

*I.R. KHUSAINOVA¹, A.O. NADIRBEKOVA¹, N.P. BAIBATYR¹*¹JSC "Kazakh Institute of Oncology and Radiology," Almaty, the Republic of Kazakhstan

The peculiarities of emotional and mental resources of the Republic of Kazakhstan cancer service medical workers

Relevance: *Medical workers render assistance in conditions of constant increased emotional stress. They experience various psychological problems, a decrease in emotional and mental resources. A marked decrease in medical workers' emotional resources makes it difficult to establish psychological contact with the patient, complicates patient interaction and providing the necessary emotional support, and adversely affects the preservation of medical workers' emotional stability, psychological reliability, and professional image.*

The study aimed to reveal the peculiarities of emotional and mental resources of cancer clinic medical workers.

Results: *The study showed that a successful professional activity of a medical worker requires such psychic features as a high level of communicative competence in dealing with patients and their relatives; a medical worker's independence and autonomy, self-confidence, and stability in various situations, combined with flexible behavior in changing non-standard professional situations; a high degree of resistance to stress, emotional and informational overload; the presence of developed adaptation and compensation mechanisms.*

Conclusion: *The formedness of a medical worker's mental self-regulation methods and techniques, mastering psychological and emotional adaptation and compensation mechanisms contribute to the development and formation of high emotional stability, the ability to withstand stress, and increase job satisfaction.*

Keywords: *medical workers, oncology, psycho-emotional resources, psychological adaptation mechanisms, compensation mechanisms, psychological reliability, professional image.*

Introduction: Traditionally, in the public consciousness and scientific literature, the studies of the professional activity of socioeconomic specialists (doctors, teachers, social workers, etc.) focus on positive aspects of dealing with people. Simultaneously, due to the requirements placed on such workers, their specific responsibility, and emotional stress, working with patients is potentially related to severe experiences and occupational stress [1].

The profession of an oncologist is one of the most difficult medical specialties. It is worth noting that every oncologist makes an irreplaceable contribution to science, sharing his clinical knowledge, practical experience, and discoveries.

An oncologist should also possess communicative and psychological skills. Such skills are essential in the work of an oncologist, especially when dealing with dying patients. The doctor's ability to set the patient up for recovery largely determines the therapeutic progress and the possibility of healing.

One of the difficult tasks for an oncologist is daily communication with patients, their fears and doubts, their environment – the loved ones who are sometimes

on the verge of despair. All this emotional intensity is locked up in the oncologist. Therefore, not only mood but the fates of people depend on the doctor's state of mind, his deontological skill. That is why, in addition to standard and protocol communication with an oncologist on prescriptions, procedures for upcoming treatment, every oncological patient undergoing treatment in an oncological institution needs personal attention and the emotional component of his relationship with the doctor.

Medical workers' activity requires constant psychological readiness and emotional involvement in the patients' problems, high emotional stability, psychological reliability, the ability to withstand stress, as well as the possession of the formed mechanisms of psychological and emotional adaptation and compensation, particularly constructive coping strategies [2].

The psychological and emotional coping resources that are significant for the formation of a medical worker's professional activity include empathy, affiliation, and sensitivity to rejection. Adequate interaction of these personal traits enables an efficient solving of arising problematic and stressful situations [3].

Empathy – the ability to sympathy, empathy, compassion, a kind of psychological “involvement” in the world of patient experiences – provides adequate communication in the system of relationship “medical worker – the patient.” Emotional participation helps to establish psychological contact with the patient, obtain more complete and accurate information about him, his state, instill confidence in the doctor’s competence, and the adequacy of the produced therapeutic impact, inspiring faith in recovery. However, a medical worker with a very high level of empathy can react too subtly to the interlocutor’s mood, show increased psychological vulnerability, feel guilty about the need to hurt other people and anxiety, etc. Such features prevent the demonstration of professional role behavior due to insufficient manifestation of such features as decisiveness, perseverance, purposefulness, orientation towards the future. Excessive empathic involvement in the patient’s experiences might also lead to emotional overload, emotional and physical exhaustion of the medical worker.

