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Balint groups as a method to prevent stress in mental health workers

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Abstract

The article focuses on the analysis and correction of professional burnout in mid-level health workers of No. 3 V.A. GILYAROVSKY Psychiatric Hospital, Moscow Healthcare

Department. The article reviews indicators of professional deformation and describes Balint group work as a method of prevention of professional burnout. Growing age brings increased professional experience, but also professional deformation, rendering the work to overcome it necessary. Based on global experience and our own observations, we recommend Balint groups as a long-term program for correction of professional burnout in nurses. Our study proved them effective in forming a positive professional culture.

Keywords: Professional burnout, Balint groups, Mental health nurses, Distress.

Grupos de lastre como método de prevención del estrés en trabajadores de salud mental

Resumen

El artículo se centra en el análisis y la corrección del agotamiento profesional en trabajadores de la salud de nivel medio del n. ° 3 V.A. Hospital Psiquiátrico GILYAROVSKY, Departamento de Salud de Moscú. El artículo revisa los indicadores de deformación profesional y describe el trabajo grupal de Balint como un método de prevención del agotamiento profesional. La edad cada vez mayor aumenta la experiencia profesional, pero también la deformación profesional, lo que hace que el trabajo para superarla sea necesario. Con base en la experiencia global y nuestras propias observaciones, recomendamos los grupos Balint como un programa a largo plazo para la corrección del agotamiento profesional en enfermeras. Nuestro estudio demostró que son efectivos para formar una cultura profesional positiva.

Palabras clave: Agotamiento profesional, Grupos de balint, Enfermeras de salud mental, Angustia.

1. INTRODUCTION

Professional activity of healthcare workers participating in the treatment and rehabilitation of patients entails high level of responsibility for their life and health, often requiring urgent decisions,

ability to retain competency and maximum productivity under extreme emotional pressure. At the same time, it is important to be able to gain the patients and their relatives' trust, show kindness, and demonstrate essentially psychotherapeutically skills, since mental health patients usually undergo a lengthy treatment and need special attitude and understanding as necessary components of therapy (ZUYKOVA & GUSHANSKAYA, 2016; ZUYKOVA & GUSHANSKAYA, 2013; MAKAROVA et.al., 2019).

All of this puts doctors and nurses under the risk of professional burnout, which, as a type of a professional deformation negatively affects a person's mental health, professional performance and relationships. For the last 20 years, the issue of professional burnout has been extensively discussed worldwide; however, in our country the issue has not been given proper attention. In medicine, the issue is viewed through the prism of work with people suffering from health disorders of different etiology. Studies have been conducted, involving surgical and ambulance personnel, palliative and disabled children care workers (ARPENTIEVA, 2018; RAEVSKAYA & SOLODOVNIKOVA, 2015).

At present, emotional burnout in doctors and nurses, especially those in mental healthcare, is actively discussed at various forums, conferences and congresses. In addition, for a good reason: statistical data points to a high level of dissatisfaction with professional achievements among mental health care workers, manifestations of depersonalization, decrease in emphatic ability.

Researchers name dealing with psychologically difficult patients as a contributory factor in the emotional burnout syndrome in doctors and nurses. These are, first of all, patients with low motivation for treatment, those resistant to therapy or with poor prognosis, which is often the case in psychiatry and necrology (ZUYKOVA & GUSHANSKAYA, 2016; ZUYKOVA & GUSHANSKAYA, 2013; ZUYKOVA et.al. 2014; KARDIS et.al. 2019; OREKHOVSKAYA et.al. 2019). Research shows, for instance, that when working with cancer patients, 96% of nurses present with different stages of emotional burnout syndrome; every second nurse manifests “a reduction of professional duties” (67%) which demonstrates the effect of the emotional burnout syndrome on the decrease in the quality of nursing assistance (KASIMOVSKAYA, 2008).

An overview of works shows that the issue of emotional burnout in mental health nurses has not received enough coverage while it is mainly the mid-level healthcare personnel who work with patients, and, consequently, are in the high-risk group. However, G.N. UVAROVA’s (2012) work shows mental health nurses to be less subject to professional deformation than surgical nurses. In psychiatric practice, special importance is assigned to closely observing the patient (lest he harms himself or those around him) and adhering to sanitary regimen. The nurse must be able to spot verbal and non-verbal signs indicating the patient’s condition, as well as register changes in the latter’s emotional state. E.Y. LAZOREVA and E.L. NIKOLAEVA’s (2013) work shows correlation between the

pronouncedness of the professional burnout and years of work in a mental clinic.

