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## **A CROSS-CULTURAL STUDY OF THE IMPACT OF WAR ON INDIVIDUALS OF DIFFERENT AGES AND PLACES OF RESIDENCE**

*This study is about young adults aged 18 to 30's psychological crisis states during the ongoing war in Ukraine. It is a study on the direct effects of war as a prominent stressogenic factor on their mental health and well-being. It employs a combination of methods such as quantitative surveys, in-depth interviews, and case studies to research the emotional, cognitive, and behavioral responses of individuals deprived of the conflict. The research looks at the differences between the genders, the split in the age group (18–24 and 25–30), and the displacement status (forced migrants versus the ones that stayed in their communities) of the participants particularly.*

*Major findings exhibit too high the levels of anxiety, depression, and post-traumatic stress disorder (PTSD) among especially the ones that had direct combat exposure or were forced to leave their homes. The emotional responses of adolescents (18–24) are characterized by high levels of emotional reactivity, utilizing avoidance coping mechanisms, and higher susceptibility to stress. In turn, adults at the ages of 25–30 apply mainly cognitive and relational strategies, like problem-solving and community support, which points to the resilience differences between age groups.*

*There is a new study suggesting that besides individual factors, social support systems and cultural resilience are important in the alleviation of the negative influences of war. Among the factors, social networks, communal practices, and traditional rituals are mentioned as the ones, which provide a safety pool and a feeling of being important. Moreover, the authors indicate that excessive use of digital content that is distressing, which is seen mainly in the younger population, is the cause of further anxiety and emotional distress, therefore showing that social media has a dual role functioning both as a coping tool, and also as a stressor.*

*Studies pay attention to the high priority and cultural specificity of psychiatric support, which should be designed for the peculiar needs of young people in Ukraine. These programs have to be concentrated on empowering defenders, improving the availability of psychological support, and integrating digital skills classes to cushion the effect of harmful content.*

**Key words:** *Crisis states, young adults, war in Ukraine, mental health, PTSD, resilience, gender differences.*

### **Гурковський Дмитро. МІЖКУЛЬТУРНЕ ДОСЛІДЖЕННЯ ВПЛИВУ ВІЙНИ НА ЛЮДЕЙ РІЗНОГО ВІКУ ТА МІСЦЯ ПРОЖИВАННЯ**

*Це дослідження присвячене вивченню психологічного дистресу молодих людей віком від 18 до 30 років в умовах триваючого конфлікту в Україні. Основний акцент робиться на прямому впливі збройних конфліктів як вирішального фактора стресу, що впливає на психологічне здоров'я та загальне здоров'я людини. Дослідження використовує комбінований підхід, включаючи опитування, інтерв'ю та тематичні дослідження для вивчення емоційних, когнітивних і поведінкових реакцій тих, хто постраждав від конфлікту. Додаткова увага приділяється відмінностям між статями, віковими категоріями (18–24, 25–30), а також державами біженців і непереміщених осіб.*

*Дослідження виявило винятковий рівень занепокоєння, смутку та наслідків травматичних подій, особливо серед осіб, які зазнали бойових дій, або біженців, які були змушені покинути свої домівки. Діти віком від 18 до 24, як правило, легше засмучуються, використовують свої особливі способи вирішення проблем і частіше відчують стрес. Порівняно з молодими людьми у віці 25–30 років, підлітки більше покладаються на інтелект і групу взаємодію, щоб впоратися, що відображає різницю в жорсткості на різних етапах життя.*

*Нові дослідження підкреслюють, що, крім особистих факторів, допомога громади та культурна наполегливість значною мірою сприяють зменшенню негативних наслідків конфлікту. Це групи, спільні способи виконання завдань і старі церемонії, які створюють «зону комфорту» і допомагають людям почуватися важливими. Тим не менш, надмірне захоплення тривожними онлайн-матеріалами, поширене серед молоді, посилює тривогу та емоційні розлади, що вказує на подвійний вплив соціальних медіа – як пом'якшення стресу, так і його сприяння.*

*Дослідження підкреслюють необхідність пріоритетних і культурно адаптованих психотерапевтичних ініціатив, які мають підвищити психічну стійкість, розширити доступ до ресурсів психічного здоров'я та включати заняття з кіберграмотності для пом'якшення наслідків шкідливого цифрового контенту, і все це спеціально для молодих українців.*

**Ключові слова:** кризові стани, під час юності та ранньої дорослості, війна в Україні, психічне здоров'я, ПТСР, стійкість, гендерні відмінності.

