

RESILIENCE AS A RESOURCE FOR OVERCOMING NEGATIVE IMPACTS OF VOLUNTEERING

Sergey Barinov

Postgraduate student at the G.S. Kostiuk Institute of Psychology
National Academy of Pedagogical Sciences of Ukraine, Kyiv, Ukraine<https://orcid.org/0009-0002-4811-9476>

The aim of the study to determine the specifics of resilience as a resource for volunteer activities. Analysis of foreign theoretical models of resilience shows that this phenomenon is considered as a multidimensional, dynamic process in which personal, social, cognitive and contextual factors interact. Domestic psychological science actively integrates these global approaches, adapting them to the realities of modern Ukraine. This has made it possible to form a number of conceptual and empirical directions aimed at studying the resilience of the individual in conditions of uncertainty and crisis challenges. The generalization of modern domestic research shows that resilience in Ukrainian psychology is considered as a systemic, multi-level quality that ensures effective adaptation, self-regulation and restoration of the personality in conditions of stress and crisis influences. The article shows that scientists are consistently expanding the understanding of this phenomenon - from a separate resource to a universal ability to maintain mental balance and vitality. It also was shown that Ukrainian research reveals similar trends, demonstrating that volunteer activity contributes to the formation of moral values, social maturity, empathy, a sense of responsibility, but at the same time can be accompanied by emotional exhaustion, secondary traumatization and professional burnout. This necessitates the development of psychological resources of resilience of volunteers. In this context, the phenomenon of resilience acquires special importance, which appears as a dynamic mechanism for maintaining adaptive functioning in conditions of stress. We concluded that various theoretical models prove that resilience is formed in the interaction of individual, social and contextual factors and can be developed through psychological preparation, self-regulation training and social support. Therefore, volunteering in crisis conditions requires a high level of resilience as a basic resource for overcoming stress, maintaining mental health and ensuring the effectiveness of assistance.

Keywords: *resilience, volunteering, mental health, professional burnout, self-regulation, activity, theories of resilience.*

Problem statement.

Volunteering in prolonged crisis conditions is simultaneously a powerful factor in personal development, moral formation and social cohesion, but can also be accompanied by significant negative consequences, such as emotional exhaustion, secondary traumatization, compassion fatigue and professional burnout. The balance between these poles is largely determined by the level of internal resources, the availability of social support and the ability to self-regulate. That is why it is appropriate to reveal the role of resilience as a key psychological mechanism that ensures the stability and adaptation of the individual in volunteering.

The **Aim** of the study is to determine the specifics of resilience as a resource for volunteer activities.

Results of the study and their discussion. One of the first theoretical concepts of resilience was the developmental model of E. Werner and R. Smith, created based on the results of a longitudinal study of children from disadvantaged families. Researchers have defined resilience as a dynamic process of positive adaptation that occurs despite serious life challenges or risk factors. According to the authors, the key content of resilience is not so much the absence of negative consequences of stress, but the ability of an individual to maintain psychosocial functioning, effectively cope with difficulties and restore internal balance after exposure to traumatic

events. Within this model, resilience is considered as an integrative property that is formed in the interaction of three systems of factors:

- individual (cognitive competence, self-efficacy, autonomy, achievement motivation, positive self-esteem);
- family (stability of emotional ties, support of significant adults, positive identification);
- social-contextual (supportive relationships with peers, inclusion in socially significant activities, participation in the community) (Werner & Smith, 1992).

Thus, resilience in the understanding of E. Werner and R. Smith is not an innate trait, but the result of multi-level interaction of the individual with the environment, which provides the ability to overcome difficulties and even personal growth after them (Werner & Smith, 1992). In the context of volunteering, this model allows us to understand that support from the community, the presence of stable interpersonal relationships and the development of internal resources are key conditions for the formation of resilience, which helps volunteers maintain emotional balance and effectiveness in prolonged crisis circumstances.

A significant contribution to the development of the modern understanding of the phenomenon of resilience was made by S. Luthar, D. Cicchetti and B. Becker, who considered it as a dynamic process of successful adaptation in the context of significant threats to the development or functioning of the individual. In contrast to early

How to cite: Barinov, S. (2025). Resilience As a Resource for Overcoming Negative Impacts of Volunteering, *Psychological Counseling and Psychotherapy*, 24, 59-66. <https://doi.org/10.26565/2410-1249-2025-24-08>

Як цитувати: Барінов, С. (2025). Resilience As a Resource for Overcoming Negative Impacts of Volunteering, *Психологічне консультування і неухомтепанія*, 24, 59-66. <https://doi.org/10.26565/2410-1249-2025-24-08>

© Barinov, S., 2025; CC BY 4.0 license

approaches that emphasized the individual traits of resilient individuals, the authors emphasized the contextual and interactive nature of resilience, stressing that it is not a constant characteristic, but is formed in the process of interaction of the individual with the environment and changes depending on the situation (Luthar, Cicchetti & Becker, 2000).

