PSYCHOLOGICAL DETERMINANTS OF RESILIENCE: THEORETICAL ANALYSIS OF PERSONAL AND COPING APPROACHES

ПСИХОЛОГІЧНІ ДЕТЕРМІНАНТИ РЕЗИЛІЄНТНОСТІ: ТЕОРЕТИЧНИЙ АНАЛІЗ ПІДХОДІВ

In today's environment, the issue of personal resilience is becoming increasingly important. The issue of a person's ability to overcome difficult life situations, adapt to stressful conditions and return to balance is relevant. The article presents a theoretical analysis of the psychological determinants of resilience: personal traits and coping behaviour. The content of the concept of "resilience" by scientists is presented. Four main trajectories of resilience development are allocated. It is stated that it is important to consider resilience as a stable and at the same time dynamic phenomenon associated with mental well-being, health and features of coping that may be its consequences. It is noted that training in more effective coping strategies can increase resistance at the biological level. Resilience is the process and outcome of successfully adapting to difficult or challenging life experiences, especially through mental, emotional, and behavioral flexibility and adjustment to external and internal demands. The impact on the functional activity of the brain by forming adaptive cognitive, emotional and behavioural patterns of stress response will strengthen the weak links of the human stress system. This suggests that resilience should be considered both as a trait that is relatively stable, caused by internal and external factors, and as a dynamic process, as resilience is formed, develops and has its own dynamics throughout life. It has been determined that some personality traits (serving as a foundation) and coping strategies (being mechanisms) contribute to the development of resilience.

Key words: resilience, resistance, determinants, personal characteristics, coping strategies, war time.

Key words: стійкість, резилієнтність, резистентність, детермінанти, особистісні характеристики, копінг-стратегії, воєнний час.

Introduction. In the context of modern life, saturated with stressful factors, the issue of resilience and psychological security of the individual is of particular importance. In this context, the quality of psychological resilience and vitality of a personality as resilience is becoming increasingly important. Resilience is seen as the ability of a person to successfully overcome life's difficulties, adapt to stressful conditions, while maintaining internal balance. The issue of studying the psychological determinants of resilience remains relevant, which will allow identifying personality resources to increase stress resistance and adaptive capabilities.

The purpose of the article is to provide a theoretical analysis of the personal and coping approaches to the study of psychological factors of resilience.

The main part. According to the American Psychological Association, psychological resilience is the ability of a person to successfully adapt and overcome difficult life situations through flexible thinking, emotional stability and adequate behavioural response. The level of
resilience is influenced by a number of factors, including: ways of perceiving and interpreting events, access to social support, and effective coping strategies (American Psychological Association Dictionary of Psychology, 2018). Studies show that constructive thinking, emotional regulation and stress management skills can be purposefully developed, thereby increasing an individual's adaptive potential and psychological resilience.

Resilience can be defined as the ability of a system to adapt and resume its functioning in the face of adverse changes that threaten its existence or further development. This universal definition is applicable to different levels of systems – from an individual organism to complex social structures (Southwick, S. M., Bonanno, G. A., Masten, A. S., Panter-Brick, C., & Yehuda, R., 2014). In particular, resilience is inherent in the human individual, as well as in families, organisations, communities, economies, ecosystems, and even entire nations. The essence of resilience is the ability of a system to adapt to threatening conditions and restore optimal functioning after stressful impacts.

In domestic sources, a number of terms are used to refer to the concept of "resistance", in particular: "resilience", "resilience", "psychological resilience". There are discussions about the semantic content of these terms. It is proposed to distinguish between "resilience" as a personality trait and "resilience" as a dynamic process of adaptation and self-regulation. The author also draws a line between the concepts of "resilience" and "resilience", emphasising their differences. Thus, discussions are still ongoing on the establishment of Ukrainian equivalents of the term "resilience" and its semantic content in different contexts (Kravchuk, 2018; Tkach, 2018).

Thus, in our study, we use the terms "resilience" and "resilience" in an integrative sense. We assume that resilience is based on certain individual psychological characteristics of a personality and is implemented through inherent coping strategies that act as resistance mechanisms. Together, these components form a dynamic process of recovery from stress. That is, resilience and resilience are considered here as interrelated characteristics that together ensure the resilience and adaptation of the individual.

In the modern paradigm of mental health, the emphasis is shifting from the model of the "mental health-psychopathology continuum" to the model of psychological well-being and flourishing of the individual. The presence of mental disorders does not preclude a person from achieving a certain level of well-being. There is a growing emphasis on preventive strategies with a focus on strengthening protective factors, adaptability and recovery rather than pathology. The medical model has evolved from the study of disease progression to a dynamic model of health development throughout life. In this context, an important area is the development of interventions aimed at developing psychological resilience to achieve better mental health (Halfon, & Forrest, 2018).