Another important psychological feature of a medical worker is the desire to belong to a social group, establish emotional relationships with others, and be included in the system of interpersonal relationships, that is, “affiliation.” A medical worker’s professional activity is distinguished by the duration and intensity of various social contacts, and affiliation helps maintain a sincere attitude towards patients, a desire to provide support and cooperate with them. It also helps prevent occupational deformation.

The next important psychological feature of a medical worker is emotional stability, a balance in the absence of impulsivity and excessive emotional expressiveness, maintaining control over emotional reactions and behavior. Emotional stability helps a medical worker avoid psychological breakdowns and conflicts with patients. In turn, frequent intense emotional reactions might destroy the patient’s confidence, frighten and alert him, as well as asthenize and tire. A medical worker’s mental balance, calm benevolence, and emotional stability make the patient feel secure and contribute to trusting relationships.

An equally important psychological feature of a medical worker is sensitivity to rejection. The ability to perceive a negative attitude of other people, particularly patients, which may occur at certain stages of treatment, provides feedback to the medical worker, allowing him to adjust his behavior in dealing with patients.

At the same time, the sensitivity to rejection should not be too high. Otherwise, it contributes to the medical worker’s lower self-esteem, blocking his affiliative demand and generally reducing adaptive and compensatory possibilities. High sensitivity to negative attitudes on the part of the patient makes the healthcare provider doubt his professional competence. Such doubts, in turn, can affect the quality of work.

Medical professionals who constantly face the suffering of people are forced to build a kind of barrier to protect them psychologically from patients and make them less empathic; otherwise, they can run into psychological problems like emotional burnout and a decrease in the level of empathy. This also refers to the psychological difficulties of receiving unconditional communication described by K. Rogers and E. Fromm [4].

Confidence in behavior and empathy ability is the most significant personality trait in a medical worker’s image. A confident style of behavior, demonstrated in the most hopeless, shocking situations, helps the patient form a “therapeutic illusion” of the medical worker’s absolute competence. In particular, the ability to control current events with constructing a realistic forecast contributes to the emergence of faith and hope for a successful outcome of events. In contrast, a marked reduction of a medical employee’s emotional and mental resources makes it difficult to establish psychological contact with the patient, interact with him, and not provide the necessary emotional support [5].

The study aimed to reveal the peculiarities of emotional and mental resources of cancer clinic medical workers using the specially developed Scale of emotional, mental states, and personality traits and analyze the effectiveness of interactive psychological training with the Scale questionnaires before and after the training.

Materials and Methods: The study involved 160 healthcare givers from several clinical departments of the Kazakh Institute of Oncology and Radiology (Almaty, Kazakhstan). A theoretical analysis of domestic and foreign literature sources on the purpose of the study was conducted; a Scale of emotional, mental states, and personality traits was developed; an interactive psychologically training adapted for medical workers of various clinical departments was selected (Figure 1) [6].

Results and Discussion:

1. *Study of feelings of medical workers before and after the interactive psychological training using the Scale of emotional, mental states, and personality traits*

The study of feelings of medical workers showed that before the interactive psychological training, 34.6% experienced feelings of comfort (vs. 65.3% after the training), relaxation – 38.6% vs. 87.3%, the sense of balance – 62.6% vs. 63.3%, and lightness – 9.3% vs. 66.6%.

After participating in the training, some of the negative feelings of medical workers disappeared. Thus, a feeling of heaviness was initially observed in 41.3%;

dizziness was reported by 27.3%; a feeling of coldness was observed in 21.3%.

The power of sensations has significantly changed after the training. Notably, only 10.0% of the participants could feel weak sensations before the training vs. 45.3% after the training, moderate sensations were reported by 33.3% vs. 40.0% of the participants, and strong sensations – by 56.6% vs. 21.3% (Figures 2, 3).

