulating techniques (structured action plans, tactical self-regulation protocols), while men need to purposefully develop emotional expressiveness, skills for seeking support, and work with social standards of emotional control that can mask distress and increase the risk of delayed help-seeking (Tamres *et al.*, 2002).

Military and law enforcement organisations have powerful cultural narratives of resilience and invulnerability. For men, these often reinforce avoidance of emotional support; for women, they are combined with a double burden (service/family) and additional communicative work (emotional support for teams, working with loss). For psychologists as a supporting profession, this means different profiles of secondary traumatisation and compassion fatigue. Accordingly, it is advisable to regulate the "right to vulnerability" and seeking help without stigma in internal SDS regulations, to guarantee gender-balanced access to supervision/intervision, and to design rotation and leave schedules that take family responsibilities into account.

It is advisable to differentiate the content of training modules. For female psychologists, the emphasis should be on protocols for operational problem solving, tactical planning, and training in operational actions in the field (structured briefing, stabilisation algorithms, clear markers for returning to the task) in order to balance the tendency towards emotional coping (Matud, 2004). For male psychologists, the focus should be on expanding emotional literacy (supported verbalisation of experiences, requesting and accepting support, working with rumination/self-criticism), and creating a supportive environment for practising empathic contact skills. Separately, modules for overcoming rumination, reframing, and mindfulness techniques should be implemented with a focus on short protocols that are actually applicable in change/on the job.

Assessment of the resilience of SDS psychologists (e.g., through CD-RISC in combination with coping questionnaires) should be conducted with mandatory stratification by gender and control of the type of stressor. Meta-analysis data show that gender differences can be modulated by the nature of the stressor and its subjective assessment, according to L. Tamres *et al.* (2002). This means that the interpretation of individual scores should be based on gender-specific norms and the context of the tasks (combat events, mass casualties, work with the civilian population, etc.). Gender differences in coping strategies are stable and reproducible. They do not classify either gender as pathological, but only indicate the need to strengthen certain

resources in specific areas. Successful institutional solutions are a combination of general resilience protocols with flexible blocks that can be tailored to the specific needs of female and male psychologists. This approach reduces the risk of burnout, improves the quality of assistance to personnel, and makes the support system more reliable.

Age factors and stages of professional development. The age factor in the formation of professional resilience in SDS psychologists determines the balance between accumulated experience and the flexibility of adaptation strategies. According to the life-span perspective theory, psychological resilience changes throughout life, reflecting the influence of both biological and socio-cultural determinants (Baltes *et al.*, 2006). Young professionals tend to have high levels of energy and motivation, but may be more vulnerable to professional stress due to a lack of established coping strategies. The age dimension of resilience is studied mainly in relation to service experience. Studies show that among psychologists and medical professionals in military structures, younger specialists are more likely to face the risk of professional burnout, while older colleagues demonstrate greater stability but may be less flexible in implementing new methods. This conclusion is particularly relevant for the Ukrainian SDS, where the staffing structure of psychologists includes both newly appointed graduates and specialists with many years of experience gained in peacetime.

At the beginning of their professional careers, SDS psychologists face an intense process of adaptation to the organisational culture and the peculiarities of combat and crisis conditions. Studies show that young specialists are more likely to experience high levels of anxiety, self-doubt and dependence on external sources of support. At this stage, mentoring, supervision, and training programmes aimed at developing self-regulation and quick decision-making skills in stressful situations are particularly important (Teslenko & Kashperskyi, 2022). Middle-aged professionals usually have an established professional style, developed stress resistance, and effective models of interaction with colleagues and clients. At the same time, this group is at increased risk of professional burnout due to the cumulative effect of working in conditions of chronic stress and increased responsibility. The optimal strategy for this stage is task rotation, periodic updating of competencies, and the implementation of preventive programmes with elements of mindfulness and cognitive-behavioural techniques. Experienced psychologists have a deep understanding of the specifics of SDS, a large practical base, and high authority among colleagues. However, cognitive flexibility and the speed of adaptation to new methods and technologies may decline with age. This requires a special approach – creating conditions for transferring experience to younger specialists, involving them in strategic planning, and maintaining motivation through participation in scientific and methodological projects.