According to the authors, a group with under 10 years of work experience was more subject to emotional depletion and depersonalization, manifesting loss of interest for their work, rudeness in dealing with patients, cynicism. At the same time, nurses with over 10 years of work experience showed a decrease in the emotional burnout characteristics as well as a growing sense of one's professional incompetency.

The work by I.V. ARLUKEVICH (2013), drawing on research held at No. 1 N.A. ALEKSEEV Psychiatric Hospital, Moscow Healthcare Department, and shows that the professional burnout syndrome is formed over a long period of time and is especially pronounced in nurses with a significant work experience (20-30 years). At that age, a specialist has enough experience to perform one's professional duties; however, the experience gained coincides in time with bodily readjustments and apprehensions over one's pre-retirement age.

Thus, to retain professional health while working in the psychiatry sector, preventive measures should be taken at every stage of the professional journey, requiring professional diagnosis and selection, professional forecast and monitoring, professional correction and support of healthcare workers, as well as timely prophylactic and rehabilitation of professional disorders. Balint groups are a traditional,

internationally recognized and modern method of overcoming professional burnout in health care workers. At the same time, in our county it is less popular and generally accepted than, for instance, one-off trainings; at times, like anything new, it causes explicit or implicit resistance. Nevertheless, the further described experience confirms the necessity of broader expansion of Balint groups in the national healthcare sector.

2. METHODOLOGY

In September 2015, with the assistance and participation of N.L. ZUYKOVA (2016) (Head of the Chair of Psychiatry, Psychotherapy and Psychosomatic Pathology, Peoples' Friendship University of Russia; certified European transactional analyst, Practical Psychology University Professor), under the aegis of the All Russian Professional Psychotherapeutic League (PPL) a major project was launched at No. 3 V.A. GILYAROVSKY Psychiatric Hospital, Moscow Healthcare Department. We started Balint groups with nurses on a volunteer basis, with head doctor of the hospital, MD, Professor G.P. KOSTYUK (2019) showing us great assistance (KOSTYUK et.al. 2019).

Conducted at No. 3 V.A. GILYAROVSKY Psychiatric Hospital, the study was performed in several stages, in the form of an experiment. A group of nurses (n=300) was formed at the first stage and the pilot study was held; 3-day Balint group presentation was

conducted. The results were assessed in accordance with the method of field observation. A selection was further carried out to form 2 comparative groups, with the position occupied as a criterion for the selection. As a result, 2 groups of senior nurses, aware of Balint groups were formed and 8 groups of mental health nurses, unaware of Balint groups. A total of 10 groups were formed, each containing 13-15 members, with representative samples for quantity and quality. Each participant attended no less than 13 Balint groups. The study included over 90 people, with a medium age of 45 and medium work experience of 22.5 years. Women made up 95% of study participants, men - 5%.

Before commencing the work, the Balint group participants were given questionnaires to determine the level of their professional distress. (Work Attitude and Professional “Burnout” by V.A. VINOKUR (VINOKUR & KLITSENKO, 2012); A Test on the Meaning of Life and Attitude Toward Life by D.A. LEONTYEV (1992); Zung Self-Rating Depression Scale adapted by T.A. BALASHOVA (1997); L.I. VASSERMANN (2004) Social Frustration Level Diagnostics Method modified by V.V. BOYKO (2004). Later, on completion of the course, repeat assessment was conducted to monitor the dynamics of the results of the initial tests. 1.5-hour-long Balint groups were held twice a month.

3. RESULTS AND DISCUSSION

According to our research, nurses assessed their level of social frustration as insignificant or medium. Increased level of frustration was caused by questions on financial situation (8), social situation

(13), satisfaction with the service sector (15) and medical service sector (16); the lowest level of frustration was caused by the questions on relationship with colleagues (2), friends (14) and vacation possibilities (18) (fig. 1).