Scientists have identified key criteria that can be used to identify the manifestation of resilience: the presence of a significant risk or stressful impact that can potentially lead to maladaptation; a positive result of adaptation - successful functioning, preservation of mental health or achievement of development, despite existing difficulties (Luthar, Cicchetti & Becker, 2000).

According to this approach, resilience is not a universal but a situation-specific property that can manifest itself in certain domains (eg, social or emotional) while remaining vulnerable in others. The authors emphasize the need to take into account a multi-level system of influences - from personal resources (self-esteem, self-efficacy, optimism) to supportive social ties, a safety environment and positive behavior patterns (Luthar, Cicchetti & Becker, 2000). In this context, resilience is interpreted as a process of mutual regulation between risk and protection, in which protective factors (social support, emotional competence, constructive coping strategies) modify the impact of stressful factors, reducing the likelihood of negative consequences (Luthar, Cicchetti & Becker, 2000).

Thus, the concept of S. Luthar, D. Cicchetti and B. Becker emphasizes the plasticity and dynamics of resilience, which opens wide opportunities for psychological intervention and development of this resource (Luthar, Cicchetti & Becker, 2000). In the context of volunteering, this model emphasizes the importance of the formation of multi-level support - both individual (emotional regulation, meaningful orientation) and social (team interaction, organizational support), which allows volunteers to maintain stability and efficiency in situations of chronic stress.

A. Masten, who formulated the concept of "ordinary magic" made an important contribution to the development of the theoretical foundations of understanding resilience. In her writings, the researcher defines resilience as a normal, not an exceptional process based on normal adaptive systems of human development. In her opinion, the ability to overcome difficulties and maintain functioning under stressful conditions is not the result of rare talents or heroic efforts, but a manifestation of natural mechanisms of self-regulation, social interaction and learning (Masten, 2001).

A. Masten's model is based on an ecological approach, according to which resilience develops due to the interaction between individual, family and social systems. She considers the main adaptive systems that support resilience to be: cognitive-emotional competence (ability to regulate emotions, plan and solve problems); safe and supportive relationships (with parents, mentors, community); sense of meaning and value of one's own life; a positive social environment that promotes activity, collaboration and learning (Masten, 2001).

The scientist emphasizes that the destruction or exhaustion of these systems (for example, due to war, loss of social support, instability) leads to a decrease in resilience, while their restoration or strengthening leads to an increase in psychological stability. She also emphasizes that resilience can be developed throughout life, because adaptive systems have the ability to recover even after severe shocks (Masten, 2001).

Thus, the concept of A. Masten (2001) emphasizes that the source of human resilience is everyday resources - relationships, support, competence and meaning. In the context of volunteering, this idea is particularly relevant: it is ordinary but stable adaptive mechanisms - mutual aid, community cohesion, awareness of the value of one's own actions - that create the basis for volunteers' resilience in long-term crisis situations.

An influential theoretical approach to understanding resilience was proposed by K. Reivich and A. Shatte, who consider it as a set of skills and cognitive-behavioral strategies that allow a person to effectively overcome difficulties, adapt to changes, and maintain emotional balance. In contrast to approaches that interpret resilience mainly as a personal trait or process, the authors emphasize its educational and training nature, emphasizing that resilience can be developed through purposeful work with thinking, emotions and behavior (Reivich & Shatté, 2002).

According to the concept of K. Reivich and A. Shatte, resilience is based on the following key components: self-awareness – the ability to recognize one's own emotional reactions and automatic thoughts; self-control – the ability to manage impulsive reactions and regulate emotional state; optimism – a tendency to interpret difficulties as temporary and surmountable; mental flexibility – the ability to see alternative explanations of events and find constructive solutions; empathy - the ability to understand the emotional states of others and maintain mutual understanding; achievement – goal orientation and the ability to regain motivation after failures (Reivich & Shatté, 2002). The authors believe that the development of these skills forms the ability to positively reformulate experience, that is, reinterpret stressful events in a constructive way, which contributes to increased adaptability and prevents distress.

So, the concept of K. Reivich and A. Schatte outlines resilience as a result of the development of cognitive-emotional skills that ensure internal flexibility and stress resistance (Reivich & Shatté, 2002).

In the context of volunteering, this model has a special applied value, because it allows you to consider resilience not only as a natural property, but as a set of skills that can be purposefully formed, ensuring the psychological stability of volunteers during the action of prolonged stress factors. One of the most influential concepts of military resilience is the model proposed by P. Bartone, R. Ursano, and K. Wright, developed on the basis of research on the reactions of American military personnel to combat stress, conditions of isolation, losses, and moral dilemmas. In this model, resilience is viewed as a set of cognitive, affective, and behavioral characteristics that allow adaptive functioning to be maintained during times of extreme

stress, including combat situations, loss of control, prolonged uncertainty, and moral strain (Bartone, Ursano & Wright, 1989). Its key provisions are the following theses:

- resilience is adaptation to combat stress without disorganization of the personal, moral or professional sphere;
- the model assumes that resilient military personnel are able to maintain emotional control, logic of actions, effective communication and efficiency even in conditions of threats to life or moral dilemmas;
- resilience is considered as a combination of three components: individual characteristics (emotional stability, cognitive flexibility, self-efficacy); social support (relationship with the commander, trust in the team, cohesion); contextual factors (organizational structure, clarity of goals, compliance of tasks with opportunities);
- the preservation of psychological functioning is based on the subjective perception of the situation - i.e. not an objective threat, but rather the interpretation of the event as controlled/uncontrollable affects resilience (Bartone, Ursano & Wright, 1989).

