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ЦИНИЗМ КАК ПРОЯВЛЕНИЕ ПРОФЕССИОНАЛЬНОЙ ДЕФОРМАЦИИ ЛИЧНОСТИ ВРАЧА

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Аннотация. Статья посвящена актуальной проблеме профессиональной деформации личности врача. В совокупности негативных характеристик эмоционального выгорания врачей одной из наиболее разрушительных является цинизм, проявляющийся в пренебрежительном отношении к культурным ценностям и общепринятым нормам морали и нравственности. Целью работы явилось осмысление природы социально-психологического явления «цинизм», установление факторов, способствующих его возникновению и преодолению. Материалами для исследования послужили научные статьи, опубликованные в научных базах данных: eLIBRARY.RU и cyberleninka.ru за 2003–2021 гг., а также работы русского писателя и врача В.В. Вересаева (1867–1945) и русского хирурга Н.И. Пирогова (1810–1881 гг.). В ходе исследования установлено, что цинизм, представляя собой ведущую и социально значимую проблему профессиональной деятельности врача, является приобретенной нежелательной личностной характеристикой. Авторами систематизированы факторы, влияющие на развитие цинизма, рассмотрены эффективные способы его профилактики и коррекции.

Ключевые слова: цинизм, профессиональная деформация, эмоциональное выгорание, врач

Original article

CYNICISM AS A MANIFESTATION OF PROFESSIONAL DEFORMATION OF THE DOCTOR'S PERSONALITY

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Abstract. The article is devoted to the actual problem of the professional deformation of the doctor's personality. In the aggregate of the negative characteristics of the emotional burnout of doctors, one of the most destructive is cynicism, manifested in a disdain for cultural values and generally accepted norms of morality and ethics. The aim of the work was to comprehend the nature of the socio-psychological phenomenon "cynicism", to establish the factors that contribute to its occurrence and overcoming. The materials that have been used for research were the scientific articles for 2003–2021 published in scientific databases such as eLIBRARY.RU and cyberleninka.ru, and the scientific works of the Russian writer and doctor V.V. Veresaev (1867–1945) and the Russian surgeon N.I. Pirogov (1810–1881). The study found that cynicism, which is a leading and socially significant problem

of a doctor's professional activity, is an acquired undesirable personality characteristic. The authors systematized the factors influencing the development of cynicism, considered effective ways of its prevention and correction.

Keywords: cynicism, professional deformation, burnout syndrome, doctor

Introduction. Currently, in the context of revolutionary socio-economic transformations in the field of healthcare, fundamentally changing the basic principles of a doctor's work, and the emergence of a skeptical attitude of the population towards medicine and healthcare, an increasing number of doctors in the process of medical activity are exposed to the negative impact of professional deformation, among the manifestations of which a special place belongs to cynicism.

The situation is aggravated by the crisis of medical humanities, which is a complex of scientific and educational concepts that ensure the integration of medical theory and practice into the context of society. It is associated with the intensive development of new biotechnologies and a much slower process of developing explanatory hypotheses, regulatory regulators and social predictions of their use in medical practice. Such a lag can be regarded as natural, if not for the rapid pace of technological progress, orders of magnitude higher than all previous changes in the technological field. The resulting contradiction lies in the fact that modern society, interested in the humanitarian examination of the application of new biomedical technologies, simultaneously inhibits its development. From a philosophical point of view, it can be explained by the substitution of values, which consists in giving priority to technologies and secondary to awareness and understanding of the results of their application. A serious danger in such a situation is contained in the change in approaches to the training of medical personnel who will work with new biomedical technologies. Digital medicine requires skills, the acquisition of which is "taken away" in universities from "non-core" (mainly humanitarian) disciplines. As a result, the tendency towards dehumanization of medical education is growing every year in Russian medical universities [1].

The demands of society for specialists in the medical field are more and more emphasized on the postulate that the moral culture of a doctor is a component of his professionalism. However, only one academic discipline in a medical university is directly devoted to this problem – bioethics, which proclaimed the formation of a doctor's moral culture as the goal of bioethical education [2].