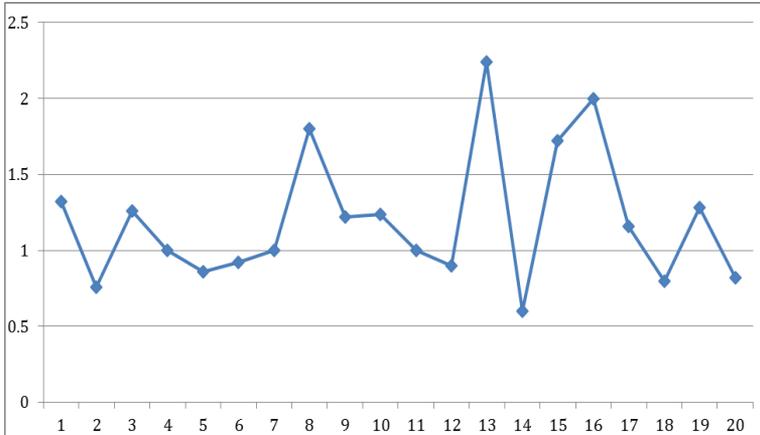


Figure 1: L.I. VASSERMANN Social Frustration Level Diagnostics
Method modified by V.V. BOYKO)

I'm satisfied with:

- | | |
|---|---|
| 1. My education. | 10. Relationships with my spouse. |
| 2. Relationships with colleagues. | 11. Relationships with my child (children). |
| 3. Relationships with management. | 12. Relationships with my parent. |
| 4. Relationships with subjects of my professional activity. | 13. Social situation (situation in the country). |
| 5. My work as a whole. | 14. Relationships with friends, close acquaintances). |
| 6. Working conditions. | 15. Sector of services and consumer services. |
| 7. My situation in the society. | 16. Medical service sector. |
| 8. Financial situation. | 17. Leisure activities. |
| 9. Living conditions. | 18. Vacation possibilities. |
| | 19. Work choice possibilities. |
| | 20. My mode of life as a whole. |

ZUNG Self-Rating Depression Scale tests pointed to the absence of depression, as none of those questioned showed even as low levels of depression as 50 points – slight depression of situational or neurotic genesis (fig. 2). The under 30 age group showed the most decrease in this respect (4.5 points), which was to be expected as young people are less psychologically stable; after Balint group sessions, the group showed decrease in their levels of anxiety and distress, which coincides with the results of the previous research (RUZHENSKAYA, 2013). At the same time, we need to remember that the ZUNG Scale assesses subjective indicators, i.e. the level of depression according to the referent (similar to the level of social frustration on the L.I. VASSERMAN scale).

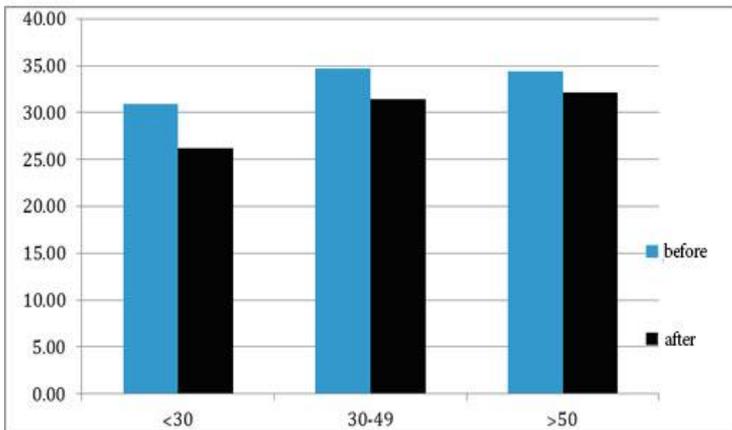


Figure 2: ZUNG Self-Rating Depression Scale

The Test on the Meaning of Life and Attitude toward Life showed that nurses have high level of consciousness of their meaning of life; the results were on the whole comparable to those obtained by E.A. PETROVA (2011) and A.A. SHESTAKOV (2002) in the assessment of bank workers. It may be noted that after Balint group sessions, the 3rd subscale showed a tendency for increased value (life effectiveness).