An analysis of age factors shows that an effective support system for psychologists should include differentiated interventions: mentoring programmes for young professionals, burnout prevention for the middle age group, and the involvement of experienced specialists as mentors and trainers. This approach allows maintaining a high level of resilience at all stages of professional development, minimising the risks of staff losses.

Cultural and intercultural aspects. Culture is one of the key macro-level factors influencing the formation of professional resilience in SDS psychologists. According to M. Ungar (2006), intercultural studies, cultural values, norms, and communication patterns determine both the perception of stress and the choice of strategies for overcoming it. In countries with a collectivist culture, greater importance is attached to social support and teamwork, while in individualistic countries, the emphasis is on personal autonomy and individual strategies. With regard to cultural aspects, international studies show that the context of war or emergency situations has a significant impact on the resilience profile. For example, studies among military medics in the United States and Israel have shown that

cultural norms and values determine not only the level of resilience, but also the acceptability of certain forms of psychological assistance. However, there are virtually no studies in open sources that analyse similar processes in Ukraine, taking into account regional differences (frontline zone vs rear regions).

In Ukraine, which is currently at war, the regional context is particularly important. Psychologists working in frontline areas often develop more pragmatic, crisis-oriented strategies, while in rear regions, long-term approaches to mental health support prevail. Research in the field of disaster psychology conducted by F. Norris *et al.* (2008) shows that proximity to the conflict zone affects coping style: in high-risk areas, tactics for rapid stabilisation of the client's condition are more often used than in-depth therapeutic work.

Each SDS agency has its own subculture, which creates unique conditions for the development of psychologists' resilience. For example, the armed forces of Ukraine are dominated by a culture of clear command and adherence to hierarchy, which influences the speed of decision-making and the expected level of emotional restraint. The national guard has a more multifunctional nature of service, which requires psychologists to be flexible and able to quickly switch between different types of tasks. The state border service emphasises stability and proceduralism, which contributes to the formation of structured coping models.

Studies among military psychologists in the United States and Israel show that cross-cultural differences in manifestations of resilience are related to the historical experience of nations, dominant values, and institutional traditions. For Ukraine, the experience of countries that have been under military threat for a long time is useful, particularly in terms of supporting the moral and psychological state of personnel and institutionalising supervisory practices. Understanding the cultural and intercultural aspects of resilience development opens up the possibility of adapting training programmes to the specifics of regions and organisational cultures, to introduce interdepartmental exchanges of experience to reduce the "closedness" of subcultures and disseminate best practices, as well as to develop culturally relevant interventions that take into account both local and global experience.

Organisational determinants of resilience in the SDS. The organisational environment determines the resources, conditions and constraints in which the professional resilience of SDS psychologists is formed. Research by B. Smith *et al.* (2008) shows that command structure, access to supervision, clear protocols, and management support significantly influence the ability of professionals to adapt to stress. In Ukraine, where the SDS operates in the context of a protracted military conflict, these factors are particularly important. Effective leadership is one of the key factors in organisational support for resilience. Leaders who demonstrate empathy, transparency in decision-making and the ability to delegate authority increase the motivation and psychological resilience of their subordinates (Avolio *et al.*, 2009). At the same time, an authoritarian style that ignores the needs of psychologists can increase the risk of burnout, reducing the ability to perform effectively in crisis situations.

Systemic support for psychologists in the SDS should include regular supervision and intervision, psychological debriefings after intense operations, professional development programmes such as courses, training and further education, and guaranteed access to recovery resources, including leave, rotation and medical services. International experience confirms that regular participation in supervision sessions reduces emotional exhaustion and increases job satisfaction (Smith *et al.*, 2008). Uneven distribution of workload among psychologists leads to increased chronic stress and reduced quality of work. The optimal solution is to introduce flexible schedules that take into account the intensity of operations, regional risks, and the personal circumstances of specialists. This is in line with contemporary approaches to occupational health psychology, which emphasise the balance between work demands and resources. An organisational culture focused on mutual support, openness and

recognition of each employee's contribution creates a favourable environment for the development of resilience. At the SDS of Ukraine, this means the need to build a climate of trust between management and psychologists, which reduces barriers to seeking help, increases team cohesion and adaptability in crisis situations.