In the context of volunteering, the concept of P. Barton et al. has immediate practical significance: it explains why volunteers with a high level of involvement, a sense of control, and a willingness to accept challenges cope better with long-term workloads, show fewer symptoms of burnout, and maintain stability in complex socio-traumatic conditions. J. Bonanno made a significant contribution to the study of the phenomenon of resilience, particularly in the context of volunteering and rescue activities. In his research (Bonanno, 2004, 2009) he proposed a model of dynamic resilience that describes individual differences in response to stressful and traumatic events, particularly among individuals who provide assistance to others in crisis situations.

Unlike traditional approaches that looked at the consequences of trauma mainly through the prism of pathology or post-traumatic disorders, J. Bonanno showed that most people are able to maintain emotional stability and effective functioning even after severe shocks. He singled out several types of adaptive trajectories: stable, recovery, chronically depressed, and delayed (Bonanno, 2004, 2009).

This typology allows us to understand why some volunteers remain psychologically resilient, while others show signs of emotional exhaustion or secondary traumatization. A key proposition of J. Bonanno's model is also the idea that resilience is not a fixed trait, but a process that relies on a combination of individual resources (flexibility of thinking, positive emotional regulation, meaning-making) and social factors (support from the environment, trust, inclusion in the community) (Bonanno, 2004, 2009). In his empirical studies after the terrorist attacks of September 11, 2001, he showed that volunteers and rescuers who demonstrated the ability to cognitively re-evaluate traumatic events and maintained emotional contact with the social environment were significantly less likely to have symptoms of post-traumatic stress (Bonanno, 2004, 2009).

Applying this model to the analysis of volunteering allows us to explain why participation in helping others can be both a risk factor and a development resource. Resilient volunteers are able to transform stressful experiences into a source of self-development, increased self-efficacy and strengthening of moral identity. Thus, J. Bonanno's concept emphasizes the adaptive potential of a person, capable not only of withstanding the pressure of extreme conditions, but also of maintaining internal balance while fulfilling a socially significant mission.

In the context of volunteering, J. Bonanno's concept is of particular importance, as it emphasizes the role of emotional flexibility and adaptive regulation as key mechanisms of resilience. It helps to explain why some volunteers, despite constant exposure to traumatic events, maintain productivity, the ability to empathize and internal balance: their resilience is manifested in the variability of coping strategies and effective recovery after emotional overloads.

A significant contribution to the understanding of the nature and mechanisms of resilience was made by K. Connor and J. Davidson, who developed a clinical-psychological model of resilience and created one of the most famous tools for its measurement - the Connor-Davidson Resilience Scale (CD-RISC).

According to K. Connor and J. Davidson, resilience is defined as the ability to successfully adapt to stress, trauma or significant life changes, and is based on a system of interconnected resources - cognitive, emotional, behavioral and social (Connor & Davidson, 2003). Researchers have identified several key components of this phenomenon:

- personal competence and perseverance, which reflect confidence in one's own abilities and orientation to achievements;
- trust in intuition and tolerance to negative influence, which reduce vulnerability to stress;
- positive acceptance of changes and security in relationships that provide social support;
- control, which involves an active attitude to difficulties and a sense of influence on events;
- spirituality, which helps to find meaning in trials and maintains inner balance (Connor & Davidson, 2003).

K. Connor and J. Davidson's model emphasizes that resilience is not a static trait, but a dynamic construct that can change under the influence of therapy, learning, or life experiences. In particular, the authors indicate that its development is possible through the formation of cognitive flexibility, optimism, self-efficacy and the ability to create meaning. In the context of volunteering, this concept provides a practical understanding that psychological resources can support a person in conditions of prolonged stress, and a high level of competence, a positive reevaluation of events, acceptance of changes and the presence of social support are the factors that reduce the risk of emotional exhaustion and contribute to the long-term effectiveness of volunteers.

One of the most influential modern concepts in the field of resilience is the post-traumatic growth model developed by R. Tedeschi and L. Calhoun. According to

this model, posttraumatic growth is a positive psychological change that occurs as a result of coping with major life challenges (Tedeschi & Calhoun, 1996, 2004). The researchers singled out five main areas of this growth:

- increase in the value of life - reassessment of life priorities, increased appreciation for the everyday;
- improvement of interpersonal relations - growth of empathy, compassion, ability to support others;
- increase in personal strength - awareness of one's own stability and internal resources;
- discovery of new opportunities - emergence of new goals, motivations, meanings;
- spiritual development – deeper awareness of existential issues, faith or philosophical acceptance of life (Tedeschi & Calhoun, 1996, 2004).

