

Spiritual health under the wartime: existential aspects

Iryna V. Vasylieva, Serhii L. Shevchenko, Kateryna O. Hololobova, Anna V. Laputko, Serhii V. Kiriienko
BOGOMOLETS NATIONAL MEDICAL UNIVERSITY, KYIV, UKRAINE

ABSTRACT


Aim: To study the spiritual health in existential dimensions, as well as the meaning, value, and emotional components of spiritual health of Ukrainians under the wartime.

Materials and Methods: The theoretical and methodological framework of the paper is represented by the works of scholars in classical existentialism, contemporary philosophers, psychologists, medical psychologists, theologians, sociologists, etc. The complex nature of the issue necessitated the use of interdisciplinary approaches, philosophical, general scientific and special sociological methods of gathering, processing and analyzing information.

Results: The article analyzes the perception of spirituality and spiritual health related to mental and social aspects in the philosophy of classical existentialism and existential-humanistic psychology. The paper justifies the heuristic potential of these approaches for maintaining spiritual health of Ukrainians, which is based on holistic approaches to human beings and their spiritual frames. The article represents the results of sociological research by the Institute of Sociology of the National Academy of Sciences of Ukraine, the Scientific Research Institute of Social and Economic Development of the City, and a survey of the PhD students of the Bogomolets National Medical University (N=103) made by the authors, representing the results of statistical treatment of the spiritual health characteristics: emotional, value and meaning components.

Conclusions: The study has shown that the deterioration of mental health indicators of Ukrainians during the war is not accompanied by corresponding negative trends in their spiritual health. However, further research on this issue is necessary, including studies among respondents from other age groups (faculty, staff of the Bogomolets National Medical University).

KEY WORDS: Human, spirituality, spiritual health, existentialism, mental health

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INTRODUCTION

The full-scale Russian aggression against Ukraine is accompanied not only by numerous human casualties among both military personnel and civilians, enormous material losses, but also by significant changes in the internal subjective world of Ukrainians, as well as their mental and spiritual health. Modern scientists emphasize that “not all wounds of war are visible, but all require healing...,” because “war is always a tragedy. Death, blood, pain, suffering – this is the true face of war. And in addition to physical wounds, visible consequences of injuries from weapons, there are invisible wounds – psychological, which require healing” [1].

A serious challenge here is Ukraine’s ability to ensure the psychological, mental, and spiritual health of its citizens under martial law. There are numerous discussions, studies, and methodologies for medical and psychological assistance in the healthcare sector [2], regarding psychological [3] and mental health [1, 4] on theoretical

and practical levels. At the same time, spirituality and spiritual health are often neglected or considered within the psychological, mental, or social health.

However, the study of spiritual health issues and its relationships with psychological, mental, and physical health has practical and theoretical significance, as the Ukrainian people under the wartime need both spiritual healing and spiritual strengthening.

AIM

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MATERIALS AND METHODS

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RESULTS

Since the onset of full-scale Russian invasion into Ukraine, almost all people of Ukraine have experienced collective trauma [2]. As a result of daily threats of missile and other attacks, they have been thrust into "borderline situations," where the lottery between life and death is determined by a few minutes or seconds. The National Institute for Strategic Studies, as of 2023, provides the following data: "According to experts' estimates, 40-50% of the population of Ukraine will need psychological assistance. After the war, at least every fifth person will experience negative consequences for mental health. WHO predicts that by 2025, every second Ukrainian may face problems in mental health" [4].

However, the authors question: is the deterioration of mental health characteristics among Ukrainians under the war accompanied by corresponding changes in their spiritual health? To answer this question, we will turn to the approaches of representatives of classical existentialism, existential-humanistic psychology, most of whom experienced the tragic events of the First and Second World Wars, and had personal experience of existence in borderline situations.

Søren Kierkegaard is considered a precursor to existential philosophy, as he filled the concept of "existence" with profound meaning. He began to consider the existence of human beings primarily as spiritual existence, and spirituality itself as inseparably linked to the psycho-emotional complex of human beings, as an existence reproduced not only in the philosophical-logical dimension but primarily in the dimension of the psycho-emotional characteristics of the individual.

Kierkegaard regarded fear as the fundamental characteristic of human existence – a means that pulls a person out of the captivity of mindless existence and awakens them to true being. For Kierkegaard, fear is an expression of the perfection of human nature, and its intensification (dread and despair) preserves and enhances this positivity. Fear, reaching the state of despair as a borderline state of the human self, reveals the possibilities of the human to rise to the level of spiritual existence. The measure of such a rise becomes faith, faith in the miracles. Kierkegaard emphasizes the transcendental origin of the miracle, showing, through examples from the Holy Scriptures, how existential

misfortunes, illnesses, etc., were averted due to miraculous events. Through fear, dread, anxiety, and spiritual tension, the average person's aim towards existential search for the authenticity of their own existence is awakened.

The Danish philosopher was one of the first to raise the question of the "authenticity of existence" of a person, which can be interpreted through the contrast between the categories of "spiritual" and "non-spiritual." Kierkegaard's "sickness unto death" is a critical point in measuring the inauthenticity of existence.

Kierkegaard reinterpreted existence as a dialectic interrelation between the "spiritual" and "non-spiritual" aspects of existence in the feelings, evaluations, and conscious awareness of an individual's own purpose, role, and calling as a spiritual being. The main intention of Kierkegaard's philosophical thought was to provide people with a vision of their existential situation and alternatives available to them, while simultaneously urging them to choose, realize themselves, and become truly "existing individuals," without abandoning the spiritual meaning of their existence. Therefore, in Kierkegaard's view, the human spirit is an expression of its existentiality.

In the papers of the German philosopher, psychiatrist, and physician Karl Jaspers, the problem of existence arose "...primarily as a need for the treatment of mentally ill people and the creation of new clinical treatment methods. And the criticism of their ineffectiveness was essentially a critique of various philosophical principles that carried a certain way of understanding human existence in the world" [5]. "Because, as the German thinker proves, a person is not just a creature driven by instincts, not just a chamber of reason, but a creature that, by magnifying itself, seems to exceed its limitations. Its essence is not limited to being a subject for physiological, psychological, or sociological research. It is correlated with the all-encompassing, which transforms it into itself. We call this an idea because a person is spirit; we call it faith because it is existence" [6].

Thus, it is about the spiritual essence of the human being, the transcendent dimensions of human existence that need to be regarded in clinical medicine. Notably, Karl Jaspers specifically addressed the problem of creating a new variant of the philosophy of psychology that would correspond to the realities of up-to-date human existence, and provide the possibility of a credible determination of psychoneurological and psychopathological problems arising in such existence.

Gabriel Marcel, one of the founders of French existentialism, like Søren Kierkegaard, explored the problem of authentic existence as the "mystery" of the individual's existence: it is in this mystery that a person possesses

true (intimate) reality, and it is in this way that the entire world is revealed to the subject; true existence is not the soulless world of possession, where relationships between people are verbalized and fetishized, but the authentic world of existence, where the dualism of the individual and the world is overcome in the very act of existence, in the synthesis of the spiritual and the physical, in close contact not only with God and other people but also with the surrounding existence. Marcelian philosophy postulates the affirmation of faith, love, and hope for salvation in existential thought (and thus can be defined as "positive existentialism"), which opens the doors for a person from the world of verbalized possession into the world of authentic existence, which Gabriel Marcel refers to as "being-against-death," that is, "being-against-non-being," advocating a refusal to submit to the dictates of Non-being.

Thus, at the core of authentic existence in Gabriel Marcel's philosophy lies spiritual communication, the interaction of the relationship of existence with being connected through people, through the "you," primarily through love as the purest, transcendent form of intersubjectivity. The issue of participation in the being of another person is closely related in Marcel's philosophy to the problem of death. It is Gabriel Marcel who, among existential philosophers, singled out the death of the neighbour as the main, true fact of the tragedy of human participation, rather than the intellectual experience of one's own end, or the awareness of one's own mortality, which accompanies a person throughout life.

The philosophy of the German thinker O.F. Bollnow was aimed at critically rethinking the ideological legacy of existentialism, overcoming pessimism and nihilism in human and cultural worldview, and returning a sense of "trust in being" to humanity.

In our research, philosopher's understanding of the uniquely human value experience, which arises not from gnoseology but from the involvement of all the manifestations of its existence with being, is of fundamental importance. This dimension of subjectivity determines the primacy of philosophical anthropology and the axiology constructed on its principles over the values of gnoseology. Secondly, this is the justification of understanding as a universal intellectual activity that extends to the spiritual life of the individual and the external world [7].

The question of spirituality and the relationship between mental and spiritual health occupies a prominent place in existential-humanistic psychology (L. Binswanger, C. Rogers, A. Maslow, R. May, R. Laing, V. Frankl, etc.).

Viktor Frankl, relying on the ideas of the "classic representatives" of existentialism, developed his own

psychological (in many ways philosophical) theory called "logotherapy." By borrowing the method from existential analysis, he attempted to adapt it to the needs and create a new, applied philosophy of psychological sciences [5].

