

УДК 159.964

DOI: [https://doi.org/10.18524/2707-0409.2019.1\(49\).185759](https://doi.org/10.18524/2707-0409.2019.1(49).185759)

Astremskaya I. V.

docent of the Department of Psychology Petro Mohyla Black Sea National University, candidate of Psychological Sciences

e-mail: arin9474@ukr.net

ORCID 0000-0002-9746-3356

PROFESSIONAL BURNOUT IN WOMEN OF ASSISTIVE PROFESSIONS

The article is devoted to the study of the problem of professional burnout of women helping professions. Theoretically, it is proved that especially strong professional stress among socio-nominal occupations is dominated by representatives of assisting specialties, among which many women, whose gender peculiarity is emotionality. Characterized features of the process of emotional burnout and its structure. The peculiarities of the formation and severity of the symptoms of the mentioned syndrome are investigated. It is noted that supervision is a kind of psychological counselling, in which correction and regulation of emotional-volitional processes, prevention of professional burnout takes place.

Key words: occupational burnout syndrome, helping the profession, socio-occupational professions, emotional stress, stress, supervision.

Problem statement and analysis of the results of recent research. In recent years, in the social practice and scientific psychological research, the concept of «helping profession» is increasingly common. The reasons for increased interest in the representatives of helping professions, on the one hand, are related to socio-economic transformations, the ever-increasing level of stressful living conditions, which increases the importance of helping occupations, and on the other hand, with the increasing requirements for professionals of different profiles, and especially to representatives of the professions of sociological type. To particularly strong professional stress among socio-occupational

professions are the representatives of helping specialties, which include medical workers, psychologists, social workers, teachers, ie, those professionals whose activity, willingness to provide assistance, depends on the effectiveness of work in general.

Over the past decade, the concept of the peculiarities and conditions for the formation of mental health of people has considerably expanded. There are a number of factors that influence the development of basic psychological stereotypes of behaviour, psychological foundations of relationships in society, which, in turn, determines the features of self-esteem, self-identification and, ultimately, physical and mental disability. Accordingly, with the increase of regulatory factors, the number of vulnerable links in the complex system of regulation of the psycho-emotional health of a modern person increases as well. Health is a natural consequence of our way of life. This is what we do, the result of our thoughts and feelings. We determine our own level of health by evaluating our feelings. One of the important components in human health is physical health — a natural state of the organism due to the normal functioning of all organs and systems. It is not possible to maintain it at the proper level without optimal motor activity. People who perform the required volume of motor activity are healthier in the psychophysical sense, less prone to stress and tension, sleep better, improve the functioning of all functional systems, and increase physical and professional activity [11, p. 1].

One of the possible consequences of such an imbalance is the syndrome of a professional burnout, which according to the WHO is manifested by a violation of productivity at work, increased propensity to somatic diseases, a decrease in mental and physical capacity, and even — suicidal behaviour [5, p. 20–21].

Scientific researches of V. Boyk, 1985 [2], T. Formanyuk, 1994 [17], N. Vodopianova, N. Starchinkova, 2005 [3], N. Grisenko, M. Melchina, 2007 [4], G. Fedorishin, 2009 [16], G. Mironenko, 2010 [10], A. Sidorenko, 2010 [13], Ketsko, 2011 [6], A. Meloyan, G. Semenov, 2012 [8], etc. — leave unresolved issues of dominant factors and circumstances that contribute to the progression of this syndrome up to complete emotional exhaustion, apathy and antisocial behaviour. An important aspect in this aspect may be

the deepening of the structure and features of the development of a syndrome of burnout in various categories of persons. It is the definition of the characteristics of its course, depending on the rhythm and intensity of professional activity, in our opinion, could answer the question of early detection and prevention of progression of this syndrome.

The aim of the study — the study of the peculiarities of the formation and severity of the symptoms of professional burnout in women of socio-occupational professions.

