

## Specifics of Psychoprophylaxis and Correction in Overcoming the Phenomenon of Compassion Fatigue in Volunteers

### Особливості психопрофілактики та корекції у подоланні явищ Compassion Fatigue волонтерів

**Shevchenko Roman**

Post-graduate Student of the Department of Psychology and Social  
Work, Vinnytsia State Pedagogical University named after Mykhailo  
Kotsiubynskyi, Vinnytsia (Ukraine)  
ORCID ID: <https://orcid.org/0009-0001-2031-5443>  
e-mail: [Shevchenkeau@gmail.com](mailto:Shevchenkeau@gmail.com)

**Шевченко Роман**

аспірант кафедри психології та соціальної роботи,  
Вінницький державний педагогічного університет  
імені Михайла Коцюбинського,  
м. Вінниця (Україна)

#### **ABSTRACT**

*The purpose of the article is to empirically determine the features of psychoprophylaxis and correction in overcoming the phenomena of compassion fatigue of volunteers in the context of post-traumatic growth.*

*Research methods. Depression Anxiety Stress Scales (DASS-21) and Professional Quality of Life Scale (ProQoL) methods were used as psychodiagnostic methods in the empirical study of the phenomena of compassion fatigue to determine the stress resistance and professional quality of life of volunteers during*

---

Address for correspondence, e-mail: [kpnu\\_lab\\_ps@ukr.net](mailto:kpnu_lab_ps@ukr.net)  
Copyright: © Shevchenko Roman



The article is licensed under **CC BY-NC 4.0 International**  
(<https://creativecommons.org/licenses/by-nc/4.0/>)

© Shevchenko Roman

DOI (article): <https://doi.org/10.32626/2227-6246.2023-60.185-205>

<http://journals.uran.ua/index.php/2227-6246>

**185**

*the war. Mathematical and statistical methods, regression analysis, stochastic dependence between the investigated characteristics in groups, methods of psychological survey and comparison (Pearson's  $\chi^2$ ,  $df$ ,  $\Delta\chi^2$ ,  $\Delta df$ ) were also used.*

**Research results.** *The internal moral conflict between the principles and challenges of reality, between universal human values and individual attitudes is attributed to the specifics of psychoprophylaxis and correction for overcoming the phenomena of compassion fatigue. Among the principles of psychohygiene and psychoprophylaxis of compassion fatigue phenomena of volunteers are such principles as the principle of complexity, the principle of systematicity, the principle of psychic development, and orientation to personal resources.*

**Conclusions.** *The results show that there are statistically significant differences between the two groups of subjects according to the signs of compassion fatigue, among which we note the following indicators: a high level of depression, professional burnout, traumatic stress and a moderate level of satisfaction with compassion. When carrying out psychological prevention of compassion fatigue phenomena of volunteers, at different levels (preventive, stress, resistance, exhaustion), it is necessary to focus on individual human resources and highlight psychological, biological, spiritual and social components of personality as individual parameters of human resistance.*

*Consequently, those volunteers who directly provide assistance to victims are more prone to professional exhaustion, fatigue, psychophysical disorders and cognitive disorders than other volunteers who provide psychological interventions indirectly.*

**Key words:** *volunteers, psychotrauma, the phenomenon of compassion fatigue, psychoprevention and correction, posttraumatic growth.*

## Introduction

The psychological status of a volunteer's personality is determined by the effectiveness of their own activity. The inability to realize one's potential due to emotional overload often leads to a sense of "fatum" (inability to influence the course of events). This state of compassion fatigue is a consequence of the intense work of accumulating traumatization of a specialist in the context of re-experiencing the experience of a traumatic event of his ward or, in fact, through the provision of assistance to people or animals who suffer. The cause of compassion fatigue (hereinafter Cf) is an internal moral conflict between the principles

and requirements of reality, between universal human values and individual attitudes.

O. Kokun, N. Agaiev, I. Pishko, N. Lozinska (Kokun, Agaiev, Pishko & Lozinska, 2015) believe that as a result of the inability to influence the intensity of psychotraumatic circumstances, a person feels dissatisfied with their actions, choices, and specific duties. Consequently, the mechanism of "emotional transference" is turned on as an energy focus is not so much on events as on oneself. According to that, a certain closure of the energy circuit in the dimension "Me and circumstances" arises (Arrogante & Aparicio-Zaldivar, 2017): reality caused by constantly traumatic factors prompts the volunteer to experience it again and again, increasing *psycho-emotional burnout* (disruption of thinking processes, dominance of negative emotions, reduction of cognitive abilities), *physical disorders* (sleep disturbances, excitement of the nervous system, weight loss, etc.), *psychological exhaustion* (self-isolation, depersonalization, behavioral disturbances, changes in beliefs and judgments regarding trust, respect, safety and intimacy with people, depression, anger, PTSD, etc.), *spiritual impairment* (existential despair, loss of morale, impoverishment of emotional modulation, changes in worldview regarding identity and spirituality). Continuous compassion fatigue can develop in the context of a wide professional spectrum of the human-to-human system (Vizniuk, Teslenko, Martyniuk, Savinova, Biliuk, Kyslychenko & Stelmakh, 2022).

Emotional exhaustion of volunteers is mainly due to psychosomatic and psychovegetative disorders, which is characterized by psychophysical fatigue of a person, desolation, devaluation of one's own professional achievements, communication breakdown, development of cynical attitude towards the victims and development of psychosomatic disorders. In the majority of all subjects, personal detachment (depersonalization) is observed when performing professional duties and activities in general (Weiss & Berger, 2010).

It is important to restore life values, emotional background, professional burnout, personal resources, psychological stability and endurance. Nevertheless, Ukrainians much more often support volunteer initiatives, provide active social support to the population, the armed forces, and the Ukrainian army in general. The introduction of new norms of social responsibility into the Ukrainian society is implemented to a large extent precisely thanks to the activists and leaders of the volunteer movement. The high level of efficiency of domestic volunteers, their mobility, ability to respond to situational requests and needs quickly is noted in the works of the scientists (Kuchai, Yakovenko, Zorochkina, Okolnycha & Demchenko, 2021). Their contribution is based on theoretical and empirical studies of the motivation of volunteering, sustainability and the formation of volunteer resilience.

