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**FEATURES OF BURNOUT AMONG MEDICAL STUDENTS
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Burnout – a complex of specific mental problems which appear due to person's professional activities, which he does most of his life. The term was suggested for the first time by american psychiatrist H. Freudenberger in 1974 to describe the demoralization, frustration and extreme fatigue among the volunteers who worked with social problems among low-income citizens [1]. The most famous description of the syndrome was given by Maslach in 1982: "Burnout is a syndrom of emotional exhaustion, depersonalisation and reduced personal accomplishment that can occur among individuals who do 'people work' of some kind" [2, 3].

There are 5 major groups of symptoms that are characteristic of the burnout.

Group 1 – physical symptoms: physical fatigue, exhaustion, weight change, insomnia, difficulty breathing, shortness of breath, nausea, dizziness, excessive sweating, tremor, increased blood pressure, ulcers and inflammatory skin diseases, diseases.

Group 2 – emotional symptoms: lack of emotions, pessimism, cynicism and callousness in work and personal life, indifference, fatigue, feelings of helplessness and hopelessness, aggressiveness, irritability, anxiety, increased irrational anxiety, inability to concentrate, depression, guilt, hysteria, mental suffering, loss of ideals, hopes or professional prospects, increasing depersonalization, dominance of loneliness feeling.

Group 3 – behavioral symptoms: working more than 45 hours a week, the appearance of fatigue and desire to rest during work, indifference to food, lack of exercise, the justification of the use of tobacco, alcohol, drugs, accidents, impulsive emotional behavior.

Group 4 – intellectual state: the decline of interest in new theories and ideas at work, in alternative approaches to solve problems, boredom, depression, apathy, decrease of interest in life, a preference for standard templates, routine than to creativity, cynicism or indifference to innovation, low participation or refusal to participate in developing experiments – training, education, formal implementation of work.

Group 5 – Social symptoms: low social activity, loss of interest in hobbies and leisure, social contacts are limited to work, poor relationships at work and at home, feeling of isolation and misunderstanding of others and by others, feeling of lack of support from family, friends and colleagues.

Burnout includes three phases, each of which consists of four signs:

- Tension phase (the experience of stressful circumstances, dissatisfaction with themselves, feeling to be driven into a tight corner, experience of traumatizing situations, anxiety and depression);
- Resistance phase (inadequate selective emotional response, emotional and moral disorientation, expansion of savings emotions, reduction of professional duties);
- Exhaustion phase (emotional deficits, emotional detachment, personal detachment or depersonalization, psychosomatic and psycho-vegetative disorders).

As a result of "burnout" a person loses mental energy followed by development of psychosomatic fatigue, emotional exhaustion, which leads to anxiety, irritability, vegetative disorders, low self-esteem [4]. Boyko V.V. indicates the following personal factors contributing to the development of burnout: a tendency to emotional coldness, to experience intensively negative circumstances in the professional activities, poor motivation of emotional impact in the professional activities [5].

A considerable amount of works was devoted to study of burnout by domestic scientists [5; 6; 7] and abroad [1; 2; 5; 8] The manifestations of this syndrome were studied in representatives of various professions: doctors [7; 8; 9], teachers [10; 11] athletes [12], social workers [13], etc. However, little attention as paid to study the manifestations of burnout in students during the formation of professional consciousness. Some aspects of this problem have been studied by I. Andreeva [14] and I. Shagina [15]. But some issues regarding the causes and peculiarities of manifestation of the syndrome in students remain unrevealed.

The aim of our research was to define the features of burnout syndrome among foreign medical students who studied in Russian and in English and to provide a comparative analysis of these parameters.

The main part. To achieve this task we observed 50 foreign third year students of Kharkiv National Medical University aged from 20 to 31 years (mean age $23,03 \div 0,43$ years), among whom 22% were women and 78% were men. There were no students who were married or had children in the group. All participants were divided into 2 groups. The first group included 22 students from 20 to 27 years studying in Russian, the second one - 28 students from 20 to 31 years studying in English. Assessment of burnout was conducted with V. Boyko questionnaire which allowed assessing signs of burnout comprehensively according to three phases: tension, resistance and exhaustion.