Professional risks and vulnerabilities of SDS psychologists. Psychologists of the SDS of Ukraine work daily with people who have experienced extreme events – combat operations, injuries, loss of loved ones. Constant immersion in the traumatic experiences of clients leads to secondary traumatisation and compassion fatigue syndrome (Figley, 2002). These conditions reduce work efficiency, increase the risk of errors, and can lead to professional demotivation.

Authors C. Maslach & M. Leiter (2016) found that burnout syndrome is one of the most common risks for SDS psychologists. Its key symptoms – emotional exhaustion, depersonalisation and reduced sense of personal accomplishment – are often exacerbated in wartime due to the lack of clear boundaries between work and personal life. Psychologists who work in a state of constant readiness and perform tasks in high-risk areas are particularly vulnerable. A shortage of qualified personnel, excessive workloads, and a lack of regular supervision and psychological debriefings increase the risk of professional burnout. Studies show that even a short-term reduction in access to recovery resources (holidays, medical care) leads to a sharp decline in resilience.

In the SDS environment, there are cultural attitudes that can prevent psychologists from seeking help for themselves. There is often a stigma attached to acknowledging one's own vulnerability, which complicates timely intervention and prevention of more severe psycho-emotional conditions. To reduce the professional vulnerabilities of SDS psychologists, it is advisable to implement systematic burnout prevention programmes, including mindfulness, cognitive-behavioural techniques and support groups, regulate supervision as a mandatory component of professional practice, develop crisis self-help protocols for specialists working in high-risk areas, and implement policies to reduce the stigma associated with psychologists seeking psychological help themselves.

Coping strategies, self-regulation skills and their moderators. Coping strategies (models for overcoming stress) are a central mechanism for maintaining the professional resilience of SDS psychologists. In military and crisis psychology, coping is defined as conscious and unconscious efforts to regulate emotions, behaviour, and cognitive processes in response to stressors (Lazarus & Folkman, 1984). For a better understanding of the main types of coping used in the professional environment of SDS, a schematic representation is provided in Figure 1 below.

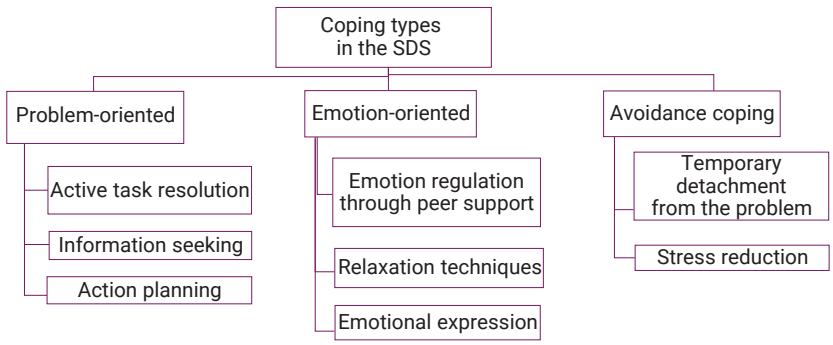

Figure 1. *Coping strategies used in situations of occupational combat stress*

Source: *developed by the author based on C. Carver & J. Connor-Smith (2010)*

Data show that the most resilient psychologists combine problem-oriented and emotion-oriented strategies, reducing their dependence on unique behavioural patterns. For a better understanding of the key skills that enhance the resilience of SDS psychologists, Table 1 below provides the main techniques and their characteristics.