However, these studies reveal generalizations of the practice of volunteer projects implementation in the field of psychosocial work with their detailed, often step-by-step, description. Therefore, assessing the level of development of issues related to volunteer activity, it is worth pointing out the lack of comprehensive studies on the prospects of the volunteer movement during the anti-terrorist operation in the East of Ukraine, as well as psychoprophylaxis and corrections to overcome the phenomena of compassion fatigue. Therefore, the aim of the research is focused on the study of the potential mediating dispositional role of volunteers during the provision of assistance to the victims.

**The purpose of the article** is to determine the features of psychoprophylaxis and correction in overcoming the phenomena of compassion fatigue of volunteers empirically in the context of post-traumatic growth.

**The tasks of the article** reflect the research dispositional features of psychoprophylaxis and corrections to overcome the phenomena of compassion fatigue of volunteers during the war in working with victims; selection of principles of psychohygiene and psychoprophylaxis and structural formations based

© Shevchenko Roman

DOI (article): <https://doi.org/10.32626/2227-6246.2023-60.185-205>

on the presence of compassion fatigue phenomena in volunteers; the significance of using post-traumatic growth in overcoming the phenomena of compassion fatigue of volunteers.

*A volunteer* is a person who voluntarily carries out charitable non-profit and motivated activities of a socially useful nature (Vizniuk, 2022).

*Volunteer activity* is a voluntary, socially oriented, non-profit activity carried out by volunteers through the provision of volunteer assistance (Vizniuk & Dolynnyi, 2022).

Psychiatrist S. Mishchuk distinguishes *psychotrauma* as a step-by-step, time-stretched process of experiencing an unnatural disruption of an established life organization, mental processes, psychoemotional and psychosomatic balance of a person, which arises due to the sudden impact of a personally significant, stressful factor and leads to the development of qualitatively new elements of the worldview, effective ways of inclusion in life processes, or causes fixation on traumatic events or progresses, repeating stages (retraumatization) (Mishchuk, 2018).

*Compassion fatigue* is a syndrome of numbing of volunteers' feelings about tragic events, which was previously used for specialists who work daily with trauma (psychologists, doctors, military personnel, etc.). At first, they are horrified by the tragedy of the war and its consequences, then in the kaleidoscope of events destruction, injuries and death over and over again so it is increasingly difficult for volunteers to feel the pain of loss. That is how the syndrome of compassion fatigue develops (Vizniuk, Polishchuk & Dolynnyi, 2021).

*We consider post-traumatic growth* as the main result of restoring one's own resilience, which will constitute a certain set of psychotechniques in overcoming the consequences of stress and returning to the so-called "previous comfort zone" (Lazos, 2017). Post-traumatic growth involves transformational psychological changes in thinking, in the interpretation of one's own feelings and a person's attitude to the world, which contributes to personal growth (Vizniuk, Bilan, Tsokur, Rozheliuk, Podkovy-

© Shevchenko Roman

roff & Symonenko, 2021). On the contrary, due to the lack of clear control and awareness of one's own actions after crisis events, psychotrauma affects a person's psyche, changing it beyond recognition. At the same time, the information provision of volunteers during the psychological first aid lies in psychosocial support, basic services and the safety of victims who need immediate intervention in a safe and appropriate manner, under the conditions of not encroaching on human dignity, helplessness or well-being (Kokun, Korniaika & Panasenko, 2021).

The main principles of psychohygiene and psychoprophylaxis of compassion fatigue phenomena of volunteers include such principles as the *principle of complexity* (in the complexities of professional activity, psychological, social, economic, ideological, and organizational aspects of psychoprophylaxis should be taken into account), *the principle of systemicity* (integrity, structure, hierarchy, interdependence of the system and the external environment), *the principle of the development of the psyche* (objectively revealed in the connection of the psyche with activity, in the determination of the behavior of volunteers, the integrability of the biological, social, psychological and spiritual components of the personality) and orientation to the resources of the personality (Vizniuk, Teslenko, Martyniuk, Savinova, Biliuk, Kyslychenko & Stelmakh, 2022).

Psychological assistance is due to a combination of these components, which are integrated into various spheres of volunteers' lives (Vizniuk, Dzekan, Dolyunnyi, Fomin, Fomina & Ordatii, 2022). Psychoprophylaxis of professional burnout is also complex in nature. The personal resources of a volunteer should be, in fact, the strength of the self-concept, self-esteem, self-respect, awareness of one's own importance (as a helper), the ability to be grateful and self-sufficiency (openness to cooperation with both colleagues and victims) (Vizniuk, Teslenko, Martyniuk, Savinova, Biliuk, Kyslychenko & Stelmakh, 2022). When carrying out the psychological prevention of compassion fatigue phenomena of volunteers, at different levels

© Shevchenko Roman

DOI (article): <https://doi.org/10.32626/2227-6246.2023-60.185-205>

(preventive, stress, resistance, exhaustion), it is necessary to focus on individual human resources and highlight the psychological, biological, spiritual and social components of the personality (Table 1).