There is no doubt that professional training, general culture, breadth of interests and civil position of each medical specialist determine the level of socio-economic and spiritual development of modern society. At the same time, the reform of higher medical education clearly revealed the previously existing conditional division of the "holistic educational process" into educational (main) and educational (secondary) subprocesses. And although the main criterion in the training of medical specialists is professional knowledge, however, the determining factors for the success of medical activity are

the formation, integrity of the personality and the moral character of the doctor [3].

The professional activity of medical specialists inevitably includes a moral dominant, which is realized in a deep understanding by "people in white coats" of their professional duty, in high professional and moral responsibility for the quality of the process and the results of their medical activities. Without a formed system of spiritual values, a person cannot work in medicine, since a doctor is not only a specialty, but also a vocation, the highest degree of service [4]. Society expects from a doctor not only professionalism, but also sensitivity, kindness, responsiveness, the ability to understand the feelings and experiences of patients, the ability to show concern, inspire hope, encourage people to fight the disease and come to the rescue at the moment when others need it. The development of all these qualities is a very important aspect of the formation of a doctor's personality [5].

The aim of the study was: comprehension of the nature of the socio-psychological phenomenon "cynicism", the establishment of factors contributing to its occurrence and overcoming.

Materials and methods: scientific publications of databases: eLIBRARY.RU and cyberleninka.ru. for 2003–2021, as well as the work of the Russian writer and doctor V.V. Veresaev (1867–1945) and the great Russian surgeon N.I. Pirogov (1810–1881).

The modern German philosopher Sloterdijk (born in 1947) sees the reasons for the emergence of cynicism in the failure of the Enlightenment. Its ideologists proclaimed the creation of a new enlightened society, where freedom, equality, brotherhood triumph, and a bourgeois society was created, with a cult of success, money, wealth, benefit, consumption. Therefore, Sloterdijk defines cynicism as "enlightened false consciousness" [6]. A.V. Gurov and P.I. Grigorenko emphasize the split of consciousness as the attributive properties of cynicism. "Cynicism", they write, "is a phenomenon of a split consciousness, a consciousness that has accepted the Enlightenment and humanistic ideas, but does not want to follow them, based on its own consumer considerations. Cynicism is a phenomenon of a new actual consciousness generated by a split" [7]. A.A. Goloktionova, N.K. Kuznetsov and N.A. Kudryavtsev see cynicism as a phenomenon of a glamorous civilization. "Let us take the liberty of suggesting", they write, "that the modern world is literally engulfed in cynicism. Now we are a glamorous civilization, enslaved by everyday life and busy with imitation of the present, claiming originality and novelty" [8]. In conditions of pluralism of value foundations, the individual faces the choice of one of the many life strategies and involuntarily turns into

someone who, rather, tends to reject the attitudes proposed by society, treating himself and others pessimistically, showing disinterest in any changes, otherwise in words, he turns into a cynic who evaluates everything from the point of view of its usefulness for himself. As a consequence, modern moral and ethical discourse has features of inconsistency based on emotivism and subjectivity, due to which moral judgments serve the egoistic preferences of the individual [9].

With an increase in professional experience, almost any person acquires character traits that are new for him and specific to the profession. In the process of performing labor activity, there is an accentuation of personality traits necessary in a certain profession, the profile of a professional's personality begins to distort, being exposed to stereotypical ways of professional behavior [10]. The process of mastering a specific professional activity by a person as a process of inclusion in the professional sphere, and, as a consequence, the acquisition of the necessary professional qualities is the essence of individual professionalization [11]. So, doctors over time acquire personality traits that distinguish them from people of other specialties. Obviously, the skills of a surgeon, a general practitioner, a gynecologist, or an administrative doctor must differ. But a person himself is far from always able to orient himself and make the right choice of specialty. This is often the cause of medical errors, burnout syndrome and, as a result, cynicism, which ultimately leads to patient dissatisfaction with the quality of medical care [11].

Burnout syndrome contributes to professional deformation, when defense mechanisms weaken so much that the employee cannot resist destructive professional factors and the process of personality destruction begins. Emotional burnout of doctors is characterized by common features of this syndrome, which can include emotional exhaustion (a feeling of emptiness, emotional saturation, physical and mental fatigue), depersonalization of the personality and a decrease in personal achievements (decreased self-esteem, increased self-abasement, feelings of failure and constant guilt) [12].

