

COPING WITH PROFESSIONAL DIFFICULTIES IN THE PROFESSIONAL ACTIVITY OF PHYSICIANS

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Abstract: The article presents a theoretical analysis of physicians' coping behavior in difficult situations arising in the course of professional activity. The relevance of the topic is determined by the high emotional load and level of responsibility inherent in the medical profession. Particular attention is paid to the types and specific features of coping strategies used by physicians when overcoming professional difficulties.

Keywords: physicians, coping behavior, professional difficulties, coping strategies, stress.

Introduction. The professional activity of physicians is associated with a high level of responsibility, constant emotional tension, and the need to make decisions under conditions of uncertainty. These factors often become sources of professional difficulties and stressful situations, which require well-developed psychological coping skills from medical professionals. The effectiveness of coping behavior directly affects not only the quality of professional performance but also the psychological well-being of the specialist. In the context of increasing demands on medical personnel and the growing prevalence of emotional burnout, the study of physicians' coping strategies becomes particularly relevant. An analysis of theoretical approaches to the problem of coping makes it possible to identify key mechanisms of adaptation and ways to optimize the professional behavior of medical workers.

Main Part. The profession of a physician is one of the most ancient and respected in the world. It represents the expression of an inherent human need to provide help to those who are suffering. Medical practice has been highly valued among all peoples and throughout all historical periods. It is by no means indifferent for society who chooses the medical profession and how physicians fulfill the moral obligations imposed by this profession. With the development of society, the position of the physician has changed, social prestige and professional authority necessary for carrying out medical practice have increased, and the requirements imposed on physicians and the healthcare system as a whole have also evolved [4].

The concept of “coping” originates from the English verb *to cope*, meaning “to manage” or “to overcome.” The term *coping* was first mentioned in psychological

literature in 1962 in the context of studying how children overcome developmental crises. R. Lazarus described coping as a strategy for dealing with anxiety and stress. Today, coping strategies are understood as consciously used methods by which individuals manage crisis situations and stressful states. In other words, coping strategies represent a set of diverse behavioral patterns and changing cognitive and behavioral efforts aimed at managing specific external or internal demands that are appraised as excessive or exceeding an individual's resources. In Russian psychological literature, this concept is translated as “adaptive (coping) behavior” or “psychological overcoming” [1].

Methodology. R. Lazarus and S. Folkman view coping as a dynamic interaction between the individual and the situation, encompassing cognitive, behavioral, and emotional efforts aimed at resolving external or internal conflicts. The authors emphasize attempts and efforts made by individuals, that is, the very process of coping with life difficulties. These efforts may be successful or may fail to produce the desired outcome. Nevertheless, the task of coping with negative life circumstances consists in either overcoming difficulties, reducing their negative consequences, avoiding them, or simply enduring their presence [2].

E. V. Bityutskaya notes that coping is flexible and goal-oriented, takes situational characteristics into account, whereas psychological defense is rigid and automated. Coping involves processes of reflection, situational analysis, and a high degree of differentiation, while defense mechanisms involve a greater number of unconscious reactions [2].

T. L. Kryukova emphasizes that, unlike psychological defense, coping behavior is a conscious strategy of action aimed at eliminating threats or obstacles, better adapting an individual to situational demands and helping either to transform the situation in accordance with one's intentions or to endure circumstances that cannot be changed [3].

Results. Researchers have found that physicians constantly face stress associated with workload, problematic patient behavior, and other external stressors. Among the most common sources of stress are a high volume of work, time constraints, and ongoing modernization within the system of professional activity.

Physicians are required not only to possess professional knowledge and skills necessary for effective practice but also to be capable of withstanding life difficulties and successfully overcoming various stressors. In psychological practice, the problem of coping with stress is one of the key issues. This is related both to the ability to independently identify optimal methods and strategies for overcoming traumatic situations and to the readiness to work with stress in the process of individual and group counseling. Consequently, the training of practicing psychologists in higher education institutions should include educational activities aimed at mastering coping techniques

[6]. This is associated both with the ability to independently find effective strategies for overcoming traumatic situations and with readiness to work with stress in professional activity.

Difficult situations occur both in everyday life and in professional activity; therefore, it is important for physicians to possess a diverse repertoire of coping behaviors and to use effective coping strategies to overcome stressful situations. When individuals encounter stressful situations, they employ coping behaviors; therefore, they must have an understanding of stress.

R. Lazarus and S. Folkman identify two styles of coping with stress:
– emotion-focused coping (management of negative emotions caused by a difficult situation);
– problem-focused coping (actions aimed at changing the situation) [1].

In her works, E. Z. Usmanova characterizes the above-mentioned coping styles as psychological pathways for overcoming stress.

Emotion-focused coping involves controlling emotional responses to stressful situations. Individuals may achieve this by changing their behavior (behavioral approach), which allows them to distract themselves from problems. Examples include alcohol or substance use, seeking emotional and social support from friends and relatives, engaging in sports, watching television, and similar activities. Individuals may also regulate their emotional responses to stress by changing their thoughts and reinterpreting the meaning of the situation for themselves (cognitive approach) [5].

Within the emotion-focused coping approach, the following strategies may be employed:

1. Viewing the situation from a distance or forming a positive perspective toward it. A variant of the *distancing* strategy is *cognitive redefinition*, in which individuals develop a new positive view of an adverse situation using such cognitive operations as generalization or comparison (e.g., “at least,” “it could have been worse”).

2. Reappraising the situation from a positive perspective (*positive reappraisal*), which involves analyzing a stressful situation in terms of its potential positive outcomes, for example, for personal development and growth.

Problem-focused coping aims to reduce the threat posed by a stressful situation or to expand an individual’s resources for dealing with it. In this case, the following strategies are used:

1. Comprehensive analysis of the stressful situation followed by active actions to resolve it (*planful problem-solving*);

2. Changing the situation through assertive behavior, which may include expressions of anger and risk-taking (*confronting coping*) [5].

In her conceptualization of stress, E. Z. Usmanova refers to the transactional model of stress as the most comprehensive definition. Stress is understood as an emotional state that always involves the interaction between the environment and the individual. Under stress, contradictions arise between situational demands and an individual's resources (biological, psychological, and social). Stress places strain on a person's biopsychosocial resources.

Conclusions. The conducted theoretical analysis demonstrated that the professional activity of physicians is accompanied by a high level of psycho-emotional tension, which requires the use of diverse coping strategies. Coping behavior serves as an important adaptive mechanism that ensures the maintenance of psychological balance and professional effectiveness under stressful conditions. The choice of coping strategies is determined by a combination of personal characteristics, professional experience, and features of the work environment.

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