Table 1. *Key techniques and characteristics of skills for improving psychological resilience*

Skill	Description
Mindfulness	Reducing anxiety levels and increasing concentration
Breathing techniques	Rapid restoration of physiological equilibrium in stressful conditions
Cognitive restructuring	Changing destructive beliefs into adaptive ones
Behavioural modelling	Training constructive behavioural patterns in simulated crisis scenarios

Source: *developed by the author*

The effectiveness of coping strategies among SDS psychologists depends on a number of moderators, among which gender, age, cultural context, and organisational resources play an important role. Gender influences the choice of strategies and willingness to seek support, while age is associated with differences in cognitive flexibility and experience in overcoming crisis situations. Cultural context determines the acceptability of certain forms of emotional expression and interaction, and organisational resources, such as access to supervision, training programmes and recreation, also significantly influence the effectiveness of stress management strategies. To increase the stress resilience of SDS psychologists, it is recommended to: introduce training on combining problem-oriented and emotion-oriented coping, develop a set of self-regulation skills with an emphasis on short techniques used in the field, and provide access to individual and group supervision to discuss the effectiveness of coping strategies. Assessment and indicators of professional resilience. Systematic assessment of the professional resilience of SDS psychologists is critical to ensuring the effectiveness of moral and psychological support for personnel. Valid and reliable assessment methods allow for the timely identification of risks of professional burnout, secondary traumatisation, and reduced task performance (Windle *et al.,* 2011).

In international practice, the most common tools for measuring resilience are the Connor-Davidsonresilience scale (CD-RISC-25), which assesses the ability to adapt to stress and recover from crisis events; the brief resilience scale (BRS), which measures the speed of "recovery" after stressful influences; and the resilience scale for adults (RSA), which takes into account social resources, personal competencies, and the structure of life (Friborg *et al.*, 2003). Adapting these tools to the Ukrainian context of the SDS is necessary because cultural and organisational characteristics can influence test results.

In addition to psychometric methods, it is important to use behavioural indicators: the ability to perform duties consistently during intense operations, maintaining a high level of team interaction, the ability to restore emotional balance after crisis events, and active use of support resources (supervision, support groups, training). The optimal assessment strategy is a multimodal approach that combines: psychometric data (CD-RISC, BRS, RSA), assessment by colleagues and management (360-degree feedback), self-reports on the use of coping strategies, objective data (number of successfully completed operations, frequency of requests for support). To ensure effective monitoring of resilience in SDS psychologists, it is recommended to: conduct regular testing (at least twice a year), analyse the dynamics of indicators in connection with personnel changes and tasks, use indicators to individualise professional development programmes, and integrate assessment results into personnel policy planning.

Training, preparation and support of personnel. The professional resilience of SDS psychologists is formed not only on the basis of personal qualities, but also through targeted training and support. Systematic training allows for the development of adaptation, emotional regulation and crisis management skills, which are particularly important in combat situations (Cornum *et al.,* 2011). Basic training for SDS psychologists should include: theoretical courses in military and crisis psychology, training in psychological first aid, training in methods of working with post-traumatic stress disorder (PTSD) and secondary traumatisation, familiarisation with ethical standards and international norms of work in armed conflict.

Research by G. Everly *et al.* (2012) shows that the introduction of psychological first aid modules at the initial training stage significantly increases specialists' confidence in their own abilities and reduces recovery time after critical incidents. Continuous professional training is a prerequisite for maintaining a high level of resilience. Such programmes include: courses on the latest psychotherapy methods (EMDR, cognitive-behavioural therapy, narrative exposure therapy), training in team interaction and interagency coordination, simulation training to practise actions in crisis scenarios, and participation in international experience exchange programmes.

To effectively consolidate the knowledge and skills acquired, it is important to have supervision, which involves regular professional analysis of complex cases under the guidance of experienced specialists; intervision, which consists of sharing experiences in a group of peers; online platforms for self-education and access to relevant materials; as well as mentoring programmes for young psychologists. Practical recommendations include integrating culturally and gender-relevant modules into training programmes, ensuring that psychologists participate in crisis response training at least once a year, and developing a system for monitoring training effectiveness, including assessing resilience levels before and after training.