Organization and methods of research. In the process of achieving the goal of the study, 80 women were diagnosed. The professional activities of each of them belonged to a group of so-called socio-occupations, namely, medical workers, educators, private entrepreneurs, office workers and managers.

The specifics of the work of people in these professions are different in that they have a large number of situations with high emotional saturation and cognitive complexity of interpersonal communication. In turn, this requires a specialist significant contribution to establishing trusting relationships and the ability to manage the emotional tension of business communication. The general sign and the cause of organizational stress is the presence of an internal conflict between the requirements of the organization, the attractiveness of work in it, expectations and real opportunities of employees. All examined were conditionally healthy persons and denied the presence of any somatic pathology.

To determine the presence of signs of occupational burnout syndrome, women were offered a «Questionnaire for determining the level of formation of phases of emotional burnout» VV Boyka (1996), who in his studies noted that professional burnout is a mechanism of mental protection of the individual in the form of complete or partial exclusion of emotions on selected psycho-traumatic activities of the environment. It's a stereotype of emotions, role-playing and professionalism behaviour that has a negative impact on all spheres of life, health and professional activity [12].

After processing the study of the degree of professional burnout in women, all subjects are divided by the number of points

scored in each of the phases. The entire sample can be divided into two groups: 1 group — women who scored at least 37 points in any of the phases (women with signs of a syndrome of burnout); Group 2 is a cliff of women who scored 36 or less points in any of the phases (women without signs of a burnout syndrome).

Results of the research and their discussion. V. Boyko [2] refers to professional burnout to one of forms of professional deformation of a person (a phenomenon characterized by changes in personality traits, such as stereotypes of perception, value orientations, character, ways of communication and behaviour) and considers the development of a syndrome in the form of a three-phase process (tension, resistivity and exhaustion).

The phase «Tension» is interpreted as a nervous (anxiety) tension and acts as a starting mechanism in the formation of emotional burnout. Tension has a dynamic character, which is due to exhausting constancy or increase in the effects of psycho-traumatic factors. Anxiety stress involves several symptoms: the experience of traumatic circumstances; dissatisfaction with oneself; a feeling of «embedding in a cage»; anxiety and depression.

The «Resistance» phase is characterized by excessive emotional exhaustion, which provokes the emergence and development of protective reactions that make people emotionally closed, extraneous, indifferent. Against this background, any involvement in professional affairs and communication causes a feeling of excessive overwork and manifests itself by the following symptoms of burnout: inadequate selective emotional response; emotional and ethical disorientation; expansion of the sphere of saving of emotions; reduction of professional duties.

The phase of «exhaustion» is characterized by pronounced fall of the general tone and weakening of the nervous system. Emotional protection becomes an inalienable attribute of the individual. This phase, too, manifests itself in a number of symptoms: emotional deficiency; emotional alienation; personal removal or depersonalization; psychosomatic and psycho-vegetative disorders [2, p. 92–94; 16].

According to the survey, it was found that half of respondents had signs of occupational burnout syndrome (Table 1).

Table 1

**Expression of symptoms depending on the phases
of the burnout syndrome**

Symptoms	Women with symptoms of burnout syn- drome (n = 48)	Women without signs of occupa- tional burnout syndrome (n = 32)
	Tension «phase»	
The experience of traumatic circumstances	28 (58.3 %)	1 (3.1 %)
Dissatisfaction with yourself	4 (8.3 %)	–
Feeling «squat in a cage»	12 (25 %)	1 (3.1 %)
Anxiety and depression	16 (33.3 %)	1 (3.1 %)
	Resistance «phase»	
Inadequate emotional response	36 (75 %)	8 (25.0 %)
Emotional and ethical disorientation	16 (33.3 %)	2 (6.3 %)
Saving emotions	20 (41.6 %)	3 (9.4 %)
Reduction of professional duties	29 (60.4 %)	20 (62.5 %)
	Depletion «Phase»	
Emotional deficiency	19 (39.5 %)	1 (3.1 %)
Emotional alienation	21 (43.8 %)	1 (3.1 %)
Depersonalization	10 (20.8 %)	–
Psychosomatic and psycho-emotional disorders	9 (11.3 %)	1 (3.1 %)