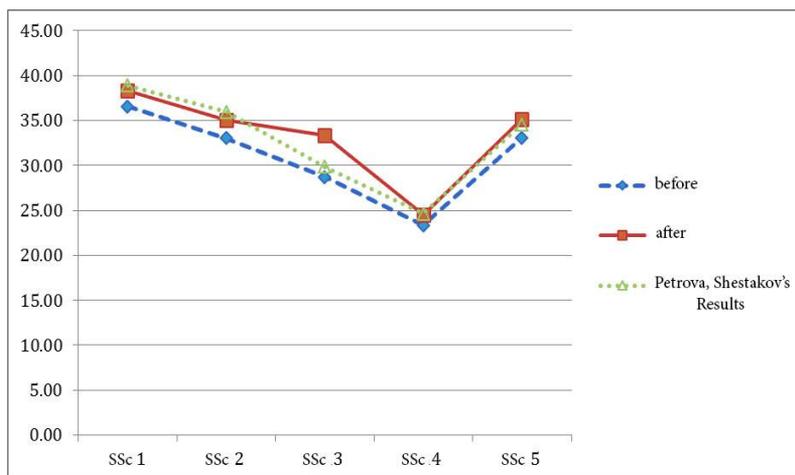


Figure 3: Test on the Meaning of Life and Attitude toward Life by D.A. LEONTYEV

Subscale 1 – life meaning, Subscale 2 – life process, Subscale 3 – life results, Subscale 4 – Myself as locus of control, Subscale 5 – life as locus of control

The method of assessment of professional burnout in specialists of helping professions was suggested by V.A. VINOKUR in 2012

(VINOKUR & KLITSENKO, 2012). As shown by our research, this is a powerful tool in diagnosing professional burnout. When compared to the results obtained by the authors of the method during approbation, our results were lower (except Scale 4 – professional perfectionism), yet comparable with the results obtained by V.A. VINOKUR (2012) (with psychologists as a sample group). This is explained by the similarity of the two groups’ professional activity (psychologists and mental health workers) and the use of similar coping strategies (fig. 4).

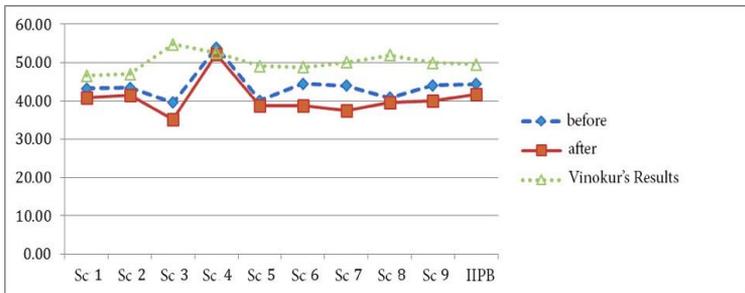


Figure 4: Work Attitude and Professional “Burnout” by V. A. VINOKUR

1. Emotional depletion.
2. Work tension.
3. Decreased work satisfaction and feeling of its importance.
4. Professional perfectionism.
5. Self –assessed quality of work.
6. Assistance and psychological support from colleagues.
7. Professional development and self-improvement.
8. General self-esteem.
9. Health and general adaptation.

Integrative Index of Professional “Burnout” (IIPB)

To obtain more objective data, we divided the sample group by ages. Division by work experience resulted in the discovery of similar tendencies, yet they were not as distinct in view of certain inaccuracies (work experience in the psychiatric hospital or the sector of general medicine was taken into account). For that reason, the age of the participants was picked as a more objective and explicit criterion for group division.

A decrease in professional deformation was noted in nurses aged under 30, especially on the Scale 6 - assistance and psychological support from colleagues (16 points). Which points to a positive effect of Balint groups on the nurses' condition. The group shows a 6-point decrease of integrative indicator. At the same time, we must note that the indicators in the Scale 5 - self -assessed quality of work - and Scale 8 - general self-esteem - remained unchanged after Balint group sessions.

An equal decrease in professional deformation indicators was noted in nurses aged 31-49. The group shows a 4-point decrease of integrative indicator. Nurses over 50 showed a decrease in dissatisfaction with work (Scale 3), feeling of a lack of psychological support from colleagues (Scale 6) and absence of career prospects (Scale 7). An increase in professional perfectionism was registered, with the nurses starting to perceive the importance of their work. Yet, on the whole, the group showed an insignificant decrease in the integrative indicator, since senior workers have limited adaptability and Balint groups do not help them much.