*Table 1*

Psychoprophylaxis of compassion fatigue in volunteers

Levels	Characteristics of components of psychoprophylaxis
1	2
Psychological componentaa	Preventive <ol style="list-style-type: none"> <li>1. Provision of psychological parameters (a sense of safety and comfort, visual and acoustic comfort)</li> <li>2. Supervision</li> <li>3. Psychotraining</li> </ol>
	Tension <ol style="list-style-type: none"> <li>1. Provision of psychological parameters (humor, avoidance or minimization of conflicts and uncertain circumstances (especially those that go beyond job duties) and excessive responsibility, development of positive thinking (the ability to notice positive things and not focus on the negative)</li> <li>2. Supervision</li> <li>3. Self-training</li> <li>4. Psychotraining</li> </ol>
	Resistance <ol style="list-style-type: none"> <li>1. Supervision</li> <li>2. Psychotraining</li> <li>3. Self-training</li> <li>4. Psychotherapy</li> </ol>
	Exhaustion <ol style="list-style-type: none"> <li>1. Body dynamics</li> <li>2. Psychotherapy (client-centered, art therapy, spiritually oriented, existential, bodily, etc.)</li> </ol>
1	2
Preventive	<ol style="list-style-type: none"> <li>1. Provision of physical parameters of activity (fresh air, necessary equipment, comfortable working conditions (or limitation of time spent in uncomfortable conditions), comfortable clothes, etc.)</li> <li>2. Ensuring the physiological parameters of life (sufficient sleep, quality nutrition, physical activity, exercise)</li> </ol>

Biological component	Tension	<ol style="list-style-type: none"> <li>1. Provision of physical parameters for stress relief (walks in the fresh air; comfortable clothes, comfortable working conditions)</li> <li>2. Provision of physiological parameters for stress relief (long and quality sleep, balanced nutrition with vitamins and minerals (especially with magnesium and vitamin E), morning gymnastics, dancing, phytotherapy, massage, aromatherapy, water procedures (contrast shower, sauna, swimming pool) , sports, body dynamics, etc.)</li> </ol>
	Resistance	<ol style="list-style-type: none"> <li>1. Provision of physical parameters (increase in sleep time, expansion of the external comfort zone)</li> <li>2. Provision of physiological parameters (balanced diet, additional use of vitamins; dance therapy, aromatherapy, body dynamics, sports, massage, visits to the sauna and swimming pool)</li> </ol>
	Exhaustion	<ol style="list-style-type: none"> <li>1. Provision of physical parameters (comfortable living conditions, fresh air)</li> <li>2. Provision of physiological parameters (long rest of the sanatorium-resort type, use of medicines recommended by a doctor, restorative procedures)</li> </ol>
Spiritual component	Preventive	<ol style="list-style-type: none"> <li>1. Attending art events</li> <li>2. Communication with nature</li> <li>3. Support by members of religious communities</li> </ol>
	Tension	<ol style="list-style-type: none"> <li>1. Balancing group work and solitude (with the dominance of group work)</li> <li>2. Attending artistic and spiritual events</li> <li>3. Attending targeted retreats</li> <li>4. Spiritual and religious support</li> </ol>
	Resistance	<ol style="list-style-type: none"> <li>1. Use of meditation and visualization methods (using images of your favorite corner of nature)</li> <li>2. Balance of group work and solitary time (with a predominance of solitude)</li> <li>3. Participation in artistic and spiritual activities</li> </ol>
	Exhaustion	<ol style="list-style-type: none"> <li>1. Spiritual and religious support</li> <li>2. Spiritual recovery</li> <li>3. Being in nature</li> </ol>



Social component	Preventive	<ol style="list-style-type: none"> <li>1. Provision of social needs. Constructive assessment of activity</li> <li>2. Novelty (involvement in new topics and projects)</li> <li>3. Communication with family and friends</li> <li>4. Hobbies (movies, books, embroidery, gardening, fishing, tourism, etc.)</li> </ol>
	Tension	<ol style="list-style-type: none"> <li>1. Constructive and motivational assessment of activity; awarding for effective activity</li> <li>2. Novelty (change of activity, attendance at professional conferences, travel)</li> <li>3. Communication with family and friends</li> <li>4. Hobbies (computer, movies, books, embroidery, gardening, fishing, tourism, etc.)</li> </ol>
	Resistance	<ol style="list-style-type: none"> <li>1. Reduction of direct professional load</li> <li>2. Diversification of activities</li> <li>3. Communication with people according to interests</li> <li>4. A combination of learning, assessment and growth (achieved at field events)</li> <li>5. Hobbies (movies, books, embroidery, gardening, fishing, tourism)</li> <li>6. Communication with family and friends</li> <li>7. Publications</li> </ol>
	Exhaustion	<ol style="list-style-type: none"> <li>1. Communication with family and friends</li> <li>2. Hobbies (computer, movies, books, embroidery, gardening, fishing, tourism, etc.)</li> <li>3. Changing the type of activity for the rehabilitation period (refusal from counseling and providing professional assistance)</li> </ol>

**Research methods and techniques.** In the context of further research, 287 volunteers of Mykhailo Kotsiubynskyi Vinnytsia State Pedagogical University participated (180 men, 57.5%; 107 women, 42.5%). The average age of the participants was 19.2 years (SD = 4.11). Each of the participants worked in close proximity with the victims as a social worker's assistant and a psychologist. They made two groups of people, the first of which were participants who had direct contact with victims (N = 139, 49%) and professionals who provided assistance remotely (N = 148, 51%) using Zoom, Google Meet, Learningapps, Classtime, Onlinetestpad, Miyklas, Thatquiz, as well as Facebook (and ca-

tegories: "Do it yourself", "Fun & smart", "Movie of the day", "Challenge yourself", "Smart games"), MozaWeb, case lessons, Viber, e-mail, etc.

The study was conducted in accordance with the Declaration of Helsinki and the protocol of the Internal Ethics Committee of the Department of Educational Sciences (Psychology Section). The results of the study were collected in the period from October 2022 to May 2023, in accordance with the ethics of scientific and psychological research. The survey was conducted on social networks LinkedIn and Twitter. By clicking on the link, respondents received an informed consent form and a survey information sheet with instructions on how to record and process it.

In the context of psychodiagnostic measurements of post-traumatic stress factors, the Depression Anxiety Stress Scales (DASS-21), the Professional Quality of Life Scale (ProQoL) and the professional quality of life of volunteers during the war were used to determine the professional quality of life were used, as well as mathematical and statistical methods, regressive analysis of stochastic dependence between the investigated characteristics in groups, methods of psychological survey and comparison (Pearson's  $\chi^2$ , df,  $\Delta\chi^2$ ,  $\Delta df$ ).