Evaluating the level of the formation of phases of the emotional burnout syndrome, it was found that the highest percentage of persons with symptoms of burnout syndrome account for the phase of «Resistition» — about 69 %. Practically equally — 27 % and 29 %, respectively, the presence of persons who formed the phase of «Tension» and «Exhaustion» respectively. In our opinion, this division is rather alarming, since almost one third (29 %) of respondents are in the critical phase of «Exhaustion.» For these individuals characterized by a significant emotional deficit, alienation and even — psychosomatic disorders. It is significant that more than half of women with symptoms of burnout syndrome are in the «Resistance» phase, which can be a sign of significant social and professional pressure on persons of socio-occupational professions.

The study of the severity of the symptoms of occupational burnout syndrome revealed significant variation depending on the phase of the syndrome. Thus, in the phase of «Tension», the dominant symptoms in women with signs of professional burnout were: the experience of traumatic circumstances, the feeling of «squatting», anxiety and depression. They met in 58.3 %, 25 % and 33.3 % respectively. Despite the fact that women without signs of occupational burnout syndrome showed any of the phases not reaching critical significance, some of the symptoms were encountered in a significant number of individuals. Thus, in about a quarter of this group of inquirers, an inadequate emotional response was detected, and a reduction of professional duties was found in 62.5 % of the respondents, which was almost identical to those of the respondents with signs of a burnout syndrome. By the way, the above symptom is the only one that has reached such a frequency among the respondents and, obviously, its occurrence has caused a number of other social and professional factors.

It should be noted that despite this, the phase of «Resistance» still in this group of surveyed did not reach the values of its formation. For comparison, the «Resistance» phase in women with signs of professional burnout was characterized by inadequate emotional response and the saving of emotions, which indicates (in contrast to women without signs of professional burnout) profound emotional disturbances and their non-accidental nature. It is important to note that a significant percentage of people with symptoms of a burnout syndrome at the time of the study were already in a phase of exhaustion. For most of the respondents in this group, emotional deficits (39.5 %) and emotional alienation (43.8 %) were characteristic, and more than 10 % of respondents identified psychosomatic and psycho-emotional disorders. They are manifested by chronic fatigue, cognitive dysfunction (memory and attention impairment), sleep disturbance and personality changes, headache and cardiovascular (tachycardia, arrhythmia, hypertension) disorders. For comparison, women without signs of professional burnout practically did not meet.

Strakhina T. M. and Yakovleva IV it is believed that one of the possible ways of organizing the cooperation of professionals

assisting professionals in order to professional development and prevention of professional burnout and can be implemented in the form of implementation in the activities of institutions of constant supervisory practice.

In the process of free exchange of colleagues' experiences, the supervisor, using a well-known technique of psychological counselling, creates a special atmosphere of security and security, a kind of protected area that promotes free discussion of professional complexities, awareness and acceptance of various feelings (including negative), accompanying professional activities, the birth of a new knowledge and formation of a positive attitude towards the profession. The process of individual development of a specialist in assisting occupations should include awareness and acceptance of negative emotions and professional failures as natural and regular stages of professional growth.

Survival is a kind of psychological counselling, in which the correction and regulation of emotional and volitional processes takes place, and the knowledge and skills of a professional are enriched. Thus, supervision is not only an effective form of professional assistance, based on reflection and awareness of personal difficulties in communicating with the client, but also a psychologically adequate way to improve the skills and professional development of professionals assisting professions. Survival is a form of practical training and psychological support for specialists working with people, which cannot be replaced by other educational and psychotherapeutic technologies [14, p. 102–106].

Ushakova I. V. gives a brief overview of research on the impact of gender factors on supervisory relations. The influence of gender on supervising (and human) relationships is based on differences in social, economic, political, financial status and physical strength, patterns of behaviour adopted in society for men and women (roles and expectations) [1; 15].