Department: _____		
Psychological training topic: _____		
FULL NAME of the participant: _____		
WHAT ARE YOU EXPERIENCING?		
POWER OF MANIFESTATION (sensations, emotions, feelings, states)		
<i>BEFORE THE TRAINING</i>		
<i>WHAT FEELINGS, EMOTIONS, AND PERSONAL TRAITS DO YOU EXPERIENCE?</i>		
Underline which is closer to you	Sensations: heaviness, cold, dizziness, pain, nausea, lightness, warmth, balance, relaxation, comfort Additionally:	The power of sensations: Weak Moderate Strong
	Emotions: sadness and anxiety and, anxiety and, indifference, fear, joy, sense of peace, bliss, interest, inspiration. Additionally:	The power of emotions: Weak Moderate Strong
	Personal traits: hatred, dislikes, anger, self-accusations, criticism towards others, love, sympathy, calmness, self-confidence, indulgence towards others. Additionally:	The power of the feelings: Weak Moderate Strong
	State: uncertainty, excitement, worthlessness, irritation, fatigue confidence, happiness, pertinence, calmness, cheerfulness Additionally:	The power of the state: Weak Moderate Strong
<i>AFTER THE TRAINING</i>		
<i>WHAT FEELINGS, EMOTIONS, AND PERSONAL TRAITS DO YOU EXPERIENCE?</i>		
Underline which is closer to you	Sensations: heaviness, cold, dizziness, pain, nausea lightness, warmth, balance, relaxation, comfort Additionally:	The power of sensations: Weak Moderate Strong
	Emotions: sadness and anxiety and, anxiety and, indifference, fear. Joy, sense of peace, bliss, interest, inspiration. Additionally:	The power of emotions: Weak Moderate Strong
	Personal traits: hatred, dislikes, anger, self-accusations, criticism towards others, love, sympathy, calmness, self-confidence, indulgence towards others. Additionally:	The power of the feelings: Weak Moderate Strong
	State: uncertainty, excitement, worthlessness, irritation, fatigue confidence, happiness, pertinence, calmness, cheerfulness Additionally:	The power of the state: Weak Moderate Strong

Figure 1 – Scale of emotional, mental states, and personality traits

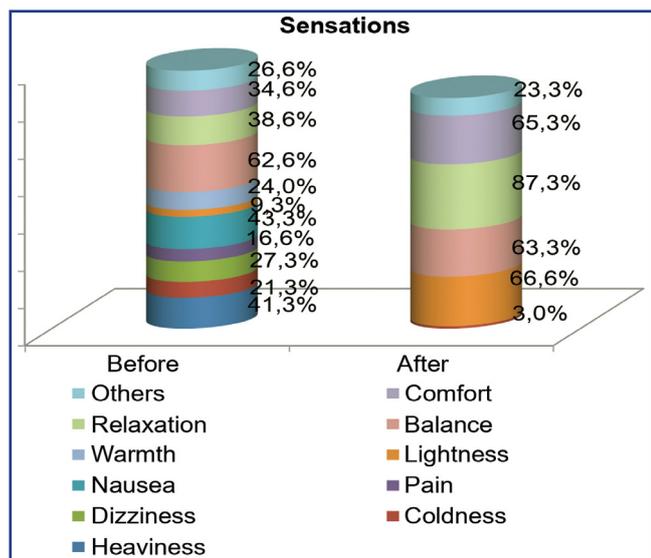


Figure 2 – Analysis of sensations of medical workers before and after the interactive psychological training