R. Tedeschi and L. Calhoun emphasized that post-traumatic growth is not an automatic consequence of suffering - it occurs only under the condition of active cognitive understanding of the experience, reflection and search for new meanings. At the same time, resilience is the basis that allows a person not only to withstand the impact of trauma, but also to transform it into a source of development (Tedeschi & Calhoun, 1996, 2004).

In the context of volunteering, the approach of R. Tedeschi and L. Calgun is of particular importance, because volunteers who often encounter human suffering can experience both distress and deep personal growth. Post-traumatic growth in this case is manifested in the formation of mature empathy, rethinking of life values, growth of moral consciousness and inner strength, which increases their ability to act effectively even in the most difficult conditions.

F. Friberg and his colleagues (2003) developed a multi-component model of resilience, in which this phenomenon is considered as an integrated system of psychological and social factors that provide a person with the ability to maintain adaptation and well-being in stressful conditions. Resilience in this model consists of six main components:

- self-perception – self-confidence, positive self-esteem, self-efficacy;
- planning for the future - having goals, life prospects and motivation;
- social competence – communication skills, flexibility in interaction, ability to receive support;
- family cohesion – support, trust and emotional stability in the family;
- social resources – external help, feeling of belonging to the community, support of friends and colleagues;
- structured style – organization, responsibility and discipline in actions (Friberg et al, 2003).

Researchers emphasize that these factors not only reduce vulnerability to stress, but also form an active adaptive position, when a person not only overcomes difficulties, but uses them as a condition for development. The model is also one of the few that emphasizes the importance of social integration as a necessary condition for resilience: resilience is not seen as an individual achievement, but as the result of interaction in the system "personality - family - society" (Friberg et al, 2003).

In the context of volunteering, F. Friberg's model (Friberg et al, 2003) is particularly relevant, since volunteering inherently involves active social interaction, support, a common goal, and awareness of the significance of one's role. A high level of social and family resources, the presence of goals and meaning, the ability to communicate and self-regulate are the factors that form the basis of volunteers' resilience in situations of prolonged stress.

A conceptual approach to the development of resilience in the military environment is thoroughly presented in the work of L. Meredith et al., which summarizes the results of research conducted within the framework of training and support programs for personnel of the US Armed Forces. Researchers view resilience as a multifactorial construct that encompasses cognitive, emotional, behavioral, and social aspects of a military serviceman's functioning, and at the same time as a strategic resource for the effectiveness of a military organization (Meredith et al., 2011).

Within this concept, resilience is defined as the ability of an individual, unit, or organization to withstand stress, recover from psychological trauma, and maintain combat capability in difficult environments. The authors identify several key components: psychological flexibility, emotional regulation, self-efficacy, social support, and team cohesion (Meredith L. S. et al., 2011).

Particular attention is paid to the institutional level of resilience development - the creation of a training system, mental state monitoring, burnout prevention programs and training of leaders to support subordinates in stressful conditions (Meredith L. S. et al., 2011). The paper proposes a multi-level model of resilience development, which includes individual (personal competence, coping strategies), interpersonal (peer support, trust, team dynamics) and organizational levels (caring culture, availability of assistance programs, psychological leadership).

The authors emphasize that an effective resilience support system requires the integration of psychological, educational, and administrative measures, not just individual training (Meredith L. S. et al., 2011). In the context of volunteering, this concept has significant applied value, as it demonstrates that the development of resilience under conditions of chronic stress must be structured, multi-level and systemic in nature - with a combination of personal training, social support and an organizational culture of care.

An important direction in the modern understanding of the phenomenon of resilience is the stress-inoculation theory ("stress inoculation" theory), developed by D. Meichenbaum. His approach is based on the principles of cognitive-behavioral psychology and considers resilience as the result of systematic stress resistance training, similar to "psychological inoculation" against future stressful influences (Meichenbaum, 1985).

D. Meichenbaum believed that stress reactions are not automatic - they depend on the way of interpreting events, internal dialogue and the presence of self-regulation skills. According to his model, the development of resilience occurs in stages:

- cognitive training – awareness of one's own stress triggers, assessment of response methods and formation of a realistic vision of the problem;

- teaching coping skills - development of self-control, relaxation techniques, positive self-suggestion, cognitive restructuring;

- exposure stage (practice under control) – gradual "entering" stressful situations using acquired strategies, which creates the effect of psychological hardening (Meichenbaum, 1985).

Thus, "stress vaccination" forms cognitive-emotional "immunity" - a person's ability to predict his own reactions, flexibly adapt to changing circumstances and reduce the intensity of stress. The author emphasized that this process does not eliminate stress, but changes the attitude towards it, making it controllable and predictable (Meichenbaum, 1985).