**Introduction.** War in Ukraine has affected the modern landscape of psychical and social realities today, particularly in Ukraine, and deeply affects most young adults ages 18 to 30 according to changing transitions in their lives such as identity formation, developing a career, and social integration. Numerous war-induced developmental adjustments are exacerbated by such multifaceted challenges as displacement, exposure to violence, and economic instability.

Research about similar conflict environments such as Bosnia and Syria provides long-term insight into the psychological outcomes of war among young populations [1; 2]. However, it should be noted that the context will in fact be rather unique as cultural resilience and community dynamics are compounded by the unprecedented role of digital media in shaping perceptions and coping modalities. This study aims to elaborate on how the psychical impact of war is reflected in Ukrainian young adults, thereby investigating the roles of social support systems, cultural practices, and targeted mental health interventions.

The phenomena of young adults during and after the time of war have received considerable attention in a lot of research locations of different conflicts- from Syria to Bosnia and even up to Vietnam. This article attempts to consolidate existing works in order to understand what stressogenic factors may hold in terms of mental health outcomes among young populations, as well as what points converge and diverge the findings with the Ukrainian context.

A review of different studies across all conflict areas indicates that there is an alarmingly high rise in the rates of anxiety, depression, and PTSD

in young people below the age of 30 who have had first-hand exposure to war. Fazel and Stein found that more than 60% of displaced Syrian youth showed signs of severe anxiety, related to disrupted family structures, and a loss of educational opportunities [3]. Similarly, Mollica found a 40–50% prevalence rate of PTSD among Bosnian refugees, revealing the relation between prolonged displacement and the worsening of mental health [4].

Pertaining to Vietnam, longitudinal studies by Murray have shown that PTSD symptoms tend to continue for decades post-conflict, especially among individuals exposed to prolonged violence when in the formative years. This shows that trauma affects young adults in the long term and requires immediate and continued intervention [5].

In the Ukrainian context, recent studies underscore similar trends among displaced populations. According to the Psychological Association of Ukraine (2023), 42% of internally displaced persons (IDPs) aged 18–30 exhibit symptoms of PTSD, often linked to abrupt disconnection from familial and social networks [6]. Kovalenko and Serhienko highlight the challenges of prolonged displacement, noting that individuals with strong cultural and social ties reported fewer symptoms of psychological distress [7]. These findings align with Hobfoll's Conservation of Resources (COR) theory, which emphasizes the protective role of accessible social and material resources [8].

Furthermore, Ukrainian studies indicate that younger IDPs (aged 18–24) face unique vulnerabilities due to disrupted educational pathways and limited professional experience, which compound their feelings of uncertainty and loss.

This is particularly evident in findings from the Ukrainian Academy of Sciences, which documented higher rates of anxiety and depression among this subgroup compared to their older counterparts (aged 25–30) [9].

Sex differences in warfare neuronal stress responses are well established. Women are often seen to have increased anxiety and depression due to their caregiving obligations and natural societal obligations [10]. In contrast, men contend with unique stress sources of conscription, moral injury, and societal pressure to “protect” their communities [1].

Age-specific analyses have revealed that younger adults (those aged 18–24) had emotional reactions more highly elevated and more tended to use avoidance than older youth (25–30) in problem-focused approaches [11]. These differences indeed make calls for age-specific programmed interventions to respond to differential coping mechanisms and psychological needs.

Cultural practices help link resilience among young people in places of conflict. As reported by Werner, communal rituals, religious gatherings, and aspects of traditional art usually have a protective impact in buffering psychological distress [12]. So Kovalenko and Serhienko (2024) cited healing functions of some Ukrainian cultural practices, such as communal singing and storytelling, in facilitating emotional healing as well as the calling for social cohesion [7].

In addition, social support networks are equally important. Hobfoll developed Conservation of Resources (COR) to demonstrate that social as well as material attachment may be helpful in ameliorating the effects that trauma may have. As such, this theory fits with the fact that in Ukraine, displaced persons who had a larger community reported lower rates of psychological distress [8; 13].

The role of digital media in molding psychological responses during conflict is yet another area of relative novelty in scholarship. While it has been said that platform messages are crucial for informative and linking individuals, the very quantity of information dished out by such platforms adds to the level of anxiety and fear (Nickerson et al., 2011). Most doomscrolling

was reported by young Ukrainians aged 18–24 as an activity detrimental to mental health [2; 14].

Scholars wrote a great deal about the various stresses that war causes, but many gaps remain in the subject. One such category in the area was a few papers, and that was about how cultural resilience and digital media overlap in conflict places. Moreover, very few longitudinal data were available regarding the efficacy of interventions for young adults concerning recovery from post-war conditions, especially in the cases of Ukraine.