In the Lovibond version of the DASS-21, the subscales are rated according to the following stress levels: normal (0–4), mild (5–6), moderate (7–10), severe (11–13), and extremely severe (14+) in depression. The subscales of the second questionnaire are evaluated according to the following indicators of the level of stress development on the following scales: low (22 or less), moderate (23–41), high (42 or more) for the scale of compassion satisfaction; low (22 or less), moderate (23–41), high (42 or more) for burnout; low (22 or less), moderate (23–41), high (42 or more) for traumatic stress.

The indicators of compassion fatigue phenomena of volunteers based on the results of measurements will be presented in Table 2.

Table 2

Invariance of compassion fatigue  
coefficients of volunteers of both groups

Scales	$\chi^2$	df	$\Delta\chi^2$	$\Delta df$
High depression level	165.32	135	16.31	** 5
High professional burnout level	162.11	134	1.86	1
High traumatic stress level	160.25	134	1.94	1
Moderate level of sympathy satisfaction	155.89	134	4.36 *	1

Note: \*\*  $p < 0.001$ , \*  $p < 0.05$

From Table 1, we observe the structural connections between the general scales of the two groups. According to regression indicators for two levels of variables in groups, on the basis of which they were divided (standard deviation for higher indicators and below the average). The results show that there are statistically significant differences between these two groups according to the signs of compassion fatigue, among which we note the following indicators: a high level of depression (16.31), professional burnout (1.86), traumatic stress (1.94) and a moderate level of satisfaction with compassion (4.36\*).

From this we understand that the impact of depression on the emotional stability of volunteers is stronger and causes professional burnout in the group of those who provide assistance in conditions of increased risk. And, conversely, the survival of volunteers in individual dimensions has a significantly greater impact on the scale of "satisfaction from compassion", who work in less risky situations. That is why these volunteers have lower rates of injury from stress and fatigue in relation to professional burnout in the context of increased risk during wartime.

Thus, the specifics of psychoprophylaxis and correction in overcoming the phenomena of compassion fatigue of volunteers in the context of post-traumatic growth need to have restorative effects in overcoming a high level of depression, professional burnout, traumatic stress and understanding the importance of compassion itself as the content of conscious volunteering.

**Results and discussions.** The potential mediating role of a volunteer in providing assistance to victims in a situation of compassion fatigue is determined by dispositional resilience regarding the impact of stress, depression, and anxiety on professional quality of life among volunteers who assist victims during war (Wald, 2015). Accordingly, those volunteers who directly provide assistance to victims are more prone to professional exhaustion, psychophysical disorders (fatigue, insomnia, anxiety, irritability) and cognitive disorders (disorders of attention concentration) than other volunteers who provide psychological interventions indirectly. Potential protective factors, according to (Tsekhmister, 2022), are the same compassion and vitality at a high level of indicators of these constructs, which is the psychological capital that indicates the ability to maintain personal endurance, quality of professional life and psychophysiological health without working at the frontlines.

The above signals of deep intra-personal conflicts that can cause socio-psychological and psychosomatic disorders of the respiratory tract, cardiovascular and endocrine systems, gastrointestinal tract and psychogenic phenomena, etc (Zöllner, Calhoun & Tedeschi, 2006). The results presented above highlight to the impact on volunteers of universal values that determine the meaning of life and the stability of mental structures of the individual. Experimental data reveal significantly higher adaptability of volunteers of mediated interaction with victims and their rational approach to life creation in the context of post-traumatic growth. Experimental data reveal significantly higher adaptability of volunteers of mediated interaction with victims and their rational approach to life creation in the context of post-traumatic growth (Viznyuk, Rokosovyk, Vytrykhovska, Paslawska, Bielikova & Radziievskia, 2022).

Thus, with the help of the comparison strategy, it was established that the reference group of volunteers of direct counseling and with the help of technical means have significantly diffe-

rent values and distribution of signs of resilience. The identified qualitative and quantitative differences became the basis of the formative strategy, the main task of which was to bring the indicators of the respondents of both groups closer to the indicators of the participants in the restoration of psychosomatic health. That is why the organization of psychoprophylaxis and correction for the restoration of psychosomatic health is aimed at the self-determination of the resources of the psychological stability of the individual of each participant, at the change of attitude towards the problem-conflict situation, at the development of self-actualization and the formation of appropriate semantic orientations (Vizniuk, Bilan, Tsokur, Rozheliuk, Podkovyroff & Symonenko, 2021).

O. Kokun, N. Ahaiev, I. Pishko, N. Lozinska (Kokun, Ahaiev, Pishko & Lozinska, 2015) prove that the psychocorrective program should contain a set of training exercises aimed at improving psychological culture, developing self-knowledge, self-actualization, improving the reflective characteristics of the individual, which involves mastering the techniques of voluntary mental and psychophysical self-regulation of the state. T. Zöllner, L. Calhoun, R. Tedeschi (Zöllner, Calhoun & Tedeschi, 2006) notice that the psychocorrective complex must be aimed at combining techniques of self-regulation of the emotional state, control and change of somatic manifestations of emotions, techniques of normalizing the psycho-emotional state through the physical state of the body – physical therapy exercises, techniques of relaxation and removal of psychological barriers, techniques of harmonious breathing, psychophysical training. Yu. Tsekhmister, T. Konovalova, B. Tsekhmister, A. Agraval, D. Ghosh (Tsekhmister, Konovalova, Tsekhmister, Agraval & Ghosh, 2021) inform that the development of individual properties and mental functions of a person is determined precisely by resistance in the conditions of overcoming the phenomena of compassion fatigue of volunteers, which is based on the correction of self-esteem, the study of the strengths of the individual,

© Shevchenko Roman

the development of self-confidence, the formation of willpower, training of voluntary attention, visualization, etc.