That is, the stress-inoculation theory of D. Meichenbaum demonstrates that resilience is not a natural quality, but can be the result of purposeful training. In the context of volunteering, this approach is especially valuable because it offers a structured algorithm of psychological preparation, capable of reducing the risks of emotional exhaustion, secondary traumatization and burnout in conditions of prolonged crisis effects. M. Ungar developed a socio-ecological model of resilience emphasizing that resilience is not only an internal property of the individual, but primarily a process of interaction between a person and the social context in which he lives (Ungar, 2011).

According to the researcher, resilience is a socially determined phenomenon that occurs when an individual has access to the resources necessary for adaptation and can effectively attract them. He suggests considering resilience as a process of two-way exchange: on the one hand, it is the ability of a person to seek and use support, and on the other hand, the readiness of the social environment (family, community, institutions, state) to provide this support (Ungar, 2011).

Within his model, M. Ungar singled out several levels of social ecology of resilience:

- individual level – cognitive, emotional and behavioral resources of the individual (self-regulation, self-efficacy, meaning-making);

- interpersonal level – supportive relationships with family, friends, colleagues;

- community level – a sense of social belonging, trust, cultural identity;

- institutional level – the presence of fair structures that ensure safety, equality of opportunities and access to resources (Ungar, 2011).

Thus, resilience in the understanding of M. Ungar appears as an ecosystem of interconnected resources functioning in cultural, social and economic contexts. Its development requires not only psychological intervention, but also social changes aimed at strengthening communities, family ties, and cultural identity. In the context of volunteering, this model has a special practical value, as it allows considering the sustainability of volunteers not only as an individual quality, but as a result of the interaction between personal resources, team

support and organizational conditions of activity. Ensuring access to social, emotional and material resources, as well as the formation of a culture of mutual support in communities are key factors in increasing the resilience of volunteers in prolonged crisis situations.

An important basis for understanding resilience is created by the model of protective factors developed by M. Rutter, who considered resilience not as a fixed trait or an exceptional ability of an individual, but as the result of the action of a system of protective (protective) mechanisms that weaken or compensate for the impact of adverse environmental factors. Among the main protective factors are: stable emotional ties in the family, the presence of at least one significant support person, cognitive competence, social skills, humor, an internal sense of control, adequate self-esteem and opportunities for self-realization (Rutter, 1987).

According to M. Rutter's approach, these protective factors act in three main directions: - reducing the impact of risk - weakening or blocking the negative consequences of stressful events; - strengthening of personal stability - development of self-confidence, self-efficacy, ability to control the situation; - creation of conditions for adaptive functioning - provision of social support, positive experiences and stable relationships (Rutter, 1987). In the context of volunteering, M. Rutter's model has a special applied value: it allows us to understand that the psychological stability of volunteers is formed through a combination of individual and social resources - such as internal motivation, a sense of meaning, team cohesion, trust, social support and a stable environment. The presence of these protective factors provides an opportunity to act effectively and maintain mental health even in long-term crisis conditions.

Therefore, the analysis of foreign theoretical models of resilience shows that this phenomenon is considered as a multidimensional, dynamic process in which personal, social, cognitive and contextual factors interact. Domestic psychological science actively integrates these global approaches, adapting them to the realities of modern Ukraine. This made it possible to form a number of conceptual and empirical directions aimed at studying the stability of the individual in conditions of uncertainty and crisis challenges. In particular, in recent years, several dissertations were completed, the object of which was resilience as a systemic quality of the individual.

Thus, O. Shevchenko's research presents a holistic author's concept of resilience, built on a systematic approach to the analysis of the psychological characteristics of the activities of nurses, especially those who work with patients with serious somatic diseases. The researcher considers resilience as an individual's ability to dynamically adapt and self-regulate in the face of life and professional difficulties, which is ensured by the effective management of one's own resources – emotional, motivational, volitional and cognitive – in relation to socio-cultural norms and environmental influences (Shevchenko, 2020).

Within this concept, a component-criterion model of resilience has been developed, covering four interrelated structural blocks:

- value-motivational, which reflects the desire to work with seriously ill patients, internal readiness for professional challenges, belief in the meaningfulness and controllability of the world, acceptance of one's own significance and confidence in the ability to influence life events;

- cognitive-reflexive, which includes understanding the essence of the phenomenon of resilience, awareness of its importance in the professional sphere, the ability to self-reflect and assess one's own level of resilience and adaptability;

- operational-activity, which covers the formation of stress resistance skills, the ability to quickly recover from stressful situations, apply effective coping strategies and actions aimed at supporting professional efficiency;

- communicative and regulatory, which characterizes the flexibility of behavior in conditions of uncertainty, tolerance to emotional distress of other people, the ability to regulate one's own emotional states in the process of interpersonal interaction (Shevchenko, 2020).

In O. Odnostalko's dissertation, a comprehensive theoretical and empirical study of resilience as a resource of psychological stability of the individual in the conditions of complex and atypical life situations was carried out. The main achievement of the work is the justification that resilience should be considered not only as a character trait, but as a dynamic system of adaptive resources that ensure effective human functioning in crisis conditions. The work also determined that the resources of personal stability depend on age and social context: in older respondents, they are more formed, while in younger ones, they are more variable. A tendency to decrease the level of resilience under the influence of prolonged or excessive stress has been established, even among individuals with previously high levels of resilience. It is shown that a special role in the preservation and restoration of adaptive resources belongs to social support, family and interpersonal ties, which are the leading factor in psychological recovery (Odnostalko, 2020).