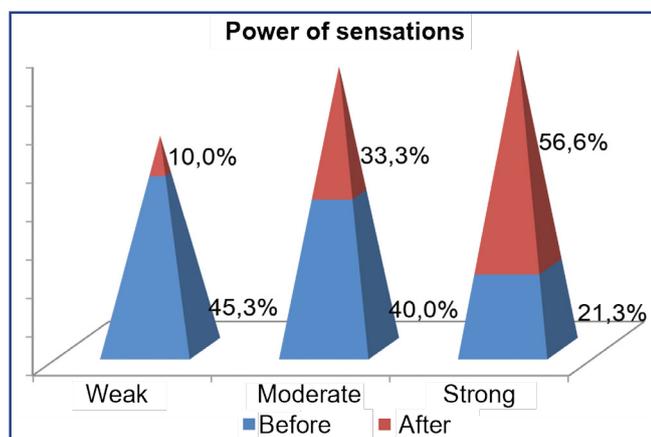


Figure 3 – Trends in the power of sensations of medical workers before and after the interactive psychological training

2. Study of the emotions of medical workers before and after the interactive psychological training using the Scale of emotional, mental states, and personality traits

The study showed that 9.3 % of the participants experienced inspiration before the interactive psychological training vs. 45.3% after the training; the emotions of euphoria were registered in 27.3% vs. 36% of the participants, the emotion of joy – in 9.3%, with significant growth to 56% after the training, the emotions responsible for interest – in only 2.6% vs. 12% after the training; the emotions of appeasement were present in 22.6% of participants before the training vs. 48% after the training, the emotions of fear – in 33.3% vs. only 15.3% after the training.

The emotions of unrest were present in 37.3% before vs. 13.3% after the training, the emotions of anxiety – in 34.6% vs. 29.3%, the emotions of sadness – in 21.3% vs. 16.6% after the training.

The emotions responsible for indifference originally occurred in 30.0% of the participants and reduced to 6.6 % after the training (Figure 4).

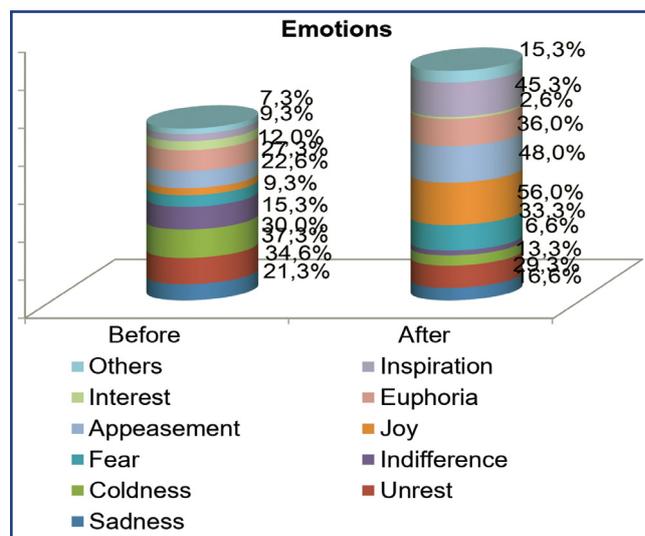


Figure 4 – Analysis of emotions of medical workers before and after the interactive psychological training

The interactive psychological training proved to be efficient for medical workers because it significantly changed the power of experienced emotions. That is, only 6.6% of the participants noticed weak emotions before the training, with significant growth of up to 48% after the training, moderate emotions were reported by 33.3% vs. 37.3% of the participants, and strong emotions have significantly reduced from 60.0% to 21.3% (Figure 5).

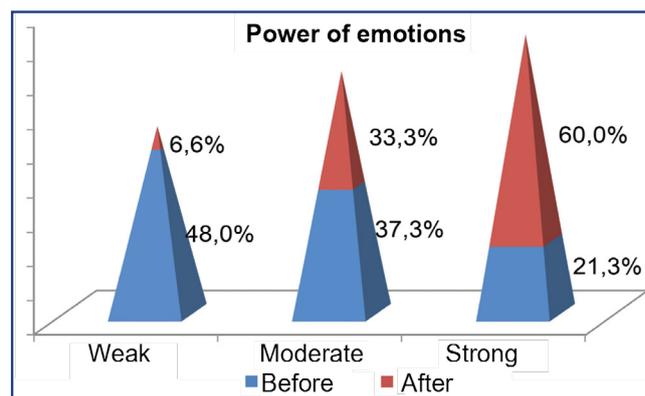


Figure 5 – Trends in the power of emotions of medical workers before and after the interactive psychological training