Ethical standards and legal framework. The professional activities of SDS psychologists take place in an environment that combines high psychological risks and legal restrictions. Ethical standards and legal norms ensure a balance between the need to provide effective assistance and respect for human rights, confidentiality and safety (APA, 2017). The international community and professional associations have identified several basic principles that SDS psychologists should follow. Confidentiality requires the protection of information obtained during work, except in cases where disclosure is required by law. Competence requires the provision of services within the scope of one's qualifications and with continuous professional development. No harm means prioritising the prevention of any form of harm to clients or colleagues. Informed consent involves clearly explaining the purpose, methods and possible risks before starting work with a client (IFRC, n.d.).

In Ukraine, the activities of SDS psychologists are regulated by a number of regulatory and legal acts. Law of Ukraine No. 4223-IX… (2025) establishes the legal, organisational, economic and social foundations of the mental health care system in Ukraine, aimed at ensuring accessibility, quality of services, respect for the rights of people with mental disorders and prevention of negative impacts on mental health. Law of Ukraine No. 2694-XII… (1992) – establishes the employer's obligations regarding safe working conditions, including psychological protection of personnel. Additionally, activities are regulated by departmental Order of the Ministry… (2016), which defines the specifics of organising psychological support in the service environment. This regulatory framework creates a legal framework for the professional activities of SDS psychologists, guaranteeing both the quality of services provided and the protection of the rights of all participants in the process.

During combat operations or in emergency situations, psychologists may find themselves in situations where strict adherence to standards is difficult. For example, the need to act without full informed consent in cases of emergency care,

restrictions on confidentiality when the life or safety of others is at risk, performing tasks within a command structure where the psychologist may be required to report to management. It is recommended that clear protocols be developed for the work of military psychologists, taking into account international ethical standards and national legal norms. Regular training in professional ethics and law should be provided, including simulation scenarios for practical reinforcement of knowledge. It is also important to establish independent ethics committees within SDS agencies to review complex cases and ensure compliance with ethical standards in professional practice.

Recommendations for policy and management in the SDS. The development and implementation of effective psychological support policies in the SDS should be based on scientifically proven data on factors of professional resilience and their interaction. Successful management models in the military and law enforcement agencies of foreign countries demonstrate that a combination of institutional support programmes and individual interventions provides the most lasting effect (Britt *et al.*, 2001).

It is recommended to integrate the concept of resilience into strategic documents, in particular into the concepts of moral and psychological support, doctrines and guidelines of agencies, in order to ensure a systematic approach to the development of resilience among psychologists. It is important to create specialised psychological support units in each SDS agency, which will be responsible for planning, implementing and monitoring resilience development programmes. A system of mandatory supervision should also be introduced at least once a month, taking into account the individual needs and professional workload of psychologists (Hoge *et al.*, 2004). In terms of personnel and training policy, it is important to develop mentoring programmes for young professionals with the involvement of experienced psychologists, as well as to ensure regular professional development with the inclusion of modules on crisis intervention, burnout prevention and culturally and gender-sensitive approaches. Interagency training sessions should be organised in collaboration with international partners to share experiences and implement best practices.

At the organisational level, access to recovery resources such as leave, psychological counselling and medical care should be provided as part of service standards. It is also important to introduce a system of early risk detection through regular testing for burnout, secondary traumatisation and resilience levels, using multimodal assessment methods that combine psychometric, behavioural and organisational indicators. In the area of management, it is recommended to support leadership that promotes open communication, trust and recognition of professionals' achievements. Flexible workload planning should be implemented, taking into account the intensity of operations and the personal circumstances of psychologists. It is also important to create transparent feedback channels so that psychologists can report difficulties at work or the need for additional resources without fear. The proposed measures will contribute to: reducing the level of professional burnout, increasing readiness to work in crisis conditions, strengthening the human resources capacity of the SDS, and integrating psychological support into management decisions.