Within the framework of E. Hrishyn's research, a thorough theoretical and methodological analysis of the phenomenon of resilience as a key factor in overcoming the effects of stress, trauma and long life difficulties was carried out. The researcher proposed a generalized model of resilience, which includes cognitive-evaluative, emotional-regulatory and behavioral components, and also determined its role as an integrative resource of psychological well-being. Among the main achievements of the work is the disclosure of the dynamic nature of resilience as a system of cognitive, emotional and behavioral reactions that allow a person to maintain mental balance and productivity in stressful circumstances. E. Grishin emphasized that resilience is a process of overcoming the negative consequences of traumatic events and, at the same time, a potential for development that contributes to the formation of adaptive strategies and prevents maladaptation (Hrishyn, 2024).

Despite the depth of theoretical and empirical studies, a number of aspects of the problem of resilience have

become an actual direction of scientific research, reflected in modern professional articles of Ukrainian researchers.

L. Adamenko (2020) outlined the differences between the concepts of "resilience", "viability", "stress resistance" and "viability", emphasizing the importance of their methodological distinction, considering resilience as an individual's ability to maintain internal integrity and stability in stressful and crisis conditions, as well as a resource for psychological recovery and post-traumatic growth.

T. Belavina (2020) investigated the socio-psychological factors of the formation of resilience in persons who are in a state of social deprivation, in particular in conditions of deprivation of liberty. The author described resilience as a mechanism for overcoming the negative consequences of isolation, which supports vitality and contributes to the process of resocialization.

Yu. Zavatskyi, N. Zavatska, O. Fedorova (2021) established that the development of resilience of children of primary school age is determined by interaction with parents and the peculiarities of the family environment as a whole.

O. Lazorko and T. Shevtsova (2022) proved that in adolescence, resilience plays a leading role as a psychological protective resource that reduces the consequences of traumatic experiences and prevents the formation of post-stress disorders.

G. Lazos (2018, 2019) considers resilience as a biopsychosocial process that encompasses individual, interpersonal, and social aspects and is manifested in a person's ability to recover from traumatic events and achieve personal growth. The model proposed in the research is based on three key factors (risk, protective and vulnerable factors) and describes four successive phases of resilience development: meeting with a traumatic event, activation of resources and vulnerabilities, their interaction and the final result - adaptation or maladaptation.

N. Pidbutska, A. Knysh and Zh. Bohdan (2022) analyze the phenomenon of resilience as the ability to adapt and restore the psyche in conditions of excessive stress and prove that it is the development of internal resources of resilience that ensures the effectiveness of volunteer aid in war conditions.

V. Fedorchuk, L. Komarnitska and N. Storozhuk (2023) consider resilience as an integrative entity that combines psychological, emotional, social and physical aspects and ensures the viability of an individual in extreme conditions. Researchers single out the main structural elements of resilience: cognitive flexibility, positive emotional resources, spiritual and value orientation, effective strategies for overcoming difficulties and social competence.

O. Khmel and I. Lovyak (2018) define resilience as a holistic integrative characteristic of the individual, which combines cognitive, emotional-volitional, motivational and reflective components. It provides the future teacher with the ability to adequately respond to stress, maintain a professional orientation, internal balance and a positive attitude towards oneself.

Conclusions

Thus, the generalization of modern domestic research shows that resilience in Ukrainian psychology is considered as a systemic, multi-level quality that ensures effective adaptation, self-regulation and restoration of the personality in conditions of stress and crisis influences. Scientists are consistently expanding the understanding of this phenomenon - from a separate resource to a universal ability to maintain mental balance and vitality. Ukrainian research reveals similar trends, demonstrating that volunteer activity contributes to the formation of moral values, social maturity, empathy, a sense of responsibility, but at the same time can be accompanied by emotional exhaustion, secondary traumatization and professional burnout. This necessitates the development of psychological resources of resilience of volunteers. In this context, the phenomenon of resilience acquires special importance, which appears as a dynamic mechanism for maintaining adaptive functioning in conditions of stress. Various theoretical models prove that resilience is formed in the interaction of individual, social and contextual factors and can be developed through psychological preparation, self-regulation training and social support. Therefore, volunteering in crisis conditions requires a high level of resilience as a basic resource for overcoming stress, maintaining mental health and ensuring the effectiveness of assistance.

Conflicts of interest. The author declare that they have no conflicts of interest.