Contemporary research on resilience is moving towards a more positive, flexible approach, focused on identifying factors that contribute to health and well-being. As Ryff C., Singer B. (Ryff, & Singer, 2003), point out, by studying resilience and prosperity in their interconnectedness, we enrich our understanding of human well-being. Most scholars focus on resilience as a means of avoiding negative consequences, but there is an alternative view that only those who "take on the challenge" are able to reach the heights of prosperity. The integrative model allows for a balanced consideration of the processes that can occur throughout life and the various reactions of a person to life circumstances.

In the context of resilience, a person is able to overcome the stresses and traumas they face throughout their lives with more dignity. Individuals with severe symptoms of post-traumatic stress disorder can at the same time demonstrate high psychological resilience due to their determination to "move forward" by shifting their focus from the negative consequences (Southwick, S. M., Bonanno, G. A., Masten, A. S., Panter-Brick, C., & Yehuda, R., 2014).

In research, health and resilience are increasingly seen as a way of multimodal overcoming dysfunctions (stress of various kinds). This is a shift in emphasis from studying pathology to identifying and developing factors of psychological resilience and well-being (Kalisch, Müller, & Tüscher, 2015).

Scientists identify four main trajectories of resistance (Fig. 1).

1. Chronic resistance (in people with prolonged exposure to negative factors and chronic dysfunctions).
2. Resistance (resilience) itself (relatively stable trajectory of healthy adjustment).
3. Normal recovery (symptoms appear immediately after the event and then gradually decrease).

For the purpose of this study, it is important to consider resilience as a stable and at the same time dynamic phenomenon that is related to mental well-being, health and coping characteristics that may be its consequences.
The concept of resilience envisages a large number of internal and external factors that form its mechanisms. According to the scope of action, resistance mechanisms are classified as: specific, protecting against a particular disorder or symptom; general, protecting against several disorders or symptoms; global, protecting against a wide range of functional disorders and stress reactions (Wiley, 2013).

The concepts of protective and vulnerable factors are used to describe the processes that modify the effect of a stressor – to denote favourable and unfavourable effects in the interactive model of resistance formation (Luthar, Cicchetti, & Becker, 2000).

Neuroscience research helps to understand the nature and mechanisms of resistance. In particular, genetic factors determine the susceptibility to resistance by 70-77%, while the impact of the environment is not decisive. In addition, epigenetic regulation mediates stress resistance processes (Waaktaar, & Torgersen, 2012).

At the neurobiological level, resilience is associated with brain functions involved in reward and emotional regulation, which correlates with indicators of mental well-being. In particular, there are changes in activity in areas responsible for executive functions and emotional control (Iadipaolo et al., 2018; Kong, Ma, You, & Xiang, 2018).

Thus, neurobiological data allow us to better understand the role of resistance as an adaptive mechanism at the level of brain structures and neural networks.

Studies show a positive correlation between the level of resistance and more active involvement of brain areas responsible for executive functions. Scientists suggest that this is due to the use of active coping strategies by people with higher resilience. At the same time, a higher level of resilience demonstrates a negative relationship with the activity of brain areas involved in emotionally focused coping and associated with character accentuations.

Thus, the psychological data are consistent with the results of neurobiological studies of functional brain activity during resistance and confirm the role of coping strategies as its mechanisms.

Indeed, these findings are consistent with the results of other studies. In particular, higher levels of resilience are associated with morphological changes in brain areas involved in executive control and emotional regulation. Resilience is positively correlated with positive affect and negatively correlated with negative affect. Individuals with low resilience may have poorer cortico-lymphatic function, making them more vulnerable to stress. More resilient individuals recover better from stress and demonstrate greater emotional and cognitive control and perseverance. Differences in resilience levels can be explained by the following indicators: a sense of control over life and the spiritual world (Gupta et al., 2017).

Thus, there is convincing evidence of the role of neurobiological mechanisms in the formation of stress resistance and adaptability.

According to research (Gupta et al., 2017), brain markers of low resilience may be biological predictors of increased vulnerability to stress-related diseases, even in healthy individuals. This opens up opportunities for preventive strategies.

In particular, training in more effective coping strategies can increase resilience at the biological level. Influencing the functional activity of the brain through the formation of adaptive cognitive, emotional and behavioural patterns of stress response will strengthen the weak links in the human stress system.

---

**Fig. 1. The main trajectories of resistance deployment**

- Chronic resistance
- Resistance (resilience)
- Normal recovery
- Delayed resistance

---
Thus, integrated psychological and biological approaches have a good prospect of preventing disorders associated with the negative effects of chronic stress.

Indeed, the neurobiological basis for the formation of resistance is associated with complex reactions to stress, including the activity of neurotransmitter systems (e.g., neuropeptide Y) and the hypothalamic-pituitary-adrenal axis, which regulates cortisol levels. These processes underlie individual stress vulnerability and the adaptive response – resilience (Kautz, Charney, & Murrough, 2017).

Much attention has been paid to the study of resilience in the context of recovery from trauma and post-traumatic disorders. However, in our study, we focus on resilience in relation to everyday stress, without directly addressing traumatic experiences. We consider resilience as a general ability of an individual to overcome life's difficulties and distress.