3. Study of personality traits of medical workers before and after the interactive psychological training

Such personality trait as indulgence towards others was reported by 24.6% of medical workers before the training vs. 26.6% after the training, self-trust – by 16.0% vs. 58.6% after the training, tranquility – 42.6%

vs. 56%, sympathy towards others – 18.6% vs. 42.6%, love as a personal feature – 30% vs. 36%.

The manifestations of self-criticism have significantly reduced – from 16% to 8.6% after the training.

The medical workers did not note such traits as a desire to criticize the others (21.3% before the training), feelings of hatred (28.3%), antipathy (16%), anger (13.3%) after they participated in the interactive training (Figures 6, 7).

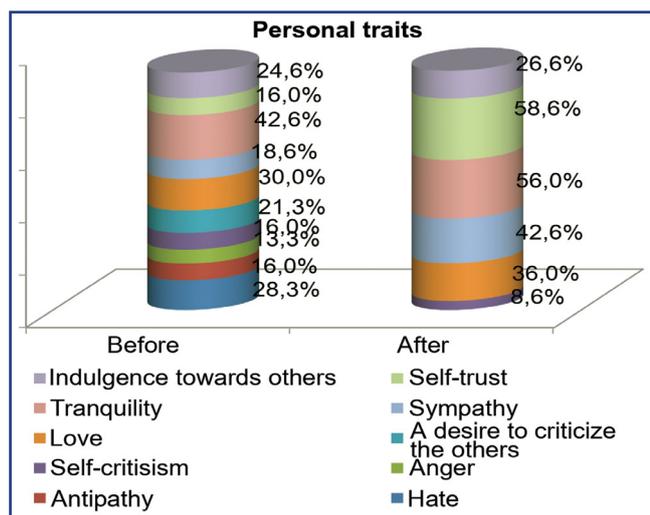


Figure 6 – Analysis of personality traits of medical workers before and after the interactive psychological training

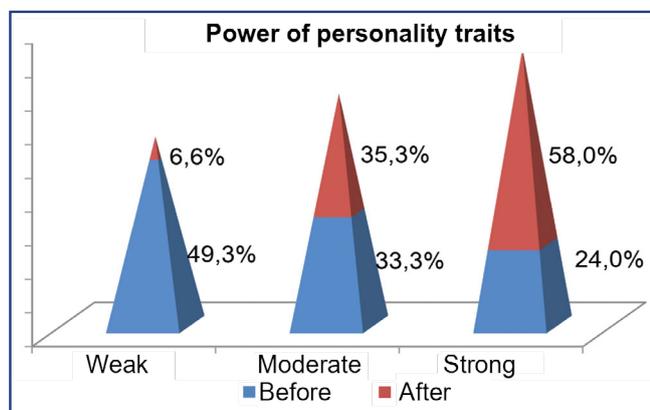


Figure 7 – Trends in the power of personality traits of medical workers before and after the interactive psychological training

4. Study of mental states of medical workers before and after the interactive psychological training

The study of medical workers' mental states showed that 26.6% of the participants experienced cheerfulness before the interactive psychological training vs. 45.3% after the training. Such states as feeling needed (9.3% vs. 62.6%), the state of happiness (8.6% vs. 54.6%), feeling confident (8% to 22.6%), the state of calmness (38% vs. 53.3%) were much more frequent after the training.

On the contrary, the state of arousal (29.3% vs. 16%), the state of tiredness (17.3% to 8%), and uncertainty (53.3% to 16.6%) have decreased.

Such mental states as feeling worthless, irritation were noted in 13.3% and 6.6% of participants before the training, respectively, and not observed after the training (Figure 8).