References

- Adamenko L.S. (2020). Current approaches to the problem of studying mental resilience. *Bulletin of the National Defense University of Ukraine. Issues of Psychology*, 5(58), 5–13. <https://doi.org/10.33099/2617-6858-2020-58-5-5-13>
- Belavina T. I. (2020). Resilience in the context of social work with individuals who are in a totally regulated social environment under conditions of forced isolation. *Scientific notes of the V. I. Vernadsky Tavrichesky National University. Series: Psychology*, 31(70), 3, 54–59. <https://doi.org/10.32838/2709-3093/2020.3/09>
- Hrishyn E.O. (2024) Psychological support for the development of resilience as a factor in the self-regulation of an individual who is in a difficult life situation: dissertation ... doctor of philosophy: 053 – Psychology. Western Ukrainian National University. Ternopil. <https://dspace.wunu.edu.ua/items/25db04db-c384-4471-9001-a38cc7be8b01>
- Zavatskyi Yu. A., Zavatska N. E., Fedorova O. V., Tsarenok L. B., Voloh K. O. (2021). The influence of the family on the resilience of the individual in crisis periods of life. *Theoretical and applied problems of psychology and social work*, 3(2), 404–410. <https://doi.org/10.33216/2219-2654-2021-56-3-2-404-410>
- Lazorko O., Shevtsova T. (2022). Research on psychoemotional states of adolescents with different levels of resilience during the war. *Psychological perspectives*, 40, 87–103. <https://doi.org/10.29038/2227-1376-2022-40-laz>
- Lazos G. P. (2018). Resilience: conceptualization of concepts, review of modern research. Current problems of psychology. Volume 3: Consulting psychology and psychotherapy. Issue 14. Institute of Psychology named after G. S. Kostyuk NAPS of Ukraine. Vinnytsia: FOP Rogalska I. O., 14, 26–64. https://lib.iitta.gov.ua/id/eprint/716873/1/Lazos_APP_V3N14_2018.pdf
- Lazos G. P. (2019). Theoretical and methodological model of resilience as the basis for building a psychotechnology of its development. *Organizational Psychology. Economic Psychology*, 2–3(17), 77–89. <https://doi.org/10.31108/2.2019.3.17.9>
- Odnostalko O. S. (2020). Resources of individual resilience in difficult and atypical life situations: dissertation ... candidate of psychological sciences: 19.00.01 - general psychology, history of psychology. Lutsk: Volyn. National University named after Lesya Ukrainka. https://ra.vnu.edu.ua/wp-content/uploads/2020/12/Dus_Odnostalko1_2.pdf
- Pidbutska N. M., Knysh A. Yu., Bohdan Zh. V. (2022). Resources of resilience of future psychologists engaged in volunteer activities during martial law. *Theory and practice of social systems management*, 4. pp. 16–25. <https://repository.kpi.kharkov.ua/items/8d27afce-bb45-4c58-ad54-95ef81073427>
- Fedorchuk V.M., Komarnitska L.M., Storozhuk N.R. (2023). Resilience of the individual in conditions of martial law. Scientific monograph. Riga, Latvia: «Baltija Publishing», 113–126. <https://doi.org/10.30525/978-9934-26-336-1-8>
- Khmel O.V., Lovyak I.V. (2018). Resilience as one of the meta-competences of developing the professional identity of a future primary school specialist. Modern strategies for the development of pedagogy and psychology: materials of the international scientific and practical conference (Lviv, November 23–24, 2018) / NGO «Lviv Pedagogical Community». Lviv, 87–90.
- Shevchenko O. T. (2020). Psychological features of the development of resilience of future nurses in working with severe somatic patients: dissertation ... candidate of psychological sciences: 19.00.07. Kyiv: I. A. Zyazyun Institute of Pedagogical Education and Adult Education. https://ipood.com.ua/data/avtoreferaty_i_dysertatsii/2020/SHEVCHENKOoleks_diser_pas.pdf
- Bartone, P.T., Ursano, R.J., Wright, K.M. and Ingraham, L.H. (1989). The Impact of a Military Air Disaster on the Health of Assistance Workers. *Journal of Nervous and Mental Disease*, 177, 317–328. <https://doi.org/10.1097/00005053-198906000-00001>
- Bonanno G. A. (2004). Loss, trauma, and human resilience: Have we underestimated the human capacity to thrive after extremely aversive events? *American Psychologist*, 59, 1, 20–28. <https://doi.org/10.1037/0003-066X.59.1.20>
- Bonanno G. A. (2009). The other side of sadness: What the new science of bereavement tells us about life after loss. New York: Basic Books. <https://psycnet.apa.org/record/2009-08336-000>
- Connor K. M., Davidson J. R. T. (2003). Development of a new resilience scale: The Connor–Davidson Resilience Scale (CD-RISC). *Depression and Anxiety*, 18(2), 76–82. <https://doi.org/10.1002/da.10113>
- Friborg F., Hjemdal O., Rosenvinge J. H., Martinussen M. (2003). A new rating scale for adult resilience: What are the central protective resources behind healthy adjustment? *International Journal of Methods in Psychiatric Research*. Vol. 12(2). P. 65–76. <https://doi.org/10.1002/mpr.143>
- Luthar S. S., Cicchetti D., Becker B. (2000). The construct of resilience: A critical evaluation and guidelines for future work. *Child Development*, 71(3), 543–562. <https://psycnet.apa.org/doi/10.1111/1467-8624.00164>
- Masten A. S. (2001). Ordinary magic: Resilience processes in development. *American Psychologist*, 56(3), 227–238. <https://doi.org/10.1037/0003-066X.56.3.227>
- Meichenbaum D. (1985). Stress Inoculation Training: A Preventive and Treatment Approach. New York: Pergamon Press, 356 p. <https://archive.org/details/stressinoculation0000meic>