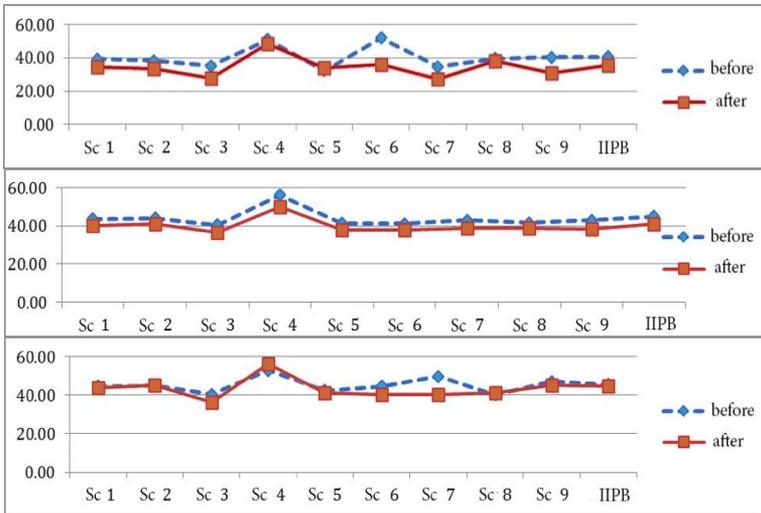


Figure 5: Work Attitude and Professional “Burnout” by V.A. VINOKUR (under 30, 31-49, over 50)

It must be noted that initially the idea of conducting Balint groups with mid-level health workers was largely resisted by the psychiatric hospital personnel. At the presentation for Balint groups, when hearing that ‘Balint group is a safe place, where, in an environment of collegial support you can say “I’m mad at my patient”,’ nurses would stand up and object – “How dare you, we love our patients!”

Some nurses were trying to sabotage the presentation by walking out. Thus, these people who gave so much warmth and love to their patients, were still in the grip of defensive mechanisms of denial and had no access to their own feelings.

During the first few group sessions, nurses were reluctant to share their negative emotions; trust, so necessary in Balint groups, was slow in developing. It became clear that the majority of participants encounter similar cases; increasingly complicated cases were now shared in the group. Lots of suppressed aggression caused by depreciation of nurses, humiliation and degradation was revealed. They were often irrationally concerned that the mental illness may affect them or their family.

At first, there was a lot of criticism for the person presenting the case, it was hard to follow the Balint group rules requiring non-evaluative statements when referring to the case presenter; however, the participants started to gradually acquire an understanding of the spirit and ways of the Balint group.

Despite the hospital management's kind suggestion to attend Balint group sessions during work hours and free of charge, the offer was not met enthusiastically by every participant. In view of this, we were even more pleased to hear at the final session, summarizing the results of the first part of the project, that the majority of the participants are grateful to have been included in the project and given a chance to attend Balint group sessions and share their emotions on the theme, "Me and My Patient as a Stress Factor". The majority of nurses assessed the work as a new valuable experience. One of them said that Balint groups "helped people feel they are being taken care of, we began to feel more unified, the subsidiaries' and the hospital employees became closer." Another participant noted, "We looked

inside ourselves and were given a chance to see our patients in a different light.” The nurses stressed the ability to better understand themselves and their patients among their main acquisition after Balint group sessions.

4. CONCLUSION

Thus, based on the feedback and the research results, the following preliminary conclusions can be drawn mental health nurses are subject to professional burnout; the latter is more pronounced in nurses with a significant work experience. Growing age brings increased professional experience, but also professional deformation, rendering the work to overcome it necessary. Based on global experience and our own observations, we recommend Balint groups as a long-term program for correction of professional burnout in nurses. Our study proved them effective in forming a positive professional culture.

In conclusion, we would like to note that at the final session the majority of participants voted to continue the project, with a request of group therapy. This led us to outline further prospects of work to overcome professional burnout in mental health nurses. We plan to conduct 15 sessions with nurses who have not yet participated in Balint groups, as well as senior nurses, psychologists and psychotherapists of No. 3 Psychiatric Hospital and its subsidiaries. Some changes were introduced in the range of methods, allowing to

study both personal characteristics of the healthcare workers as well as their coping strategies and the level of group cohesion. The data obtained will allow us a comparison with the last year's research, resulting in a more detailed and accurate statistical evaluation.