The foundation of Frankl's logotherapy undoubtedly lies in his philosophical-anthropological approaches. According to V. Frankl, "spirituality, freedom, and responsibility are the three existentials of human existence ... the spiritual is not just inherent to humans alongside the physical and the psychological, which are also common to animals. The spiritual is what distinguishes humans, what is inherent to them and them alone ... a person begins to behave as a human when they are able to transcend the level of psycho-physical-organic givenness ... constantly transcending oneself" [8]. "A human is more than just psyche, a human is spirit" [9].

V. Frankl insists that the primary intentional ability of humans is related to their turning toward meaning, the sense of existence, and values that require realization. Unlike animals, humans live by ideals and values. It is precisely this essence of human existence that is expressed by the concept of "self-transcendence".

V. Frankl identified three groups of values: creative values, experiential values (love), and relational values. The greatest achievements in Frankl's logotherapy are associated with the third group, as it concerns finding meaning in the most difficult, seemingly hopeless situations.

Therefore, in his psychotherapeutic practice, V. Frankl distinguished between psychological and spiritual problems, the so-called "noogenic neuroses", which are caused by a loss of sense of life. The goal of his method of logotherapy is to expand the patient's ability to see the full spectrum of potential meanings contained within any specific situation [8].

Notably, A. Längle, in his presentation "Spirituality and Existence", referred to V. Frankl as an advocate of spirituality in psychotherapy. Developing Frankl's ideas, he argued that spirituality influences a person's mental health [10].

Thus, the spiritual health of a person in existentialist philosophy is associated with concepts such as "authentic existence", "true being", and "being-against-death" (G. Marcel), and primarily characterizes the meaningful value-transcendent dimensions of human existence. At the same time, spiritual health is inseparably linked to various layers and levels of the psyche, particularly to the value-based, i.e., spiritual experiences of the individual. Therefore, in studying issues of spiritual health, we differentiate its emotional and meaning-life value components.

Table 1. What feelings do you experience when you are thinking of your future?

Feelings	
	Yes
Hope	65.3%
Faith	75.2%
Compassion	5.0%
Optimism	26.5%
Anxiety	28.4%
Confusion	14.9%
Fear	14.7%
Confidence	10.9%
Fatigue	32.7%
Hopelessness	2.0%
Pessimism	5.9%
Interest	9.9%
Joy	3.0%
Indifference	2.0%
Satisfaction	2.0%
Other	
It's hard to answer/ I don't know	

Comparison of the data from the All-Ukrainian Monitoring of the Institute of Sociology of the NAS of Ukraine in 2021 [11], which reflected the prevailing moods among the Ukrainians, and the data of survey of the Kyivites in 2023, allows us to conclude on the ongoing trend towards the predominance of such positive moods as "hope" (40.5%), "optimism" (28.1%), altogether with the negative ones: "anxiety" (17.9%) and "confusion" (9.2%). Research indicates that the feeling of "hope" is characteristic of the youngest age group, aged 18 to 29 (49.8%) [12].

For comparison, let's present the results of a study conducted among representatives of the same age group – PhD students of the Bogomolets National Medical University, held by members of the NMU sociological group (N = 103).

The second group of questions in the study pertained to the assessment of the value significance for the post-graduate students, such questions (Table 2).

Based on the survey findings, we can suggest a ranking of current issues based on their importance to the respondents. In Group 1 (unconditional value), all respondents gave maximum importance to the issues of «Ukraine's victory terminating the war,» «Safety of family and loved ones,» and «Happiness and well-being in family life.» In Group 2 (maximum value), the majority

of respondents assigned maximum importance to the suggested questions, but other response options were also present, including «Adhering to personal moral principles and norms» and «Kindness, mutual support, and assistance among people.» Group 3 (significant) comprised questions that most respondents rated with 4 out of 5 points, including «Success in professional self-realization,» «Dignified financial security,» and «High level of material prosperity and comfort.» The least important issue from the proposed list for the respondents was «Implementing effective measures to combat corruption and misconduct.»