However, it is worth noting that the general principles of trauma recovery can be reproduced to some extent in stress recovery. The more extreme the impact of trauma, the greater the potential for resilience and personal growth.

The process-oriented approach sees resilience as a dynamic process in which individuals actively adapt and quickly recover from significant difficulties (Oshio et al., 2018). This approach also interprets resilience as allostatics – the interaction between a person and the environment to achieve stability in the context of current or past stressors and/or psychological changes.

Scientists Ryff C., Singer B. (Ryff, & Singer, 2003) especially encourage the study of resilience as a process, as it is formed throughout life. A person accumulates positive and negative experiences, a set of coping mechanisms, can develop or overcome a disorder, and can maintain or change character traits.

Researchers who consider resilience as a personality trait believe that it is a personality characteristic that "inoculates" a person against the effects of difficulties, helps to overcome problems and achieve good adjustment and development (Hu, Zhang, & Wang, 2015). This is in line with the theoretical model of resilience as an immune mechanism or a resistance system. The concept of resilience can also be narrowly defined as the personal attributes that make it possible to thrive under adverse conditions.

When resilience is understood as a personality trait, according to Oshio et al. (Oshio et al., 2018), it is an innate ability or resource (advantage), like mental immunity, that makes a person responsible for overcoming difficulties. Resilience in this sense is measured in a similar way to other personality characteristics – using self-report scales, regardless of social and environmental factors. However, there is a debate about this view. Some scientists (Southwick, S. M., Bonanno, G. A., Masten, A. S., Panter-Brick, C., & Yehuda, R., 2014) believe that resistance cannot be considered a trait, because if it is a trait, it may be completely absent in some people. This contradicts the research on the development of resilience. We agree that resilience should be considered along a continuum of its manifestation, taking into account its dynamics, development and maintenance of resilience.

The view of resilience as a stable, unchanging individual trait has limitations, as it does not take into account the possibilities of adaptation that arise through the interaction of people and the environment, including family, community, and society. At the same time, it is recognised that environmental and contextual factors influence the formation and determination of an individual's personal level of resilience.

We agree that resilience is partly a dynamic process, but at the same time it can maintain a certain stability, which is consistent with its understanding as a personality trait.

Researchers Schultze-Lutter F., Schimmelmann B., & Schmidt S. (Schultze-Lutter, Schimmelmann, & Schmidt, 2016) conceptualise resilience not as a trait that manifests itself in any situation, but as being determined by context, population, risks, protective factors, and outcomes. We agree with this position and, in the context of our work, we aim to integrate the understanding of resilience as a trait and a process by studying internal (personality traits) and external factors or mechanisms of resilience (coping).

Seeing resilience from different perspectives enriches the understanding of the construct, but makes it more difficult to measure and research.

Aburn G., Gott M., Hoare K. (Aburn, Gott, & Hoare, 2016), in their search for the most successful generalised definition of resilience, identified several key concepts: 1) growth to overcome difficulties; 2) adaptation and adjustment; 3) "ordinary magic"; 4) good mental health as a mediator for resilience; 5) the ability to "bounce back" and return to normal functioning.

In order to separate resilience from other related concepts, it is important to distinguish between the following concepts: 1) returning to the previous level of functioning (recovery and restoration) as resilience 2) thriving as a transition to a higher level of functioning as a result of a stressful event 3) adaptation to stress – changes to adapt to a new situation If a person does not get sick or his/her functioning does not
deteriorate due to stress, the term 4) resistance (resilience) to illness or stress should be used.

Resilience differs from post-traumatic growth in that a person returns to a previous state after a trauma or excessive stress, while traumatic growth means moving to a level above the previous functioning.

In the context of exposure to significant adversity, resilience is considered to be both a person's ability to manage their trajectory towards psychological, social, cultural and physical resources (which support recovery) and their ability to individually and collectively negotiate for these resources to be obtained in culturally meaningful ways.

In our opinion, resilience should be viewed as a relatively stable trait, determined by internal and external factors, as well as a dynamic process, since resilience is formed, developed and has its own dynamics throughout life. At the same time, we take into account that some personality traits (the foundation) and coping strategies (the mechanisms) contribute to the development of resilience. Resilience can also be a response to a history of traumatic events or adverse stressful events that accumulate from childhood and throughout life. Resilience can either accompany a mental disorder or be a predictor of mental well-being.

Conclusion. Resilience is a complex phenomenon that combines personality traits and coping behaviour. The personality approach considers it as a stable characteristic caused by biological and social factors. The key personal determinants of resilience are locus of control, self-efficacy, optimism, and openness to experience. The coping approach focuses on resilience as a process of overcoming stress through adaptive coping strategies. Effective coping strategies include problem-solving planning, positive reframing, and seeking social support. Both approaches are complementary for a full understanding of resilience. The combination of personality traits and coping behaviour provides the best adaptive capabilities of a person in overcoming stress.

Bibliography:

References:


