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Research Results on the Problem of Health Preservation among Ukrainian Education Sector Employees during Martial Law

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ABSTRACT:
The aim of the article is to present the results of an empirical study on the issue of maintaining the health of Ukrainian education sector employees during martial law in six components – physical, mental, intellectual, social and spiritual health, as well as the level of recreational activity as a resource for recovery. The methods include theoretical approaches (analysis, synthesis, generalization), empirical research (questionnaires, surveys), mathematical data processing using Microsoft Excel and visualization of the results. The study has revealed critical physical exhaustion, chronic stress, emotional burnout, decreased cognitive functions, social isolation and loss of meaning in life. The level of physical and intellectual recreation was low. Respondents named the end of the war, increased wages, reduced bureaucratic burden, stabilization of the education reform and restoration of sanatorium and resort provision among the conditions for health preservation. Armed conflict and martial law have significantly affected the health of educators, especially those working in relocation, remote work without adequate support, or near active combat zones. Systematic psychological support, recovery programs, professional development, and institutional platforms for health preservation are needed. Further research includes the development of digital methodological resources, the implementation of state intersectoral programs, and the integration of psychological support into the professional activities of educators.

Keywords: Health, Health Preservation, Education Workers, Martial Law, Professional Workload, Stress, Professional Burnout, Resilience, Recreational Activities.

1. Introduction

In the current conditions of martial law in Ukraine, caused by large-scale military operations, which have been ongoing since 2022, the problem of preserving the health of education workers is of particular importance. Military operations, constant threat to life,

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loss of homes, severed social ties, evacuation and displacement, economic instability and increased professional workload – all this is accompanied by significant losses, stressful effects and disruption of the usual rhythm of life, which creates extremely unfavorable conditions for preserving the health of educators.

The health of education workers is not only an individual resource, but also the basis for the effective functioning of the education system in conditions of social instability. Educators, who ensure the continuity of the educational process, perform not only pedagogical, but also educational, psychological and social missions and support the intellectual potential of the nation, at the same time find themselves in a zone of increased physical, psychological, social and professional risks, which increases the burden in the conditions of the nationwide crisis that Ukrainian society is experiencing under the influence of military actions (Kryshtanovych et al., 2020). At the same time, war acts as a multifactorial determinant that, through specific cause-and-effect chains, negatively affects the health/health preservation of education workers.

2. Analysis of literature and publications

Ukrainian and foreign scientists consider the concept of "health" from different positions: human health as a constitutional value (Hergeliinyk, 2017); Ukrainian traditional models of health (Tsarenko, 2015); general theory of health and health preservation (Boichuk, 2017); medical and social foundations of health (Marunenko & Tymchyk, 2016); methodological approaches to the phenomenon/concept of "health" in psychology (Karamushka & Dziuba, 2016); (Kredentser, 2020); psychological health of the individual (Kichuk, 2019); psychological approach to defining the concept of "mental health" of subjects of interaction in the educational space (Tereshchenko & Petrovska, 2019); health-preserving technologies in the educational environment (Rybal'ko, 2019); health-preserving technologies in the context of the educational environment (Dodonova et al., 2024); possibilities of natury therapy in an inclusive educational environment (Danylchuk et al., 2025); preservation of professional health of specialists of preschool educational institutions (Dominguez & Halili, 2018; Kuchynska, 2020); use of intellectual recreational resources in the practice of restoring the health of specialists in the educational sphere (Danylchuk, 2023); psychological health of the individual in wartime and post-war times (Bondarchuk & Karamushka, 2023; Iddrisu & Dako-Gyeke, 2013).

It should be noted that most modern works focus on general aspects of health/health preservation, mental health, leaving out of consideration a comprehensive approach to the analysis of health as a multidimensional phenomenon. The authors found that a quantitative assessment of the relative weight of individual stressors, which would allow determining which of them have the most critical impact on various components of health over time, is absent in Ukraine. The analysis carried out by the authors showed the absence of comprehensive studies and multidimensional models of research on the health status/health preservation of employees in the educational sector of Ukraine. Therefore, research into the problem of health preservation of educational workers under martial law is not only relevant, but also a vital step for developing effective strategies for support, recovery, prevention and rehabilitation.

3. Purpose and tasks of the article

The article aims to present the results of an empirical study on the problem of health preservation of Ukrainian education sector employees under martial law according to six main components: physical, mental, intellectual, social and mental health, as well as the level of their involvement in recreational activity as a resource for recovery and the authors' recommendations on possible strategies for solving the stated problem.

The implementation of the goal includes the following tasks: to present: 1) the results of an empirical study on the problem of health preservation Ukrainian education sector employees under martial law; 2) the authors' recommendations on possible strategies for solving the problem of health preservation of Ukrainian education sector employees under martial law.

4. Methods

The implementation of the study involves a set of methods: theoretical – analysis, synthesis, generalization; empirical – questionnaire, survey (author's questionnaire), processing of results, ranking, generalization; methods of mathematical processing of the obtained results (Microsoft Excel); methods of visual presentation of the obtained results.

5. Research procedure

To conduct an empirical study, the authors developed a questionnaire based on key markers: physical health (physical well-being, the presence of chronic diseases and the level of fatigue); mental health (mental stability, symptoms of anxiety and emotional burnout), intellectual health (intellectual mobility, readiness for digital challenges); social health (social integration and support); metaphysical health (a sense of meaning, stability and psychological balance); recreational activities (recovery, physical and intellectual activity in recreational environments) with specific answer options and the possibility of detailed comments on the questions. Due to the martial law introduced in 2022 throughout Ukraine and its extension for the period of the empirical study, the survey was carried out remotely, in digital format via Google Forms. The authors note that the empirical study on the problem of health protection of employees in the educational sector of Ukraine under martial law is a pilot study, therefore, it provided a general diagnostic cross-section, the results of which would become the basis for further research on each of the key markers using clinical screening and validated diagnostic tools.

The empirical study was conducted in April–June 2025 on a sample of two regions from each region of Ukraine: eastern – Kharkiv, Dnipropetrovsk region, western – Ivano-Frankivsk, Lviv region, northern – Kyiv, Zhytomyr region, southern – Odesa, Mykolaiv region, central – Vinnytsia, Poltava region. The empirical study was attended by teachers with higher education and teaching experience of at least three years, in approximate proportion: preschool education institutions – 598 people, general secondary education – 612 people, vocational education/colleges – 603 people, higher education institutions – 608 people; the total sample of those studied was – n = 2421 people; among them – 1316

women; 1105 men. The mandatory conditions were: compliance with ethical standards for conducting the study.

6. Research results

The obtained results of the empirical study allowed to state a number of problematic issues and contradictions, which are presented later in the article.

According to the marker *physical health* (physical well-being, the presence of chronic diseases and the level of fatigue), the results are presented in Table 1.

Table 1. *Research results according to the physical health marker (developed by the authors)*

Questions	Answer options/results in %			
1. How do you assess your general physical condition?	Excellent	Good	Satisfactory	Unsatisfactory
	3%	11%	27%	59%
2. Have you observed any physical disorders related to stress?	Constantly	Sometimes	Seldom	Never
	85%	7%	6%	2%
3. Do you have any diseases that were aggravated as a result of military operations?	Yes		No	
	64%		36%	
4. Do you have any diseases that were acquired as a result of military operations?	Yes		No	
	81%		19%	

1. According to the physical health marker, 59% of respondents assess their physical condition as unsatisfactory, which indicates the presence of serious health problems among the majority of respondents. Only 14% note good or excellent physical condition, which is an extremely low indicator of overall physical well-being. Such an imbalance indicates high vulnerability of physical resources and the presence of systemic factors that negatively affect health (exhaustion, overstrain, lack of medical support, unhealthy nutrition, lack of rest regimen, etc.).

2. An impressive 85% of the study participants consistently experience physical disorders caused by stress, indicating a chronic state of stress. Overall, 98% of respondents experienced such disorders (ranging from "rarely" to "constantly"), which is a sign of the body's systemic somatic response to stressors, particularly those associated with war, and can include headaches, muscle tension, sleep disturbances, cardiovascular symptoms, etc.

3. The majority of respondents – 64% – noted the exacerbation of existing diseases under the influence of military operations. This indicates a high sensitivity of the body to factors of the military environment, which worsens chronic health conditions due to: lack of access to medications, interruption of treatment, excessive psychophysical stress, injuries, changes in living conditions, etc.

4. More than four out of five respondents (81%) reported the emergence of new diseases that appeared precisely after the start of hostilities. This once again confirms the large-scale negative impact of the war on physical health. The respondents' free comments showed that the new diseases are associated with complications from the cardiovascular, nervous, gastrointestinal systems, musculoskeletal system, decreased physical activity due to prolonged distance learning and limited space due to being in shelters during air raids, as well as injuries acquired as a result of hostilities or related factors (evacuation, stress, lack of electricity, cold, nutrition, etc.).

The results for the marker *mental health* (mental stability, symptoms of anxiety and emotional burnout) are presented in Table 2.

Table 2. *Results of the study for the mental health marker (developed by the authors)*

Questions	Answer options/results in %			
5. Do you experience emotional exhaustion or burnout?	Constantly	Often	Sometimes	Never
	84%	8%	7%	1%
6. How often do you feel anxious, afraid, or stressed?	Every day	Several times a week	Seldom	Never
	49%	47%	4%	0%
7. Do you have access to psychological help in your institution or online?	Yes, I use it regularly.	I have it, but I don't use it.	No access or ability to use	
	11%	16%	73%	
8. Which of the following emotions have you experienced most often last month?	Fear	Helplessness	Hope	Other
	22%	71%	2%	5%

5. Emotional exhaustion and professional burnout are almost a mass phenomenon: 92% of respondents experience it constantly or often. This result indicates a critical level of chronic psychological fatigue, which may be accompanied by a decrease in work efficiency, loss of motivation, cynicism, indifference to the results of activity and health. This indicates the depletion of internal psycho-emotional resources and may be due to a high level of stress, lack of proper support, prolonged stay in a crisis environment and overload of responsibility.

6. More than 96% of respondents experience anxiety, fear and tension every day or several times a week. This indicates the systemic presence of an anxiety syndrome that is chronic in nature. The mental system of the respondents is in constant mobilization, which leads to nervous exhaustion, sleep problems, difficulties in making decisions, and emotional instability. The zero share of respondents who never experience these states demonstrates total inclusion in the stressful reality of war.

7. The most alarming thing is that almost three quarters of respondents (73%) do not have access to psychological help or cannot use it for objective or subjective reasons. This indicates the institutional inability of the education system to provide a basic level of

mental protection for its employees. Even among the 27% of those who have access, only 11% actually use the services of a psychologist. The reasons may be distrust, stigmatization of psychological help, lack of time, financial inability, low level of awareness of opportunities. This indicator clearly demonstrates the gap between the need for mental recovery and the possibilities of its implementation, which creates the risk of developing PTSD, psychosomatic disorders, and emotional destabilization.

8. The predominant emotion – helplessness (71%) – signals a deep sense of loss of control over own life, lack of influence on circumstances, uncertainty, defenselessness. This is an extremely risky psychological state that can lead to depression, emotional paralysis, fatigue from empathy, loss of meaning. Fear (22%) also indicates constant internal tension, expectation of danger, and an anxious dominant.

Hope was noted as the dominant emotion by only 2% of respondents, which demonstrates a deep psychological crisis and a lack of life prospects. Uncertainty, lack of a safe environment, and difficulties in adapting to constant changes have a significant impact and, as a result, symptoms of depressive states.

The results for the marker *intellectual health* (intellectual mobility, readiness for digital challenges) are presented in Table 3.

Table 3. *Results of the study for the intellectual health marker (developed by the authors)*

Questions	Answer options/results in %			
9. Do you have enough internal resources for professional development in the current conditions?	Yes	Partially	No	Other
	4%	21%	73%	2%
10. How do you assess your level of concentration and memory during martial law?	Good	Average	Poor	Other
	6%	32%	59%	3%
11. Do you have the opportunity and desire to take online courses / trainings / seminars?	Yes, I am constantly learning	I have the desire, but I am not able to	No	Other
	86%	11%	2%	1%
12. What is the biggest obstacle to your intellectual activity now?	Fatigue	Lack of time	Lack of access	Other
	47%	46%	2%	3%

9. Most respondents (73%) believe that they do not have enough internal resources for professional development; 21% have them only partially, which indicates the suppression of mental resources. Only 4% of respondents demonstrate confidence in their professional energy and readiness for growth. Such indicators are due to the emotional and physical exhaustion of education workers, uncertainty of the future, loss of motivation, cognitive overload, as well as the lack of an environment that stimulates development.

10. The rate of decline in cognitive functions is very high: 59% of respondents note a reduced ability to concentrate and remember, another 32% – mediocre; only 6% assess their cognitive level as good. This indicates serious problems with attention and working memory, which may be the result of: chronic stress; emotional burnout; information overload; fatigue and sleep disorders; cognitive fatigue and insufficient cognitive stimulation in conditions of limited opportunities.

11. Despite the general state of exhaustion, 86% of respondents are constantly studying online, which indicates a high level of motivation for intellectual activity and a desire for self-development, even despite the adverse circumstances of martial law. This may indicate that educational platforms have become an important compensator for the lack of offline learning and a way to maintain mental tone. However, 11% have a desire, but are unable to study, which signals the need to eliminate barriers – technical, time or psychological.

12. For respondents, fatigue (47%) and lack of time (46%) are almost equally the main barriers. This indicates that intellectual activity does not suffer due to external limitations (lack of Internet or courses), but due to internal resource shortages – energy, emotional, time. These data resonate with previous indicators of burnout and decreased cognitive performance, forming a holistic picture of intellectual exhaustion against the background of the general psycho-emotional state.

The results of the marker *social health* (social integration and support) are presented in Table 4.

Table 4. *Results of the study for the social health marker (authors' development)*

Questions	Answer options/results in %			
13. Do you feel supported by your colleagues or administration?	Yes	Partially	No	Other
	24%	63%	8%	5%
14. How well does the teaching staff work under the current conditions?	Very well-coordinated	Mostly well-coordinated	There are difficulties	There are conflicts
	17%	39%	31%	23%
15. How often do you communicate with friends/relatives?	Every day	Several times a month	Rarely	Practically no communication
	20%	21%	46%	6%
16. What had the greatest impact on your social life during the war?	Moving/Losing Home	Losing Connection with Colleagues	Online Work Mode	Other
	19%	15%	37%	29%

13. The vast majority of respondents – 63% indicated partial support from colleagues or administration. This indicates the presence of some professional solidarity, but it is not stable or comprehensive. Only a quarter of respondents – 24% feel full

support, which indicates a deficit of social capital in the professional environment. The indicator "No" – (8%) is alarming, as it demonstrates the presence of individual isolated specialists who do not have proper social inclusion. The category "Other" (5%) may cover ambiguous or mixed forms of interaction (for example, support only from colleagues, but not from administration, or vice versa).

14. Only 17% of respondents assessed the work of the team as very well-coordinated, while 39% believe that the interaction is mostly well-coordinated. Thus, more than half of respondents – 56% generally demonstrate a positive perception of teamwork. At the same time, 31% note difficulties, and 23% indicate the presence of conflicts, which is an indicator of destructive processes in the social environment. This may be a consequence of increased emotional stress, resource depletion, or insufficient organizational support in war conditions.

15. The largest proportion of respondents – 46% – noted that they rarely communicate with loved ones, which indicates a decrease in the level of social interaction. Only 20% maintain daily contact, which is an important factor in psychological stability. The combination of the indicators "Rarely" and "I practically do not communicate" – together 52% is a sign of social isolation, which can have serious consequences for mental health, in particular the risks of loneliness, anxiety, depression.

16. The most influential factor was the transition to online mode – 37%, which indicates structural changes in the format of social interaction, which deprived some teachers of live communication, reduced the number of informal contacts, and caused a loss of emotional support. Moving and losing home – 19% and losing contact with colleagues – 15% are also significant social traumas that affected the change in the circle of communication. The large percentage of the option "Other" – 29% indicates a variety of additional destructive factors that respondents perceive as significant (the war itself, losses in the family, relationship breakdowns, lack of time, etc.).

The results of the marker *projective health* (a sense of meaning, stability and psychological balance) are presented in Table 5.

Table 5. *Results of the study according to the marker of projective health (developed by the authors)*

Questions	Answer options/results in %			
17. Do you feel the meaning of your professional activity now?	Yes	Partially	No	Other
	16%	35%	42%	7%
18. What helps you maintain inner stability?	Family	Faith/spiritual practices	Profession	Charity /volunteering
	54%	33%	11%	2%
19. Has your attitude towards life and values changed due to the war?	Yes, significantly	Partially	No	Other
	81%	14%	3%	2%
20. Do you need support in understanding the	Yes	No	It's hard to answer	Other

events and stabilizing your condition?	42%	2%	47%	0%

17. Mental exhaustion is manifested in the fact that only 16% of respondents clearly feel the meaning of their professional activities, which is an alarming indicator of existential exhaustion. The overwhelming majority of respondents – 42% have lost their sense of meaning, and another 35% – feel it only partially. This indicates a deep mental destabilization, which can reduce motivation to work, provoke a state of internal emptiness and threaten professional burnout. The option "Other" – 7% may reflect mixed or ambivalent emotions about the profession, loss of internal stability, the need to rethink one's life path.

18. Family 54% – the main source of internal support and psychological stability, which indicates the high importance of interpersonal relationships in the process of maintaining mental health. Faith and spiritual practices – 33% also play a significant role in overcoming traumatic experiences, demonstrating the role of a spiritual resource in times of uncertainty. Only 11% consider professional activity as a source of resilience, which echoes the results of the previous question. Charity/volunteering – 2% play a supporting role – perhaps due to lack of time or resources.

19. The absolute majority of respondents – 81% report a significant transformation of value and worldview orientations under the influence of the war. This may include a revision of priorities, an increase in the importance of family, life, security, freedom, spiritual practices, etc. This indicator is evidence of large-scale internal changes at the level of mental health. Partial changes are noted by another 14%, that is, together 95% of respondents have undergone a deep revaluation of values. Only 3% did not notice any changes – perhaps due to psychological defense mechanisms or detachment.

20. 42% of respondents directly indicate the need for psychological or existential support, which is a weighty argument in favor of introducing a system of assistance in stabilizing the mental state of educators. 47% cannot decide, which may indicate internal confusion, ambivalence, lack of knowledge about such forms of assistance or fear of recognizing the need for it. In general, this is a target group for preventive work. Only 2% do not have such a need, which is an extremely low figure. This indicates deep emotional tension, the need to comprehend, process experience and trauma.

The results of the marker *recreational activity* (recovery, physical and intellectual activity in recreational environments) are presented in Table 6.

Table 6. *Results of the study according to the recreational activity marker (authors' development)*

Questions	Answer options/results in %			
21. Do you feel the need to restore your strength?	Yes	Partially	No	Other
	75%	16%	1%	8%
22. Is physical activity in recreational environments present in your life?	Every day	Several times a week	Several times a month	No
	4%	5%	8%	83%

23. Is intellectual activity in recreational environments present in your life?	Every day	Several times a week	Several times a month	No
	6%	11%	12%	71%
24. Did you rest in sanatoriums/tourist trips during the war vacation period?	Yes	No	I don't have the opportunity	Other
	21%	34%	57%	2%

21. The vast majority of respondents – 75% – feel an acute need to restore strength, another 16% – partially. Thus, 91% of respondents declare physical and psycho-emotional exhaustion, which requires the activation of health-preserving and recreation mechanisms. Only 1% do not need recovery, which may be due to individual characteristics or a short-term effect of the resource. The indicator "Other" is important – 8%, which included options such as "no time", "I don't know how to recover" or "habit of overload", "there is no point in recovering, because the war does not end", which is a sign of an unformed recreational culture.

22. The indicators indicate an extremely low level of physical activity in the conditions of the recreational space. Only 17% of respondents practice physical activity in one form or another, while 83% are completely deprived of this resource, which indicates the ignoring or lack of conditions for the implementation of even elementary motor activity, which is the basis of physical and emotional regulation. This situation is due to the lack of time, infrastructure, financial opportunities or motivation, which requires systemic changes in the organization of recreational activities of educational workers.

23. A similar picture is observed with regard to intellectual recreation: 71% of respondents are not involved in this type of activity at all (for example, reading for pleasure, cultural events, educational games, lectures, etc.). Only 29% declare some form of intellectual recovery, while regular participation (daily or weekly) is characteristic of only 17%. This indicates both general psycho-emotional exhaustion and de-intellectualization of leisure, as a result of which educational workers are unable or unwilling to integrate cognitive activity into life, which requires a comprehensive approach and targeted programs to form a culture of meaningful intellectual recreation.

24. The largest share of respondents – 57% - are unable to organize a full-fledged vacation (sanatoriums, tourism). This indicates socio-economic restrictions, restrictions on traveling abroad and moving around the country (for men), a security threat, and a decrease in the level of well-being. Only 21% were able to afford a vacation – less than a quarter of educators who restored resources during the vacation period. 34% answered "No", that is, they theoretically had the opportunity, but did not take advantage of it (due to psychological barriers, anxiety, obligations, etc.), which is evidence of psychological fatigue and a feeling of internal limitation of freedom of action.

25. The ranking of respondents' answers to the final open-ended question "What, in your opinion, would most contribute to preserving the health of Ukrainian educational workers under martial law? (several options can be named)" is presented in Diagram 1.

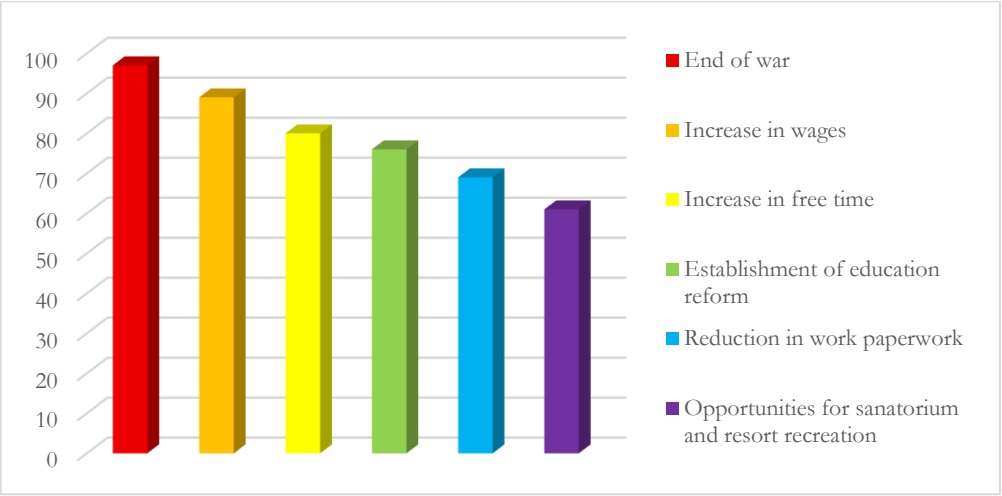

Diagram 1. *Ranking of respondents' answers to the final open-ended question (authors' development)*

The largest share of respondents – practically the absolute majority (97%) – indicated that the number one factor for preserving the health of educators is the end of the war. This indicates that war is viewed not only as a physical threat, but as a fundamental socio-psychological stress factor that affects all aspects of educators' lives: constant emotional tension due to the threat to their own lives, those of their relatives and friends, as well as those seeking education, for whom educators are responsible within educational institutions; forced migration and loss of social environment; instability of financial and professional situation; disruption of life rhythms and a sense of the future. This indicator indicates that without a systemic solution to the macro-level problem of war, any other measures will be only partial compensatory mechanisms.

Raising wages, as a financial factor, was the second most important, noted by 89% of respondents. This indicates a high sensitivity of education workers to socio-economic conditions, especially in the context of: depreciation of the national currency; inflationary pressure; additional costs associated with the war (movements, treatment, family support, etc.). Financial stability is perceived as a guarantee of security, access to quality food, medical services, recreation – that is, key determinants of health.

The indicator of increasing free time for rest and recovery is also very high – 80% (third in the ranking) and indicates excessive workload and chronic exhaustion of education workers. Respondents indicate a lack of: time for sleep, recovery of physical and mental strength; opportunities for quality leisure; time for self-realization, family, maintaining mental balance, which is confirmed by previous answers to the questionnaire questions, as well as overload after working hours due to the need to communicate with students and their parents via social messengers (educators indicate that such activity begins after 7:00 p.m., when parents come home from work and start correspondence in groups). This request correlates with the needs for recreational, preventive and wellness programs, which are relevant in the system of supporting labor resources in crisis conditions.

The fourth indicator is the consolidation of the education reform – 76%; the high percentage reflects the deep fatigue of education workers from constant reforms, changes in regulatory documents, uncertainty and instability in the professional environment. This creates: chronic professional stress; low level of professional security; emotional burnout due to a feeling of lack of work effectiveness. The consolidation of the reform is perceived as the restoration of structural order and predictability – the basic conditions for psychological comfort and stability of the professional activity of educators.

Reduction of paper-digital document flow – 69% is the fifth indicator in the ranking, which emphasizes the overload of educators with unproductive bureaucratic activities, in particular: reporting in several digital platforms; keeping journals, questionnaires, forms without practical feasibility; duplication of functions and requirements. This contributes to the inefficient distribution of working time, causes stress, fatigue, and lost motivation, especially in conditions of online modes and blended learning. Respondents seek to optimize the administrative workload to focus on the main pedagogical activity.

More than half – 61% (sixth position in the ranking) of respondents emphasize the need for institutionalized health support through the restoration of sanatorium and resort recreation opportunities at the expense of trade unions: sanatorium treatment; rehabilitation programs (physiotherapy, massage, relaxation practices); disease prevention. This indicates a demand for real action by trade unions as defenders of the interests of educators, as well as an understanding of the significance of preventive medicine and recreational resources in conditions of chronic stress.

Thus, the study of the problem of health preservation of education workers, conducted in real conditions of martial law, has important scientific, social and applied significance. It allows not only to clarify the key problems faced by educators, but also to formulate substantiated recommendations on health preservation policy, institutional support and implementation of psychosocial support programs and prevention of professional burnout of education workers in conditions of prolonged destabilization.

7. Discussion

In general, the respondents' answers demonstrate the multidimensional nature of the problem of health preservation of education workers in Ukraine in conditions of martial law, which combines: macro-level problems (war, reform of the education system, economic instability); organizational difficulties (document flow, workload); individual needs (time for rest, recovery, leisure, treatment).

The results obtained indicate the critical state of health of a significant part of education workers. They play the role of a stabilizer in society, supporting children and youth during periods of instability, but are often left without systemic support themselves. At the same time, military actions not only exacerbate existing health problems, but also provoke the emergence of new diseases. Health losses suffered by educators can lead to professional maladjustment and mass burnout. The results emphasize the need for a comprehensive approach to the health of education workers, which should include: state stabilization and recovery policy; social dialogue (trade unions, communities);

development of the infrastructure of psychophysical recovery; meaningful humanization of the working environment.

At the same time, there is a potential for preserving the health resource of educators, which allows the authors to formulate recommendations on strategies for solving the problem through:

– psychoeducation and training in self-help methods, self-regulation, psycho-hygiene, crisis response, cognitive self-preservation and restoration of physical condition in conditions of limited resources; how to work with overload, how to restore mental strength, which is combined with body-oriented practices (breathing techniques, relaxation, art therapy);

– organization and conduct of information campaigns that will not only promote a healthy lifestyle/health preservation, but also popularize seeking help as the norm;

– development of institutional programs to support recreational activities of educators; restoring health and strengthening personal resources, in particular through recreational resources – parks, botanical gardens, recreation areas, landscape and natural recreation areas and the practice of recreational activity – walks, travels, tourist routes, etc.;

– activating the culture of intellectual recreation – cultural and educational projects, art spaces, theaters, museums, exhibitions, concerts, film screenings, food courts, fairs, etc., in particular with the support of the Ministry of Culture, at the expense of art funds, artists, etc.;

– creating accessible and safe spaces for physical activity (for example, relaxation locations, fitness areas, jogging tracks, bicycle routes and routes for Nordic walking, etc.), in particular within the framework of local budgets or state programs, etc.;

– selecting and creating safe digital recreational resources: films; performances; music; complexes for exercising, yoga; travel channels for getting to know the countries of the world; channels of nature therapy - landscape, plant, zootherapy, natural sound therapy, etc.

– training of employees in the educational sphere on the possibilities of integrating intellectual and physical recreational activity (for example: a walk/run in the park can be combined with listening to music, thanks to digital devices; relaxation in physical recreation areas with open air, etc.) and promotion of accessible, practically for everyone and inexpensive European forms of recreational activity (for example, Nordic walking), through webinars, trainings, invitations of leading specialists in the field of health care, outstanding athletes, coaches, volunteers, etc.

8. Conclusions

The military actions that have been taking place on the territory of Ukraine for the fourth year and the martial law that continues in connection with them have significantly affected all aspects of the health of education workers. The most vulnerable are workers who work in conditions of relocation, distance learning without proper support, as well as those who work in regions close to active military operations. The need for systemic psychological assistance, restorative practices, training, and the formation of professional platforms to preserve, support, and restore the health of education workers is urgent.

The health preservation policy in education should take into account not only physical aspects, but also cognitive, emotional, social, and spiritual factors and have a real factor of institutional and material support from the state, regional authorities, international organizations, etc. However, during the period of hostilities, the implementation of such a policy requires significant financial costs, in which Ukraine is limited in time.

9. Prospects for further research

The authors see it possible in the future to conduct separate studies on key markers regarding the stated problem, which will allow to investigate other factors and aspects and dynamics of changes using clinical screening and validated diagnostic tools, which will allow to obtain effective evidence for scaling up measures to increase resilience, access to recreational opportunities and health services for educators in conflict-affected regions throughout the country. The development and testing of digital methodological materials for preserving, supporting, and restoring the health of education workers in conditions of recreational activity are also promising. It is advisable to develop state intersectoral programs to support the health of education workers; integrate psychological support into professional activities. The scientific novelty of the results obtained lies in the fact that they may be of practical interest to scientists, experts in the field of health care and educational management, practical psychologists, as well as specialists in other fields.

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