DISCUSSION

The existential aspects of interpreting spiritual health in borderline states also directly relate to the traditions of studying existentialism in Europe. We agree with the approach of the contemporary researcher K. Raidi, who, based on J. Maritain's scheme, divides classical existentialism into existential and existentialist (M. Heidegger and J.-P. Sartre), which, unlike existentialism (S. Kierkegaard, K. Jaspers, N. Berdyaev), "turned away" in the logic of its reasoning from the world of spirituality, from the world of psychoemotional. Therefore, within existentialism itself, two trends can be distinguished: existential (Kierkegaard, Jaspers, Marcel, Berdyaev, etc.), in which the concept of "existence" is paramount, and "existentialist" (Heidegger, Sartre), in which "existence" becomes a derivative concept of "being," "nothing," "body," etc [13-17]. The intentions of S. Kierkegaard, M. Unamuno, and other representatives of "existential existentialism," unfortunately, are not taken into account in modern studies of defining and understanding spirituality and spiritual health in crisis situations. In particular, today the following questions are a priority: volunteering as a tool for emotional awareness, the influence of social communications on mental health, the importance of sleep in ensuring mental health, the impact of combat stress on mental health, modern warfare, spiritual health, and the role of artificial intelligence, spiritual health as an integral component of human well-being. Even touching on the ontological security of personality during information-sense war, modern researchers do not utilize the heuristic potential of the classical existentialism legacy. In our opinion, the interpretation by representatives of classical existentialism (S. Kierkegaard, M. Unamuno) of spirituality as a peculiar psychoemotional expression of the inherent essence of a person can become a world-view guide for the theoretical and practical solution of the problem of preserving not only mental and mental but also spiritual health in wartime conditions. And such

Table 2. Value and meaning priorities

Nº	Question	1	2	3	4	5
1.	Ukraine's victory which will terminate the war	-	-	-	-	100%
2.	Implementing effective measures to combat corruption and misconduct	2.90%	5.90%	22.50%	34.30%	34.30%
3.	Adherence to personal moral principles and norms	-	-	2.00%	29.40%	68.6%
4.	Safety of family and beloved ones	-	-	-	-	100%
5.	Happiness and well-being in family life	-	-	-	-	100%
6.	Kindness, mutual support, and mutual assistance among people	-	-	-	22.50%	77.50%
7.	Success in professional self-realization	-	-	19.60%	58.80%	21.60%
8.	Appropriate financial security	-	-	5.90%	64.70%	29.4%
9.	High level of financial comfort	-	1.00%	4.90%	69.60%	24.50%

a path mainly lies through the experience of negative, tragic states in human existence (grief, anxiety, horror, suffering, death, absurdity, paradox), which transform into the opposite experience - positive (happiness, well-being, peace of mind, finding meaning, faith, love, victory, peace).

CONCLUSIONS

Thus, the deterioration of mental health indicators among Ukrainians during the war is not accompanied by corresponding negative trends in their spiritual well-being, as evidenced by the survey of Kyivites (September 2023) and PhD students of the Bogomolets National Medical University (February 2024). The respondents who participated in both studies demonstrate prevailing positive feelings. So, the majority of NMU PhD students

(75.2%) expressed feelings of faith when thinking about the future. The concept of faith was included in the list of questions in a broad sense, namely, as the quintessence of morality and emotional sensitivity in humans, as one of the leading indicators of their spiritual well-being.

Among the value and meaning priorities of maximum importance to NMU PhD students were spiritual values (public, family, empathy, communicative, moral ones). Less significant were values of professional self-realization and material values, which are largely influenced, in our opinion, by the peculiarities of wartime. Considering that PhD students represent the age group of 18 to 29 years, which, according to sociological research among Kyivites (September 2023), exhibits more optimistic feelings than other age groups, it is advisable to conduct surveys among other groups of respondents, including students, faculty, staff of NMU, and so on.

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CONFLICT OF INTEREST

The Authors declare no conflict of interest

CORRESPONDING AUTHOR

Kateryna O. Hololobova

Bogomolets National Medical University
13 Shevchenko Boulevard, 01601 Kyiv, Ukraine
e-mail: k.hololobova@nmu.ua

ORCID AND CONTRIBUTIONSHIP

Irina V. Vasylieva: 0000-0003-3772-5358 [A](#) [D](#) [E](#) [F](#)
 Kateryna O. Hololobova: 0000-0003-3343-5978 [B](#) [C](#) [D](#)
 Serhii L. Shevchenko: 0000-0002-9713-3402 [A](#) [D](#) [E](#) [F](#)
 Serhii V. Kiriienko: 0000-0003-4100-6698 [B](#) [C](#)
 Anna V. Laputko: 0000-0002-7501-500X [A](#) [D](#) [E](#) [F](#)

[A](#) – Work concept and design, [B](#) – Data collection and analysis, [C](#) – Responsibility for statistical analysis, [D](#) – Writing the article, [E](#) – Critical review, [F](#) – Final approval of the article

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