Self-awareness of one's essence as a holistic structure, activation of individual development processes enables us to form life tactics aimed at preserving and restoring one's health (Tsekhmister, Konovalova, Tsekhmister, Agraval & Ghosh, 2021). The optimal ratio of the structural components of the personality and the maintenance of hierarchical subordination of levels ensures the preservation of basic intrapsychic connections, stability of the psyche at this stage of development (the structural aspect of health). However, the dynamics of the interaction of these components and the degree of coherence of the main mental processes determine the unique nature of the individual as a holistic and unique personality (the dynamic or procedural aspect of health). A healthy personality is characterized by the orderliness and subordination of its constituent elements on the one hand, and the coherence of the processes that ensure the integrity and harmonious development, on the other. At the same time, health is an important indicator that characterizes the personality in its entirety, is a necessary condition for the integration of all components of personality into a single unique harmonious Self.

Thus, the results of the ascertaining stage of psychodiagnostics of psychosomatic health as a factor of sustainable human life indicate a low level of psychological stability in the researched persons or their practical inability to use their competence in overcoming difficulties and the imperfection of the existing system of optimal human functioning during training in higher educational institutions (Weiss & Berger, 2010). All these problems motivate us to develop a better program for the formation of optimistic views on life to close the gaps in volunteers knowledge to ensure a healthy lifestyle in modern times (Vizniuk, Teslenko, Martyniuk, Savinova, Biliuk, Kyslychenk & Stelmakh, 2022). The results of this study are important in establishing international cooperation in exploring the programs and projects

© Shevchenko Roman

DOI (article): <https://doi.org/10.32626/2227-6246.2023-60.185-205>

in the context of the transformation of the health care system according to the international partnership standards and the implementation of cultural exchange programs in the education and culture development between countries.

**Conclusions.** Thus, the features of the presence of compassion fatigue phenomena in volunteers are structural formations as a high level of depression (16.31), professional burn-out (1.86), traumatic stress (1.94) and a moderate level of satisfaction with compassion (4.36\*).

The main principles of psychohygiene and psychoprophylaxis of compassion fatigue phenomena of volunteers include such principles as the *principle of complexity* (in the complexities of professional activity, psychological, social, economic, ideological, and organizational aspects of psychoprophylaxis should be taken into account), *the principle of systemicity* (integrity, structure, hierarchy, interdependence of the system and the external environment), *the principle of the development of the psyche* (objectively revealed in the connection of the psyche with activity, in the determination of the behavior of volunteers, the integrability of the biological, social, psychological and spiritual components of the personality) and orientation to the resources of the personality.

The use of posttraumatic growth in overcoming the phenomena of compassion fatigue involves transformational psychological changes in thinking, in the interpretation of one's own feelings and a person's attitude to the world, which contributes to personal growth. Conversely, due to the lack of clear control and awareness of one's own actions after crisis events, psychotrauma affects a person's psyche, changing it beyond recognition. At the same time, the information provision of volunteers during the provision of psychological first aid consists in the readiness to act quickly, to provide psychosocial support to the victims, using basic attitudes regarding safety and their needs, which require immediate intervention in a safe and appropriate way, under the conditions of unencroaching on the dignity of a person, his helplessness or well-being.

## Література

- Agile-ретроспективи деструктивних чинників внутрішньої конфліктності педагогів у ЗВО: монографія / Візнюк І.М., Поліщук А.С., Долинний С.С. Вінниця: Вид-во ТОВ «Друк», 2022. 256 с. ISBN 2080-75-25-385.
- Візнюк І.М. Психосоматичні кореляти психологічної стійкості особистості: дис. ... канд. психол. наук: 19.00.01. Інститут психології імені Г.С. Костюка НАПН України. Київ: Видавництво «Науковий світ», 2012. 190. URL: [https://scholar.google.com/scholar?cluster=13471603878336536590&hl=en&oi=scholar#d=gs\\_cit&t=1682015930905&u=%2Fscholar%3Fq%3Dinfo%3ADiAGC1rA9LoJ%3Ascholar.google.com%2F%26output%3Dcite%26scirp%3D0%26scf%3D1%26hl%3Den](https://scholar.google.com/scholar?cluster=13471603878336536590&hl=en&oi=scholar#d=gs_cit&t=1682015930905&u=%2Fscholar%3Fq%3Dinfo%3ADiAGC1rA9LoJ%3Ascholar.google.com%2F%26output%3Dcite%26scirp%3D0%26scf%3D1%26hl%3Den).
- Волонтерський рух: світовий досвід та українські громадянські практики: аналіт. доп. Київ: НІСД, 2015. 36 с. URL: <https://niss.gov.ua/doslidzhennya/gromadyanske-suspilstvo/volonterskiy-rukh-svitoviy-dosvid-ta-ukrainski-gromadyanski>.
- Кокун О.М. Сприяння підвищенню життєстійкості фахівців соціономічних професій: методичні рекомендації / О.М. Кокун, О.М. Корніяка, Н.М. Панасенко та ін.; за ред. О.М. Кокуна. Київ-Львів: Видавець Вікторія Кундельська, 2021. 84 с. URL: [http://psychology-naes-ua.institute/userfiles/files/Kokun\\_metod\(1\).pdf](http://psychology-naes-ua.institute/userfiles/files/Kokun_metod(1).pdf).
- Кокун О.М., Агаєв Н.А., Пішко І.О., Лозінська Н.С. Основи психологічної допомоги військовослужбовцям в умовах бойових дій. Київ: НДЦ ГП ЗСУ, 2015. 170 с. URL: <https://core.ac.uk/download/pdf/84274034.pdf>
- Лазос Г.П. Посттравматичне зростання: теоретичні моделі, нові перспективи для практики. *Актуальні проблеми психології*, 2016. Том 1. Вип. 45. С. 120–127. URL: <http://appsychology.org.ua/data/jrn/v1/i45/23.pdf>.
- Цехмістер Ю.В., Коновалова Т., Цехмістер Б.Ю., Агравал А. та Гош Д. Оцінка технології віртуальної реальності та системи онлайн-навчання для студентів-медиків в Україні під час пандемії COVID-19. *Міжнародний журнал нових технологій у навчанні*, 2021. Вип. 16, № 23. С. 127–139. DOI: <https://doi.org/10.3991/ijet.v16i23.26099>.
- Arrogante O., Aparicio-Zaldivar E. Burnout and health among critical care professionals: The mediational role of resilience. *Intensive Crit. Care Nurs.* 2017. Vol. 42. P. 110–115. DOI: 10.1016/j.iccn.2017.04.010.
- Kuchai O., Yakovenko S., Zorochkina T., Okolnycha T., Demchenko I., Kuchai T. Problems of Distance Learning in Specialists Training in Modern Terms of the Informative Society During COVID-19. *IJCSNS*