REFERENCES

- ARAKULEVICH, I.V. 2013. "Burnout among nurses. Actual directions of scientific research of the XXI century". **Theory and practice**. Vol. 2; 122-129.
- ARPENTIEVA M.R. 2018. "Quality problems of clinical and psychological counseling and training". **Simbirsk Scientific Journal Vestnik**. Vol. 1. Iss. 31; 15-20.
- BALASHOVA, T.I. 1997. **Method of differential diagnosis of depressive states Tsung**. Workshop on experimental and applied psychology. St. Petersburg: Speech. Russia.
- KARDIS, M., STURAK, P., KRÁLIK, R., TRONG, D.N., KORZHUEV, A.V., KRYUKOVA, N.I. 2019. "A sociological-religious probe into contemporary global Salafi jihadism". **European Journal of Science and Theology**. Vol. 15. Iss. 4; 113-125.
- KASIMOVSKAYA, N.A. 2008. **Medical, social and professional factors of maladaptation of nursing personnel**. PhD thesis. Москва: Federal Bureau of Medical and Social Expertise. Russia.
- LAZOREVA, E.YU. NIKOLAEV, E.L. 2013. "Psychological features of emotional burnout in nursing psychiatric staff". **The Bulletin of Chuvash Psychiatry and Psychology**. Vol. 9; 69-78.
- LEONTEV, D.A. 1992. **Life orientation test**. Moscow: Meaning. Russia.
- MAKAROVA, E.V., KRYUKOVA, N.I., SIZOVA, Z.M., GRINENKO, A.V., EROFEEVA, M.A., AND BUKALEROVA, L.A. 2019. "Divergence of supreme values of Russian world and western civilization social and philosophical

- analysis”. **European Journal of Science and Theology**. Vol. 15. Iss. 3; 97-107.
- OREKHOVSKAYA, N.A., CHISTYAKOV, A.A., KRYUKOVA, N.I., KROKHINA, J.A., OSPENNIKOV, Y.V., MAKAROVA, E.V. 2019. “Orthodoxy and modernity their contact facets in Russian society”. **European Journal of Science and Theology**. Vol. 15. Iss. 2; 67-77.
- PETROVA, E.V., SEMENOVA, N.V., ALEHIN, A.N. 2011. “Patterns of development and features of the syndrome of burnout among doctors and nurses of psychiatric institutions”. **Tomsk State Pedagogical University Bulletin**. Vol. 12. Iss. 114; 194-199.
- RAEVSKAYA, A.I., SOLODOVNIKOVA, I.A. 2015. “Burnout syndrome: essence of the phenomenon and diagnostics”. **Sibirsk Scientific Journal Vestnik**. Vol. 1. Iss. 19; 84-87.
- RUZHENSKAYA, E.V. 2013. “Occupational health at medical staff in psychiatric facilities”. **Problemy Sotsialnoi Gigieny, Zdravookhraneniya, i Istorii Meditsiny**. Vol. 4; 8-11.
- SHESTAKOV A.A. 2002. **Socio-psychological aspects of assessment of reserve managers of banking structures**. PhD thesis. Moscow: Moscow State Social University. Russia.
- USHAKOV V.L., ORLOV V.A., MALAKHOV D.G., KARTASHOV S.I., MASLENNIKOVA A.V., ARKHIPOV A.Y., STRELEZ V.B., ARSALIDOU M., VARTANOV A.V., KOSTYUK G.P., ZAKHAROVA N.V. 2019. “fMRI and tractographic studies of cognitive systems in the human brain at the norm and the paranoid schizophrenia”. **Studies in Computational Intelligence**. Vol. 799; 291-299.
- UVAROVA G.N. 2012. “Factors of professional personality deformation in the activities of nurses of various profiles”. **SCIENCE AND MODERNITY**. Vol. 18; 155-160.
- VASSERMAN, L.I., IOVLEV, B.V., BEREBIN, M.A. 2004. **Methodology for the psychological diagnosis of the level of social frustration and its practical application: guidelines**. St. Petersburg: Speech. Russia.

- VINOKUR, V.A., KLITSENKO, O.A. 2012. “Validation of the methodology of psychological diagnosis of professional burnout in helping professions (questionnaire «OPRV»)”. **Medicinskâ psihologiâ v Rossii**. Vol. 12; URL: [http:// medpsy.ru](http://medpsy.ru) (date of the application: 12.11.2019)
- ZUYKOVA, N.L., GUSHANSKAYA, E.V. 2013. **Nursing in psychiatry**. Moscow: Max Press. Russia.
- ZUYKOVA, N.L., KARDASHYAN, R.A., SALYINTSEV, I.V. 2014. **Nursing in addiction**. Moscow: Max Press. Russia.
- ZUYKOVA, N.L.; GUSHANSKAYA, E.V. 2016. **Activities of a nurse of the psychosomatic department**. Moscow: RUDN. Russia.



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