Our results show that in the general group of students all phases are in the process of formation (Table), But the dominant symptom is the one that is part of the second phase – the reduction of professional duties ($22.0 \div 1.7$).

Table

Dynamic burnout in foreign medical students

Groups	Phases of the burnout		
	Phase 1	Phase 2	Phase 3
All (n=51)	41.8±2.19	58.02±2.13	46.56±2.06
Group I (n=22)	47.41±3.3	55.55±3.15	51.23±2.66
Group II (n=29)	31.68±2.93	59.32±7.98	40.95±2.45

Study of the burnout syndrome in the first group found that all three phases are in the process of formation (Table.) but symptoms that most affect this process are inadequate selective emotional response ($18.27 \div 1.13$), expansion of savings emotions ($16.14 \div 1.26$) and reduction of professional duties ($16.05 \div 1.51$) belonging to the resistance phase. The first phase (which is the main "launcher" mechanism in the formation of burnout) in the second group was not formed at all, the third phase was information process, but the second phase – the phase of growing resistance to stress – was almost completed. Formation of protection in the phase of resistance was provided due to influence of symptoms of inadequate selective emotional response ($16.54 \div 1.13$), expansion of savings emotions ($15.86 \div 1.3$) and, in particular, the reduction of professional duties ($19.18 \div 1.13$). The analysis of the data showed that most students first and second groups are at different stages of burnout, but some differences were found. Tension phase was formed 18.2% of students of the first and 17.9% students of the second group, resistance phase – in 45.5% and 50% of students respectively, exhaustion phase – only 40.9% of the students first group. Tension phase in phase formation was detected in 40.9% students of first and 17.9% students of the second group, resistance phase – in 36.4% and 39.3% of students respectively, exhaustion phase – in 22.7% and 75% of students respectively.

Conclusions. Summarizing the results of the study it can be concluded that the formation of burnout syndrome in foreign medical students realized by forming resistance increasing stress. Thus students who study in English were more resistant to of educational loads, accompanied higher levels of resistance to increasing stress and absence of of persons formed exhaustion phase.

Foreign students of both groups tend to save their emotions to both teachers and other surrounding subjects (friends, patients). Limit emotional callousness and indifference, attempts to facilitate the duties that require emotional costs may adversely affect relationships at home, moral feeling and success.

Literature

1. Freudenberger H. J. Staff burn-out / H. J. Freudenberger // J. of Social Issues. – 1994. – Vol. 30. – P. 159–165. **2. Maslach C.** Burnout: a social psychological analysis / C. Maslach // Ed. J. W. Jones. London, 1982.– Vol. 11.– N 78. – P. 78 – 85. **3. Maslach C.** Understanding burnout: Defi nitional issues in analyzing a complex phenomenon / C. Maslach //Job Stress

and Burnout. – Eds. W. S. Paine. Beverly Hills, 1982. – Vol. 9. – P. 26–31.

4. Синдром эмоционального выгорания /Русский медицинский сервер: едичинская газета №43 – 8 июня 2005 г. http://www.rusmedserv.com/medgazeta/2005g/43/article_3322.html].