- International Journal of Computer Science and Network Security*, 2021. Vol. 21, No 12. P. 143–148. URL: <https://doi.org/10.22937/IJCSNS.2021.21.12.21>.
- Mishchuk S. Cohesion as a leading condition for overcoming psychotrauma: traditional and modern contexts. *Actual problems of psychology: Counseling psychology and psychotherapy*. 2018. Vol. 14. P. 64–77. URL: <http://www.appsychology.org.ua/data/jrn/v3/i14/5.pdf>.
- Tsekhmister Y., Vizniuk I., Humeniuk V., Yefremova O., Dolynnyi S. Modern changes in the model of professional and pedagogical training of medicines in the context of European integration processes. *International Journal of Health Sciences*, 2022. Vol. 6, No 2. P. 972–986. DOI: <https://doi.org/10.53730/ijhs.v6n2.9440>.
- Vizniuk I., Bilan L., Tsokur O., Rozheliuk I., Podkovyroff N., Symonenko T. Psychosomatic Health as a Factor of Human Social Adaptation in Postmodern Society. *Postmodern Openings*. 2021. Vol. 12, No 1. P. 54–73. URL: <https://lumenpublishing.com/journals/index.php/po/article/view/3361>.
- Vizniuk I., Teslenko V., Martyniuk I., Savinova N., Biliuk O., Kyslychenko V., Stelmakh N. Posttraumatic growth in the context of forming a positive experience of volunteers in the information environment. *IJC-SNS International Journal of Computer Science and Network Security*. 2022. Vol. 22, No 6. P. 562–670. DOI: <https://doi.org/10.22937/IJCSNS.2022.22.6.70>.
- Vizniuk I., Rokosovyyk N., Vytrykhovska O., Paslavska A., Bielikova O., Radziievska I. Information Support of the Educational Process in the Development of Leadership Potential of Modern University in the Conditions of Distance Learning. *IJCSNS International Journal of Computer Science and Network Security*, 2022. Vol. 22, No 4. P. 209–216. URL: [http://paper.ijcsns.org/07\\_book/202204/20220426.pdf](http://paper.ijcsns.org/07_book/202204/20220426.pdf).
- Vizniuk I., Dolynnyi S. Organization of Social and Pedagogical Work with Children and Young People in the Territorial Community. *Developmental potential of modern social work: methodology and technologies*. Kyiv: KNU named after Taras Shevchenko, 2022. P. 24–26. URL: [https://psy.knu.ua/images/2022/%D0%97%D0%B1%D1%96%D1%80%D0%BD%D0%B8%D0%BA\\_%D0%A0%D0%BE%D0%B7%D0%B2%D0%B8%D0%B2%D0%B0%D0%BB%D1%8C%D0%BD%D0%B8%D0%B9%20%D0%BF%D0%BE%D1%82%D0%B5%D0%BD%D1%86%D1%96%D0%B0%D0%BB%20%D0%A1%D0%A0\\_2022\\_%D1%84%D1%96%D0%BD.pdf](https://psy.knu.ua/images/2022/%D0%97%D0%B1%D1%96%D1%80%D0%BD%D0%B8%D0%BA_%D0%A0%D0%BE%D0%B7%D0%B2%D0%B8%D0%B2%D0%B0%D0%BB%D1%8C%D0%BD%D0%B8%D0%B9%20%D0%BF%D0%BE%D1%82%D0%B5%D0%BD%D1%86%D1%96%D0%B0%D0%BB%20%D0%A1%D0%A0_2022_%D1%84%D1%96%D0%BD.pdf).
- Vizniuk I., Dzekan O., Dolynnyi S., Fomin O., Fomina N., Ordatii N. Ukrainian experience of the pedagogical training of medical specialists

- in the context of European integration processes. *Revista Eduweb*. 2022. Vol. 16, No 4. P. 65–77. <https://doi.org/10.46502/issn.1856-7576/2022.16.04.6>.
- Wald H.S. Professional identity (trans)formation in medical education: reflection, relationship, resilience. *Acad. Med.* 2015. Vol. 90, No 6. P. 701–706. DOI: 10.1097/ACM.0000000000000731.
- Weiss T., Berger R. Posttraumatic Growth and Culturally Competent Practice. *Lessons Learned from Around the Globe Wiley*. Hoboken, NJ, 2010. P. 73–85. ISBN: 978-0-470-35802-3.
- Zöllner T., Calhoun L., Tedeschi R. Trauma und persönliches Wachstum. In: Andreas Maercker, Rita Rosner (Hrsg.): Psychotherapie der posttraumatischen Belastungsstörungen. *Thieme Verlag, Stuttgart*, 2006. P. 36–45. URL: [https://bilder.buecher.de/zusatz/20/20819/20819639\\_lese\\_1.pdf](https://bilder.buecher.de/zusatz/20/20819/20819639_lese_1.pdf).