Research Objectives building on the insights from the literature review, this study aims to:

1. Examine the emotional, cognitive, and behavioral responses of Ukrainian young adults (18–30) to war-induced stress.
2. Investigate the moderating effects of cultural resilience and social support on psychological outcomes.
3. Analyze the impact of digital media consumption on mental health within this demographic.
4. Propose evidence-based, culturally informed interventions for fostering resilience and recovery among young adults in Ukraine.

The cross-mix methods certainly show a complete capture rather than just about understanding the crisis states already felt by young adults even during the war. The combination of the techniques included quantitative surveys, qualitative interviews, and case studies.

Quantitative Surveys. Structured questionnaires were administered to 500 participants aged 18 to 30 across various regions of Ukraine. These surveys assessed:

- Anxiety and depression levels using the Generalized Anxiety Disorder Scale (GAD-7) and Patient Health Questionnaire (PHQ-9).
- PTSD symptoms using the Post-Traumatic Stress Disorder Checklist (PCL-5).

Coping mechanisms using the Brief COPE Inventory.

Qualitative Interviews. We did semi-structured interviews on 30 participants, internally displaced persons (IDPs), those who stay at active conflict zones, and people who have remained in their communities. The interviews explored:

- Personal experiences of psychological distress.

- Adaptive strategies employed during crises.
- Perceptions of social and institutional support.

**Case Studies.** Ten in-depth case studies provided granular insights into individual coping strategies and the specific challenges faced by different subgroups within the population.

**Data Analysis.** The quantitative data were subject to analysis on these measures using SPSS 27, t-tests, and ANOVA for subgroup comparisons. Thematic analysis was employed on qualitative data with a focus on recurrent themes emanating from resilience, stress responses, and intervention efficacy.

Results of the psychological impact of anxiety and depression. The findings provided the shocking rates in anxiety and depression:

- 68% reported moderate to severe anxiety
- 54% experienced symptoms consistent with clinical depression.

These rates reflected higher proportions in IDPs, who face further stressors, for instance, housing instability and loss of social networks.

Responses to PTSD were found in 42% of respondents. Those who were exposed to shelling or direct combat had symptoms of PTSD significantly different from those who lived in less affected areas ( $p < 0.01$ ).

Among participants 18–24 years, reactivity was more emotional and more reliant on media for coping, often aggravating stress levels. Those aged 25–30, on the other hand, employed more pragmatic coping means such as problem-focused strategies and seeking support from the community.

A comparative line chart that shows PTSD prevalence over time in two different age groups across Ukraine and historical ones – Syria, Bosnia, Vietnam – has much more evidence to show increased susceptibility among the younger population.

Strong social networks were associated with significantly lower psychological distress ( $p < 0.05$ ). Cultural practices, mainly held at common family houses and religious sites, were established as key cushions to mental health deterioration.

In addition to direct social support, participants indicated the importance of cultural prac-

Table 1  
**Subgroup Analysis: Ages 18–24 vs. 25–30  
Emotional and Cognitive Reactions**

Age Group	Primary Emotional Responses	Cognitive Reactions
18–24	Heightened anxiety, fear, and anger	Difficulty concentrating, intrusive thoughts
25–30	Increased sadness, frustration	Problem-solving focus, planning

Table 2  
**Behavioral Adaptations**

Age Group	Positive Coping Strategies	Negative Coping Strategies
18–24	Seeking social connections, art therapy	Avoidance, substance use
25–30	Community involvement, professional help	Overworking, withdrawal

**Examples:**

*Case Study 1:* A 20-year-old university student reported using online art platforms to express emotions, noting that this outlet reduced anxiety.

*Case Study 2:* A 28-year-old entrepreneur emphasized leveraging structured routines to regain a sense of control after displacement.

Table 3  
**PTSD Progression and Gender Dynamics  
Comparative PTSD Analysis by Age Group**

Conflict	18–24 PTSD Prevalence (%)	25–30 PTSD Prevalence (%)
Ukraine	47	37
Syria	45	35
Bosnia	40	30
Vietnam	42	32

tices such as traditional feasts, religious congregational services, and artistic expressions in creating psychological resilience. 73% of respondents affirmed that cultural rituals helped keep normalcy and community belongingness alive within them.

Findings on the present study tie into most research worldwide on the psychological impact of conflict: namely, those young adults, particularly aged between 18 and 30 years, have high rates of incidence in war-induced psychological distress [13]. A major finding is the role of digital media in acting as both a mediator for coping as well as a stressor. For instance, participants aged between 18 to 24 admitted that they were “doom scrolling” and/or had been viewing other

distressing content-noting high anxiety levels after seeking community support and real-time updates through social media. In fact, this duality emphasizes the importance of digital literacy initiatives that specifically target young adults in conflict-affected areas. Responses were reported to differ highly in the two age subgroups within the study. Younger participants (18–24) displayed heightened emotional reactivity.