Conclusions. It was established that the overwhelming majority of women surveyed in socio-occupational occupations with symptoms of burnout syndrome are in the «Resistance» phase. In this phase of burn-out, opportunities for work in the usual mode are exhausted and the human psyche begins to unconsciously

change the mode, it is observed that the professional inadequately «saves» emotions, limits the emotional returns due to a selective response to the situation of actors, emotional contact is not established with all actors, and on the principle of «I want — I do not want to».

It was found that one third of women with a burnout syndrome are in the critical phase of «Exhaustion». It is characterized by a pronounced fall in total tone and weakening of the nervous system. There is one mind, but the work is performed automatically and the specialist characterizes sharpness, envy, rude, condemnation of the former professional values, detachment, loneliness up to alienation from relatives. The first somatic symptoms are manifested: head and dorsal pain, insomnia or sleepiness, apathy, depression and other characteristic disorders. The consequences of this phase are the most prolonged and deep. A person may question the significance of his activities and life in general, there may be anger at himself and others, life seems to be out of control.

For women with a syndrome of burnout, emotional disturbances are typical: asthenization — a feeling of constant fatigue, nervous exhaustion; decrease the mood background with the appearance of anxiety; neurological disorders, short-term psychogenic reactions in the form of obsessive representations, doubts and even phobias after complicated, emotionally heavy reactions. 4. It is found that the bigger Half of women in both groups use physical exercises or various types of sports to combat stress. Priority among them is modern dancing, running, oriental uniforms, swimming, outdoor walks. This figure in questioned with signs of professional burnout is 59 % and in the questionnaire, without signs of professional burnout 77 %.

The perspective directions of further research we see in the development of a program for the prevention of emotional burnout syndrome through the use of health fitness and in order to stimulate their physical and mental ability to work.

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Астремська І. В.

доцент кафедри психології, кандидат психологічних наук, Чорноморський національний університет ім. Петра Могили

ПРОФЕСІЙНЕ ВИГОРАННЯ У ЖІНОК ДОПОМОГАЮЧИХ ПРОФЕСІЙ

Стаття присвячена дослідженню проблеми професійного вигорання жінок допомагаючих професій. Теоретично обґрунтовано, що до особливо сильного професійного стресу серед соціономічних професій схильні представники допомагаючих спеціальностей, серед яких багато жінок, гендерною особливістю яких є емоційність. Охарактери-

зовано особливості процесу емоційного вигорання та його структуру. Досліджено особливості формування та ступінь вираженості симптомів цього синдрому. Відзначено, що саме супервізія є таким видом психологічного консультування, при якому відбувається корекція і регуляція емоційно-вольових процесів, профілактика професійного вигорання.

Ключові слова: синдром професійного вигорання, допомагаючі професії, соціономічні професії, емоційне напруження, стрес, супервізія.

Астремская И. В.

доцент кафедри психології, кандидат психологічних наук,
Черноморський національний університет ім. Петра Могили

ПРОФЕССИОНАЛЬНОЕ ВЫГОРАНИЕ ЖЕНЩИН ПОМОГАЮЩИХ ПРОФЕССИЙ

Статья посвящена исследованию проблемы профессионального выгорания женщин помогающих профессий. Теоретически обосновано, что к особо сильному профессиональному стрессу среди социомических профессий склонны представители помогающих специальностей, среди которых много женщин, гендерной особенностью которых является эмоциональность. Охарактеризованы особенности процесса эмоционального выгорания и его структура. Исследованы особенности формирования и степень выраженности симптомов указанного синдрома. Отмечено, что именно супервизия является таким видом психологического консультирования, при котором происходит коррекция и регуляция эмоционально-волевых процессов, профилактика профессионального выгорания.

Ключевые слова: синдром профессионального выгорания, помогающие профессии, социомические профессии, эмоциональное напряжение, стресс, супервизия.

Стаття надійшла до редакції 25.03.2019