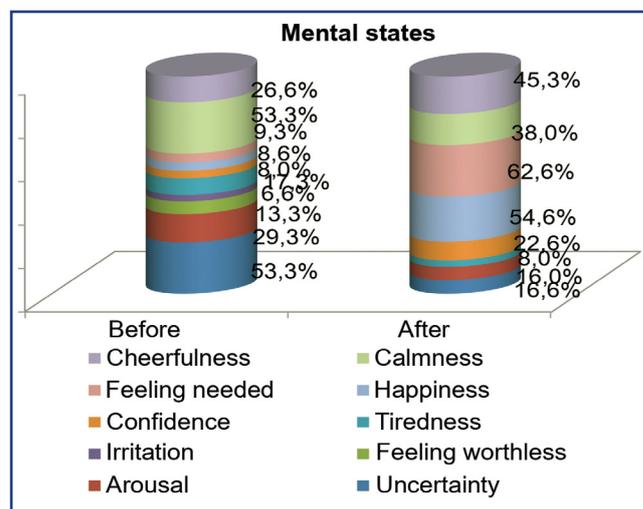


Figure 8 – Analysis of mental states of medical workers before and after the interactive psychological training

The power of manifestation of mental states has also changed. Thus, a weak manifestation has changed from 16% to 41.3%, moderate – 48% to 55.3%, and pronounced manifestation – 50.6% to 23.3% (Figure 9).

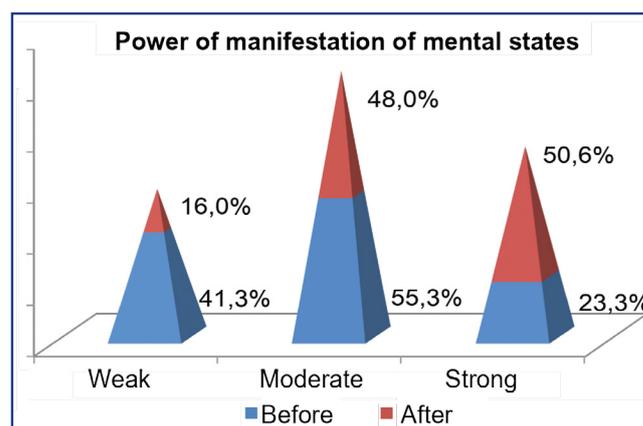


Figure 9 – Trends of the power of manifestation of mental states in medical workers before and after the interactive psychological training

The results obtained in the experimental study evidenced the need to develop, form, and correct the emotional and mental states of medical workers. The interactive psychological training content for medical workers of different clinical departments contributed

to the development and formation of high emotional stability, mastery of psychological and emotional adjustment mechanisms, and compensation, particularly structural and resource coping strategies [7].

Thus, the conducted study showed that a successful professional activity of a medical worker is determined by such psychological characteristics as a high level of communicative competence towards patients and their relatives; independence and autonomy of a medical worker, his self-confidence and stability in various situations, combined with flexibility and plasticity of behavior in changing non-standard professional situations; a high degree of resistance to stress, emotional and informational overload; the presence of developed mechanisms of adaptation and compensation.

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ТҰЖЫРЫМ

И.Р. Хусаинова¹, А.О. Надирбекова¹, Н.П. Байбатыр¹

¹«Қазақ онкология және радиология ғылыми-зерттеу институты» АҚ, Алматы, Қазақстан Республикасы

Қазақстан Республикасының онкологиялық қызметі — медицина қызметкерлерінің эмоционалды және психикалық ресурстарының ерекшеліктері

Өзектілігі: медицина қызметкерлері үнемі жоғары эмоционалды шиеленіс жағдайында көмек көрсетеді. Олар әртүрлі психологиялық проблемаларға, эмоционалды және психикалық ресурстардың төмендеуіне бейім келеді. Медицина қызметкерлерінің эмоционалды ресурстарының айқын төмендеуі пациентпен психологиялық байланыс орнатуды қиындатады, пациентпен өзара әрекеттесуді шиеленістіреді және эмоционалды қолдаудың қажетті дәрежесін қамтамасыз етпейді, сонымен қатар медицина қызметкерінің эмоционалды тұрақтылығының сақталуына, оның психологиялық сенімділігі мен кәсіби имиджіне теріс әсер етеді.