## References

- Arrogante, O., & Aparicio-Zaldivar, E. (2017). Burnout and health among critical care professionals: The mediational role of resilience. *Intensive Crit. Care Nurs.*, 42, 110–115. DOI: 10.1016/j.iccn.2017.04.010.
- Kokun, O.M., Ahaiev, N.A., Pishko, I.O., & Lozinska, N.S. (2015). *Osnovy psykholohichnoi dopomohy viiskovoslužbivtsiam v umovakh boiovykh dii [Basics of psychological assistance to servicemen in combat conditions]*. K.: NDTs HP ZSU. Retrieved from <https://core.ac.uk/download/pdf/84274034.pdf> [in Ukrainian].
- Kokun, O.M., Korniiaka, O.M., Panasenko, N.M., & others (2021). *Spyriania pidvyshchenniu zhyttestikosti fakhivtsiv sotsionomichnykh profesii [Helping to increase the vitality of specialists in socio-economic professions]*. Kyiv-Lviv: Vydavets Viktoriia Kundelska. (pp. 8 – 14). Retrieved from [http://psychology-naes-ua.institute/userfiles/files/Kokun\\_metod\(1\).pdf](http://psychology-naes-ua.institute/userfiles/files/Kokun_metod(1).pdf) [in Ukrainian].
- Kuchai, O., Yakovenko, S., Zorochkina, T., Okolnych, T., Demchenko, I., & Kuchai, T. (2021). Problems of Distance Learning in Specialists Training in Modern Terms of the Informative Society during COVID-19. *IJCSNS International Journal of Computer Science and Network Security*, 21(12), 143–148. Retrieved from <https://doi.org/10.22937/IJCSNS.2021.21.12.21>.
- Lazos, H.P. (2016). Posttravmatychni zrostannia: teoretychni modeli, novi perspektyvy dlia praktyky [Posttraumatic growth: theoretical models, new perspectives for practice]. *Aktualni problem psykholohii – Current issues of psychology*, 45 (1), 120–127. Retrieved from <http://appspsychology.org.ua/data/jrn/v1/i45/23.pdf> [in Ukrainian].
- Mishchuk, S. (2018). Cohesion as a leading condition for overcoming psychotrauma: traditional and modern contexts. *Actual problems of psycho-*

- logy: *Counseling psychology and psychotherapy*, 14, 64–77. Retrieved from <http://www.apppsychology.org.ua/data/jrn/v3/i14/5.pdf>.
- Tsekhmister, Yu., Vizniuk, I., Humeniuk, V., Yefremova, O., Dolynnyi, S. (2022). Modern changes in the model of professional and pedagogical training of medicines in the context of European integration processes. *International Journal of Health Sciences*, 6(2), 972–986. Retrieved from <https://doi.org/10.53730/ijhs.v6n2.9440>.
- Tsekhmister, Yu.V., Konovalova, T., Tsekhmister, B.Yu., Agraval, A., & Ghosh, D. (2021). Otsinka tekhnolohii virtualnoi realnosti ta systemy onlain navchannia dlia studentiv-medykiv v Ukraini pid chas pandemii COVID-19 [Evaluation of virtual reality technology and online learning system for medical students in Ukraine during the COVID-19 pandemic]. *Mizhnarodnyi zhurnal novykh tekhnolohii u navchanni – International Journal of New Technologies in Education (iJET)*, 16(23), 127–139. DOI: <https://doi.org/10.3991/ijet.v16i23.26099> [in Ukrainian].
- Vizniuk, I., Bilan, L., Tsokur, O., Rozheliuk, I., Podkovyroff N., & Symonenko, T. (2021). Psychosomatic Health as a Factor of Human Social Adaptation in Postmodern Society. *Postmodern Openings*, 12(1), 54–73. Retrieved from <https://lumenpublishing.com/journals/index.php/po/article/view/3361>
- Vizniuk, I., Rokosovyyk, N., Vytrykhovska, O., Paslawska, A., Bielikova, O., & Radziievskaya, I. (2022). Information Support of the Educational Process in the Development of Leadership Potential of Modern University in the Conditions of Distance Learning. *IJCSNS International Journal of Computer Science and Network Security*, 22(4), 209–216. Retrieved from [http://paper.ijcsns.org/07\\_book/202204/20220426.pdf](http://paper.ijcsns.org/07_book/202204/20220426.pdf)
- Vizniuk, I., Teslenko, V., Martyniuk, I., Savinova, N., Biliuk, O., Kyslychenko, V., & Stelmakh, N. (2022). Posttraumatic growth in the context of forming a positive experience of volunteers in the information environment. *IJCSNS International Journal of Computer Science and Network Security*, 22(6), 562–670. DOI: <https://doi.org/10.22937/IJCSNS.2022.22.6.70>.
- Vizniuk, I.M. (2012). Psykhosomatychni koreliaty psykhologichnoi stiiykosti osobystosti [Psychosomatic correlates of psychological stability of a personality]. *Candidate's thesis*. Kyiv: Vydavnytstvo "Naukovyi svit". Retrieved from [https://scholar.google.com/scholar?cluster=13471603878336536590&hl=en&oi=scholar#d=gs\\_cit&t=1682015930905&u=%2Fscholar%3Fq%3Dinfo%3ADiAGC1rA9LoJ%3Ascholar.google.com%2F%26output%3Dcite%26scirp%3D0%26scfhb%3D1%26hl%3Den](https://scholar.google.com/scholar?cluster=13471603878336536590&hl=en&oi=scholar#d=gs_cit&t=1682015930905&u=%2Fscholar%3Fq%3Dinfo%3ADiAGC1rA9LoJ%3Ascholar.google.com%2F%26output%3Dcite%26scirp%3D0%26scfhb%3D1%26hl%3Den) [in Ukrainian].