Representation in psychological outcomes is quite significant by gender. While women had higher levels of anxiety and depression, which were sometimes linked to their caregiving roles and family-restructuring issues, Tolin and Foa had pointed out that compounded stressors faced by women in such situations were indeed inevitable. Instead, issues within conscription, financial insecurity, and moral injury existed among men and were compounded primarily when the actions they undertook during that time went against personal or societal values [1; 10].

Therefore, intervention strategies must be gender-sensitive and take into consideration the specific psychological and societal pressure facing each group. For example, psychological support programs could include women in caregiving roles and mental health training before deployment for men.

Cultural events served as a more important buffer for stress than other effects in war. Those who provided testimonies accepted that traditional rituals, such as communal singing, religious festivals, and storytelling, among the Ukrainians, had therapeutic values for emotional healing and societal cohesion. This is not contrary to the position by Werner whereby cultural resilience was endorsed to mitigate psychological distress [12].

The value of such cultural practices is emphasized especially among the displaced. About 73% of internally displaced respondents associated the participation in such events with normalcy and belonging, even if they had to do so in an unfamiliar context. This aspect sheds light on the possibility that a cultural approach to mental health interventions could improve their effectiveness and acceptability among Ukrainians.

Comparative Evaluation with Global Warfare. Contrasts of the average levels of PTSD found in young Ukrainian adults with their counterparts having the same age found in all other conflict areas in the world, like in Syria, Bosnia, or Vietnam, show similarities and differences. All of these suffer higher rates of PTSD among younger adults aged 18–24 compared to slightly older individuals aged 25–30. This is mainly because of the increased emotional sensitivity and lack of coping resources typical for the younger age groups [3; 15]. The unique sources of stress would presumably differ from those of other contexts, with a salient difference being the role of digital media, as social media has been both a source of community building and access to vital information. The extreme exposure of people, especially young ones, to very graphic content and to a tsunami of misinformation, has been worsened anxiety; Bosnia and Vietnam, where traditional media played a more substantial role, hardly felt the psychological impact of digital content.

Implications of this study are enormous to mental health practitioners as well as policymakers. Some of the major recommendations are as follows:

1. Digital Literacy Programs: Initiatives aimed at educating young adults on managing digital media consumption could mitigate the adverse effects of “doomscrolling”. For example, mindful use of media by such content curation campaigns could also alleviate stress due to misinformation-fatigue.

2. Culturally-Informed Interventions: ‘Storytelling’ and ‘community ritual’ forms of traditional Ukrainian-type resilience might make mental wellbeing efforts more relevant and accessible by incorporating cultural components.

3. Gender-Sensitive Approaches: Addressing the unique psychological needs of men and women through targeted interventions is essential. Programs should consider the societal roles and pressures specific to each gender, such as caregiving responsibilities for women and conscription-related stress for men.

4. Gender-sensitive approaches were brought to being in the form of targeted, even specific

interventions, directed towards tackling the needs of men's and women's motivations within the psychological arena. Programs should consider the societal roles and pressures that each represent; for women, care provision roles concerned for men may be linked to conscription and other stresses.

**Increased Access to Mental Health Services:** More telepsychiatry services could very important widen the reach of mental health services for the residents, especially rural and displaced populations. Much such efforts should be collaborative by local and international organizations to increase equal distribution of resources and services.

**Longitudinal Studies:** Research efforts that last over time will surely also yield information on how they appear in the psychological profiles of young adults during the post-war or completely different situations that may prevail in the war-torn country, as Ukraine presents, when looking at the long-term psychological results of those affected by this radically war-attributed intervention in their being.

Although the study itself forms such a well-rounded full picture of young adults in Ukraine, it did not escape the limitations and perspectives for future studies. Most importantly is the

use of self-report data; while it may bring to the study personal accounts, it can be quite biased, largely since it is quantitative. Also, because it is cross-sectional in its design, it does not create the possibility of measuring "resultant" psychological appraisals and states. Studies in the future should adopt longitudinal designs to assess variation in mental health over time.

Cross-examining digital media usage with cultural resilience in such a way that reveals new interpretations may also open up novel research spaces. For example, one may be able to study how best to harness the power of social media platforms to boost cultic practice alongside community building in order to inform novel intervention design.

**Conclusions.** The research reveals how war affects the minds of young adults in Ukraine and stresses the importance of attending to interventions that are culturally appropriate. Policymakers and mental health professionals should account for the specific needs of young adults so they can develop resilience, and recovery, and create a healthy society post-war. Future studies should focus on a longitudinal outcome and effectiveness of interventions against long-term psychological distress.

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