Зерттеу мақсаты: онкологиялық аурухана жағдайында медицина қызметкерлерінің эмоционалды және психикалық ресурстарының ерекшеліктерін зерттеу.

Нәтижелер: зерттеу шеңберінде медицина қызметкерінің сәтті кәсіби қызметі пациенттер мен олардың туыстарына қатысты жүзеге асырылатын коммуникативтік құзыреттіліктің жоғары деңгейі сияқты психологиялық ерекшеліктермен анықталатыны анықталды; медицина қызметкерінің тәуелсіздігі мен дербестігі, оның өзіне деген сенімділігі және әртүрлі жағдайлардағы тұрақтылығы, өзгермелі стандартты емес кәсіби жағдайларда мінез-құлықтың икемділігі мен үйлеседі; күйзеліске, эмоционалды және ақпараттық жүктемелерге төзімділіктің жоғары деңгейі; бейімделу мен өтемақының дамыған тетіктерінің болуы.

Қорытынды: медицина қызметкерінің психикалық өзін-өзі реттеу әдістері мен тәсілдерін қалыптастыру, психологиялық және эмоционалды бейімделу мен өтемақы тетіктерін игеру жоғары эмоционалды тұрақтылықты, орнықтылықты, күйзеліске қарсы тұру және кәсіби жұмысқа қанағаттануды арттыруға ықпал етеді.

Түйінді сөздер: медицина қызметкерлері, онкология, психосоциальды ресурстар, психологиялық бейімделу механизмдері, өтемақы механизмдері, психологиялық сенімділік, кәсіби имидж.

АННОТАЦИЯ

И.Р. Хусаинова¹, А.О. Надирбекова¹, Н.П. Байбатыр¹

¹АО «Казахский научно-исследовательский институт онкологии и радиологии», Алматы, Республика Казахстан

Особенности эмоциональных и психических ресурсов медицинских работников онкологической службы Республики Казахстан

Актуальность: Медицинские работники оказывают помощь в условиях постоянного повышенного эмоционального напряжения. Они подвержены различным психологическим проблемам, снижению эмоциональных и психических ресурсов. Выраженное снижение эмоциональных ресурсов медицинских работников затрудняет установление психологического контакта с пациентом, осложняет взаимодействие с пациентом и не обеспечивает необходимой степени эмоциональной поддержки, а также негативно влияет на сохранность собственной эмоциональной стабильности медицинского работника, его психологической надежности и профессионального имиджа.

Цель исследования: изучить особенности эмоциональных и психических ресурсов медицинских работников в условиях онкологического стационара.

Результаты: В рамках проведенного исследования было установлено, что успешная профессиональная деятельность медицинского работника определяется такими психологическими особенностями как высокий уровень коммуникативной компетентности, реализуемой в отношении пациентов и их родственников; независимость и автономность медицинского работника, его уверенность в собственных силах и устойчивость в различного рода ситуациях в сочетании с гибкостью и пластичностью поведения в изменяющихся нестандартных профессиональных ситуациях; высокая степень устойчивости к стрессу, эмоциональным и информационным перегрузкам; наличие развитых механизмов адаптации и компенсации.

Заключение: Сформированность приемов и методов психической саморегуляции медицинского работника, овладение механизмами психологической и эмоциональной адаптации и компенсации способствуют развитию и формированию высокой эмоциональной устойчивости, стабильности, умения противостоять стрессу и повышению удовлетворенности профессиональным трудом.

Ключевые слова: медицинские работники, онкология, психосоциальные ресурсы, механизмы психологической адаптации, механизмы компенсации, психологическая надежность, профессиональный имидж.