- Meredith L. S. et al. (2011). Promoting psychological resilience in the U.S. military. Santa Monica: RAND Corporation. <https://www.rand.org/pubs/monographs/MG996.html>
- Reivich K., Shatté A. (2002). The Resilience Factor: 7 Keys to Finding Your Inner Strength and Overcoming Life's Hurdles. New York: Broadway Books. https://books.google.com.ua/books/about/The_Resilience_Factor.html?hl=id&id=qArk3DvVs8AC&redir_esc=y
- Rutter M. (1987). Psychosocial resilience and protective mechanisms. *American Journal of Orthopsychiatry*, 57(3), 316–331. <https://doi.org/10.1111/j.1939-0025.1987.tb03541.x>
- Tedeschi R. G., Calhoun L. G. (2004). Posttraumatic Growth: Conceptual Foundations and Empirical Evidence. *Psychological Inquiry*, 15(1), 1–18. https://doi.org/10.1207/s15327965pli1501_01
- Tedeschi R. G., Calhoun L. G. (1996). The Posttraumatic Growth Inventory: Measuring the positive legacy of trauma. *Journal of Traumatic Stress*, 9(3), 455–471. <https://doi.org/10.1002/jts.2490090305>
- Ungar M. (2011). The social ecology of resilience: Addressing contextual and cultural ambiguity of a nascent construct. *American Journal of Orthopsychiatry*, 81(1), 1–17. <https://doi.org/10.1111/j.1939-0025.2010.01067.x>
- Werner E. E., Smith R. S. (1992). Overcoming the Odds: High Risk Children from Birth to Adulthood. Ithaca, NY: Cornell University Press. <https://psycnet.apa.org/record/1992-97370-000>

РЕЗИЛЬЄНТНІСТЬ ЯК РЕСУРС ПОДОЛАННЯ НЕГАТИВНИХ ВПЛИВІВ ЗАЛУЧЕННЯ ДО ВОЛОНТЕРСЬКОЇ ДІЯЛЬНОСТІ

Барінов Сергій

Аспірант Інститут психології імені Г.С. Костюка НАПН України, Київ, Україна
<https://orcid.org/0009-0002-4811-9476>

Мета дослідження – визначити специфіку резильєнтності як ресурсу волонтерської діяльності. Аналіз зарубіжних теоретичних моделей резильєнтності показує, що це явище розглядається як багатовимірний, динамічний процес, у якому взаємодіють особистісні, соціальні, когнітивні та контекстуальні фактори. Вітчизняна психологічна наука активно інтегрує ці глобальні підходи, адаптуючи їх до реалій сучасної України. Це дозволило сформувати низку концептуальних та емпіричних напрямків, спрямованих на вивчення стійкості особистості в умовах невизначеності та кризових викликів. Узагальнення сучасних вітчизняних досліджень показує, що стійкість в українській психології розглядається як системна, багаторівнева якість, що забезпечує ефективну адаптацію, саморегуляцію та відновлення особистості в умовах стресових та кризових впливів. У статті показано, що вчені послідовно розширюють розуміння цього явища – від окремого ресурсу до універсальної здатності підтримувати психічну рівновагу та життєвий тонус. Також було показано, що українські дослідження виявляють подібні тенденції, демонструючи, що волонтерська діяльність сприяє формуванню моральних цінностей, соціальної зрілості, емпатії, почуття відповідальності, але водночас може супроводжуватися емоційним виснаженням, вторинною травматизацією та професійним вигоранням. Це зумовлює необхідність розвитку психологічних ресурсів стійкості волонтерів. У цьому контексті особливого значення набуває феномен стійкості, який постає як динамічний механізм підтримки адаптивного функціонування в умовах стресу. Ми дійшли висновку, що різні теоретичні моделі доводять, що стійкість формується у взаємодії індивідуальних, соціальних та контекстуальних факторів і може бути розвинена за допомогою психологічної підготовки, тренінгів саморегуляції та соціальної підтримки. Тому волонтерство в кризових умовах вимагає високого рівня стійкості як базового ресурсу для подолання стресу, підтримки психічного здоров'я та забезпечення ефективності допомоги.

Ключові слова: *резильєнтність, волонтерство, психічне здоров'я, професійне вигорання, саморегуляція, активність, теорії резильєнтності*

The article was received by the editors 15.9.2025 (Стаття надійшла до редакції 15.9.2025)

The article is recommended for printing 11.11.2025 (Стаття рекомендована до друку 11.11.2025)

Published 30.12.2025 (Опублікована 30.12.2025)