- Vizniuk, I.M., Polishchuk, A.S., & Dolynnyi, S.S. (Eds.) (2022). *Agile-retrospektyvy destruktivnykh chynnykiv vnutrishnoi konfliktnosti pedahohiv u ZVO [Agile-retrospectives of destructive factors of internal conflict of teachers in higher education institutions]*. Vinnytsia : Vyd-vo TOV «Druk». ISBN 2080-75-25-385 [in Ukrainian].
- Vizniuk, I., & Dolynnyi, S. (2022). Organization of Social and Pedagogical Work with Children and Young People in the Territorial Community. *Developmental potential of modern social work: methodology and technologies*. Kyiv: KNU named after Taras Shevchenko. (pp. 24–26. Retrieved from [https://psy.knu.ua/images/2022/%D0%97%D0%B1%D1%96%D1%80%D0%BD%D0%B8%D0%BA\\_%D0%A0%D0%BE%D0%B7%D0%B2%D0%B8%D0%B2%D0%B0%D0%BB%D1%8C%D0%BD%D0%B8%D0%B9%20%D0%BF%D0%BE%D1%82%D0%B5%D0%BD%D1%86%D1%96%D0%B0%D0%BB%20%D0%A1%D0%A0\\_2022\\_%D1%84%D1%96%D0%BD.pdf](https://psy.knu.ua/images/2022/%D0%97%D0%B1%D1%96%D1%80%D0%BD%D0%B8%D0%BA_%D0%A0%D0%BE%D0%B7%D0%B2%D0%B8%D0%B2%D0%B0%D0%BB%D1%8C%D0%BD%D0%B8%D0%B9%20%D0%BF%D0%BE%D1%82%D0%B5%D0%BD%D1%86%D1%96%D0%B0%D0%BB%20%D0%A1%D0%A0_2022_%D1%84%D1%96%D0%BD.pdf)
- Vizniuk, I., Dzekan, O., Dolynnyi, S., Fomin, O., Fomina, N., & Ordatii, N. (2022). Ukrainian experience of the pedagogical training of medical specialists in the context of European integration processes. *Revisita Eduweb*, 16(4), 65–77. Retrieved from <https://doi.org/10.46502/issn.1856-7576/2022.16.04.6>
- Volonterskyi rukh: svitovi dosvid ta ukraïnski hromadianski praktyky [Volunteer movement: world experience and Ukrainian civic practices]* (2015). K.: NISD. Retrieved from <https://niss.gov.ua/doslidzhennya/gromadyanske-suspilstvo/volonterskiy-rukhsvitoviy-dosvid-ta-ukraïnski-gromadyanski> [in Ukrainian].
- Wald, H.S. (2015). Professional (trans)formation in medical education: reflection, relationship, resilience. *Acad. Med.*, 90(6), 701–706. DOI: 10.1097/ACM.0000000000000731.
- Weiss, T., & Berger, R. (2010). Posttraumatic Growth and Culturally Competent Practice [Posttraumatic Growth and Culturally Competent Practice]. *Lessons Learned from Around the Globe Wiley*. Hoboken, NJ. (pp. 73–85). ISBN: 978-0-470-35802-3.
- Zöllner, T., Calhoun, L., & Tedeschi R. (2006). Trauma und persönliches Wachstum. In: Andreas Maercker, Rita Rosner (Hrsg.): *Psychotherapie der posttraumatischen Belastungsstörungen. Thieme Verlag, Stuttgart*. (pp. 36– 45. Retrieved from [https://bilder.buecher.de/zusatz/20/20819/20819639 lese\\_1.pdf](https://bilder.buecher.de/zusatz/20/20819/20819639 lese_1.pdf).

**Шевченко Роман. Особливості психопрофілактики та корекції у подоланні явищ *compassion fatigue* волонтерів.**

**Мета статті** – емпірично визначити особливості психопрофілактики та корекції щодо подолання явищ *compassion fatigue* волонтерів у контексті посттравматичного зростання.

**Методи дослідження.** В емпіричному дослідженні явищ *compassion fatigue* використано методуки Depression Anxiety Stress Scales (DASS-21) і Professional Quality of Life Scale (ProQoL) для визначення стресостійкості та професійної якості життя волонтерів під час війни, а також математико-статистичні методи, регресивний аналіз стохастичної залежності між досліджуваними ознаками в групах, методи психологічного опитування й порівняння ( $\chi^2$  Пірсона,  $df$ ,  $\Delta\chi^2$ ,  $\Delta df$ ).

**Результати дослідження.** До особливостей психопрофілактики та корекції щодо подолання явищ *compassion fatigue* віднесено внутрішній моральний конфлікт між принципами та вимогами дійсності, між загальнолюдськими цінностями та індивідуальними установками. Серед принципів психогігієни та психопрофілактики явищ *compassion fatigue* волонтерів виділено такі, як принцип комплексності, принцип системності, принцип розвитку психіки та орієнтація на ресурси особистості.

**Висновки.** Результати засвідчують, що існують статистично значущі відмінності за цими двома групами досліджуваних відповідно до ознак наявності *compassion fatigue*, серед яких відзначимо такі показники: високий рівень депресії, професійного вигорання, травматичного стресу та помірний рівень задоволення від співчуття. Здійснюючи психологічну профілактику явищ *compassion fatigue* волонтерів, на різних рівнях (профілактичний, напруження, резистенція, виснаження), потрібно орієнтуватися на індивідуальні ресурси людини та виділяти психологічну, біологічну, духовну та соціальну складові особистості як індивідуальні параметри резистентності людини.

Відповідно, ті волонтери, які безпосередньо надають допомогу потерпілим, більше схильні до професійного виснаження, втоми, психофізичних розладів та когнітивних порушень, ніж інші добровольці, які здійснюють психологічні втручання опосередковано.

**Ключові слова:** волонтери, психотравма, явище *compassion fatigue*, психопрофілактика та корекція, посттравматичне зростання.

Original manuscript received 28.03.2023

Revised manuscript accepted 01.06.2023

© Shevchenko Roman

DOI (article): <https://doi.org/10.32626/2227-6246.2023-60.185-205>

<http://journals.uran.ua/index.php/2227-6246>

205