Conclusions

The analysis shows that the professional resilience of psychologists in Ukraine's security and defence sector is a multifactorial phenomenon shaped by gender, age and cultural factors, as well as organisational conditions and the level of institutional support. The study confirmed that gender differences influence the choice of coping strategies, the level of emotional regulation and the ways of seeking support. Age factors determine the balance between experience, cognitive flexibility and adaptability to new working methods. The cultural context, both regional and organisational, modulates the acceptability of support strategies and forms of team interaction. Organisational determinants (leadership,

supervision, personnel policy) directly influence the preservation and development of resilience. Based on the results, a set of recommendations has been formulated, including: integrating resilience into SDS strategic documents, developing differentiated support programmes that take gender and age into account, introducing inter-agency exchanges and international cooperation, and creating a system for regular monitoring of resilience through psychometric and behavioural indicators. The expected effect of implementing these recommendations is a reduction in the level of professional burnout, an increase in readiness to work in crisis conditions, and the preservation of the human resources potential of SDS psychologists.

The professional resilience of SDS psychologists is not only an individual resource but also a strategic asset for state security. Its development requires coordinated action at the level of state policy, departmental structures and professional communities. The implementation of scientifically based approaches to supporting resilience will contribute to strengthening the psychological readiness of the SDS to perform tasks in the most difficult conditions and to increasing the effectiveness of moral and psychological support. Several promising areas can be identified for deepening the scientific understanding of resilience among psychologists in the security and defence services of Ukraine. It is worth focusing on longitudinal studies that will allow for the analysis of changes in the level of resilience during different stages of professional activity. This will help identify key periods when psychologists are most vulnerable and develop targeted support measures. An important step is the adaptation and validation of international assessment tools, such as CD-RISC, BRS and RSA, for the Ukrainian context. This will ensure more accurate diagnosis and allow for the specifics of local conditions to be taken into account. International comparative studies can be a source of valuable insights, as they will identify both universal and culturally specific factors that influence resilience. This can be useful for developing more effective support strategies.

Experimental testing of various interventions, such as training and supervision programmes, followed by analysis of their effectiveness in the short and long term, is another important aspect. This will help identify the most effective methods. The role of digital technologies in supporting resilience is also worth noting. For example, the development and implementation of mobile applications for psychological self-support can significantly improve the accessibility of assistance for specialists. In the long term, it is advisable to focus on the integration of longitudinal, intercultural and innovative approaches, which will allow for the formation of a comprehensive strategy for the development of resilience in SDS psychologists.

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Conflict of Interest

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Гендерні, вікові та культурні особливості формування професійної стійкості психологів сектору безпеки і оборони України

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Анотація. Статтю було присвячено комплексному аналізу гендерних, вікових та культурних чинників, що визначають формування професійної стійкості психологів сектору безпеки і оборони (СБО) України. Професійна стійкість розглядається як інтегральна психологічна характеристика, що поєднує здатність адаптуватися до екстремальних умов, ефективно виконувати службові обов'язки та підтримувати особистісне благополуччя. Метою цієї наукової статті була розробка інтегративної концептуальної моделі професійної стійкості психологів СБО України, що враховує взаємодію трьох ключових детермінантів – гендерних, вікових та культурних особливостей і спрямована на підвищення ефективності психологічного забезпечення в умовах сучасних викликів національній безпеці. Методологічну основу дослідження становили підходи військової та організаційної психології, теорія психологічної стійкості, а також емпіричні дані з міжнародних джерел, адаптовані до українського контексту. Особливу увагу було приділено практичним рекомендаціям щодо впровадження програм розвитку стійкості, які враховують гендерно-вікові та культурні особливості цільової групи. У роботі визначено, що гендерні відмінності впливають на вибір стратегій подолання стресу, рівень емоційної регуляції та схильність до використання соціальної підтримки. Вікові особливості обумовлюють баланс між накопиченим досвідом та гнучкістю у засвоєнні нових підходів, що має вирішальне значення у динамічному середовищі СБО. Культурні чинники, зокрема регіональні традиції, етнопсихологічні установки та організаційні норми, визначили сприйняття психологічної допомоги та рівень прийнятності інноваційних методів роботи. Отримані результати мають значний прикладний потенціал: вони можуть бути використані для оптимізації підготовки військових і правоохоронних психологів, удосконалення системи морально-психологічного забезпечення, а також розробки інтервенцій, спрямованих на зменшення ризику професійного вигорання

Ключові слова: соціальна підтримка; професійне вигорання; вікові чинники; культурний контекст; coping-стратегії; емоційна регуляція