5. Kondo К. Burnout syndrome / К. Kondo // Asian medical. – 2001. – N 34. – P. 34–42. **6. Орел В. Е.** Феномен «выгорания» в зарубежной психологии: эмпирические исследования / В. Е. Орел // Психол. журн.– 2001. – Т. 22. – № 1. – С. 90–101. **7. Бойко В. В.** Синдром «эмоционального выгорания» в профессиональном общении / В. В. Бойко. – СПб.: Питер, 1999. – 105 с. **8. Лозинская Е. И.** Проявление синдрома перегорания у психиатров и онкологов / Е. И. Лозинская / Е. И. Лозинская // Обозр. психиатр. и мед. психол. – 2006. – № 3. – С. 16–19. **9. Юрьева Л. Н.** Профессиональное выгорание у медицинских работников / Л. Н. Юрьева. – К.: Сфера, 2004. – 271 с. **10. Пырков С. Г., Выговская Е. М.** Сравнительная характеристика эмоционального выгорания у медицинских работников различных специальностей / С. Г. Пырков, Е. М. Выговская // Журн. психиатр. и мед. психол. – 2009. – № 2(22). – С. 121–124. **11. Kyriacou С.** Teacher stress and burnout: An international review / С. Kyriacou // Educat. Res. – 1987. – Vol. 29. – P. 38–44. **12. Максименко С. Д.** Синдром «професійного вигорання» та професійна кар'єра працівників освітніх організацій: гендерні аспекти / За наук. ред. С. Д. Максименка, Л. М. Карамушки, Т. В. Зайчикової. – К.: Міленіум, 2006. – 368 с. **13. Уэйнберг Р. С.** Основы психологи спорта и физической культуры / Р. С. Уэйнберг, Д. Гоулд. – К.: Олимпийская литература, 2001. – 334 с. **14. Ронгинская Т. И.** Синдром выгорания в социальных профессиях / Т. И. Ронгинская // Психологический журнал. – М.: Наука, 2002. – Т. 23. – № 3. – С. 85–95. **15. Андреева И. Н.** Синдром эмоционального выгорания у студентов педагогических и юридических специальностей / И. Н. Андреева // Феномен человека в психологических исследованиях и в социальной практике: Материалы I Международной научно-практической конференции 31 октября – 1 ноября 2003 года, г. Смоленск. – Смоленск, 2003. – С. 5–7. **16. Шагина И. Р.** Влияние учебного процесса на здоровье студентов / И. Р. Шагина // Астрах. Мед. журн. – 2010. – №2. – С. 26–29.

Питецька Н. І. Особливості прояву синдрому емоційного вигорання серед студентів-медиків

Робота присвячена вивченню такої важливої проблеми як синдром емоційного вигорання. Метою роботи стало дослідження психологічних особливостей синдрому емоційного вигорання у іноземних студентів медиків. Проведено порівняльний аналіз особливостей прояву емоційного вигорання у студентів в залежності від мови навчання.

Ключові слова: синдром емоційного вигорання, студенти-медики.

Питецкая Н. И. Особенности проявления синдрома эмоционального выгорания среди студентов-медиков

Работа посвящена изучению такой важной проблемы как синдром эмоционального выгорания. Целью работы явилось исследование психологических особенностей синдрома эмоционального выгорания у иностранных студентов-медиков. Проведен сравнительный анализ особенностей проявления эмоционального выгорания у студентов в зависимости от языка обучения.

Ключевые слова: синдром эмоционального выгорания, студенты-медики.

Pitetskaya N. Features of burnout among medical students Kharkiv National Medical University

The scientific work is devoted to the study of such common problem like burnout syndrome. The aim of the work was to study the psychological characteristics of burnout among foreign medical students. A comparative analysis of the characteristics manifestation of burnout among students, depending on the language of instruction.

Key words: burnout syndrome, medical students.

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**ІННОВАЦІЙНІ ТЕХНОЛОГІЇ ЯК СУЧАСНІ УМОВИ
У ПРОФЕСІЙНІЙ ПІДГОТОВЦІ МАЙБУТНІХ ВЧИТЕЛІВ
ОСНОВ ЗДОРОВ'Я**

Упровадження інноваційних, зокрема інтерактивних, технологій у навчальний процес дає змогу докорінно змінити ставлення до об'єкта навчання, перетворивши його на суб'єкт. Студент стає співавтором лекції, семінарського заняття тощо. Підхід до учня, який перебуває в центрі процесу навчання, ґрунтується на повазі до його думки, на спонуканні до активності, на заохоченні до творчості. Він полягає насамперед у підвищенні навчально-виховної ефективності занять, і як наслідок – у значному зростанні рівня реалізації принципів свідомості, активності та якості знань, умінь і навичок, яких набули студенти. У працях деяких науковців цей новий підхід має назву «навчання за методом участі» [3; с. 237], «кооперативне навчання» [5], коли створюється можливість обговорення кожної проблеми, доведення,