The phenomenon of professional deformation (from Lat. *Deformatio* – distortion) is defined as psychological disorientation of the personality, which is formed under the influence or pressure of external and internal factors, conditions of professional activity, leading to the formation of a specifically professional type of personality [7]. At the same time, there is a point of view that says that professional deformation is one of the forms of professional adaptation, which is a process of getting used to the performance of work duties that a person faces in the workplace. This is a dynamic process of destruction of stereotypes of activity with the accompanying formation of new beliefs, abilities and skills. As a result, there is a change not only in the level of professional competence from a specialist to a professional, but also a change in personality under the influence of this process [13].

Professional deformation is characterized by positive and negative manifestations. Positive characteristics include: responsibility, composure, organization, attentiveness, improvement personal culture, discipline.

Domestic philosopher D.G. Trunov (1965–2017) highlighted the main negative manifestations of professional deformation encountered by specialists in "helping professions" [5]:

- 1) projecting negative issues on yourself and your loved ones;
- 2) intrusive diagnostics of oneself and others ("labeling" and interpretation);
- 3) consulting others unnecessarily;
- 4) acceptance of the role of a teacher, paternalism in communication;
- 5) excessive self-control;
- 6) hyperreflexia and work on oneself;
- 7) loss of spontaneity;
- 8) rationalizing, stereotyping and reducing sensitivity to living experience;
- 9) satiety with communication;
- 10) emotional coldness;
- 11) cynicism.

The essence of cynicism is multidimensional, in connection with which the attention of researchers is focused on various aspects of its manifestation. In the aesthetic sphere, cynicism manifests itself as a kind of excessiveness, on the one hand, of comic artistic methods (irony, grotesque, sarcasm), especially characteristic of satire, pamphlet or caricature; on the other hand, as excessive naturalism (up to ugliness) in the depiction of social phenomena. In the ethical sphere, cynicism is a complex of stable ideas of the individual (worldview), which is characterized by the desacralization of certain spheres of human culture and of human existence in the world in general: humanity as a whole, the denial of spiritual values, morality and their use to manipulate people. In this sense, pessimism, nihilism, misanthropy, pragmatism (in its vulgar interpretation) are positioned as special cases of worldview cynicism [14].

According to the definition of the modern psychologist N.A. Vedmesha, "cynicism" is understood as behavior that manifests itself in an openly negative, contemptuous, nihilistic and dismissive attitude towards socially accepted foundations, cultural values, generally accepted norms of morality and ethics, notions of decency, official dogmas of the reigning ideology, and cynical behavior is expressed in demonstrative disregard for separate moral values. For the first time in vivid artistic images, medical cynicism was described by V.V. Veresaev in the book "Notes of a Doctor": "Before me more and more medicine was unfolding – a weak, powerless, mistaken, undertaking to treat diseases that he cannot determine, which he cannot cure in advance" [15, p. 7] and "... I more and more I began to get used to the suffering of patients ... this addiction gives me the opportunity to live and breathe, not to be constantly under the impression of the gloomy and heavy, but such an addiction of the doctor at the same

time outrages and frightens me, especially when I see him facing himself ..." [15, p. 89].

A prolonged stressful situation at work leads to professional cynicism: high workload, lack of support from colleagues and superiors, insufficient work assessment, lack of days off. When working with "severe patients": cancer patients, mental patients, elderly people, children from socially disadvantaged families, doctors may develop professional cynicism as a defense that saves life resources. This negatively affects the performance of professional duties. Getting used to the daily atmosphere of suffering, indifference to patients, skepticism towards science – these are the forms of professional cynicism.

The main manifestations of professional cynicism in medicine are:

- skepticism, critical attitude to the possibilities of medical science and their professional capabilities;
- depreciation of the value of a person on a "natural" basis;
- indifference and indifference to patients.

There are objective reasons for the formation of professional cynicism. It is the daily atmosphere of suffering and getting used to it; objective limited knowledge and skills of the doctor; forced trampling on elementary humanity (violence in psychiatry, overcoming bashfulness, experiments, autopsies); the ingratitude of patients, their injustice and even hatred in some cases. But knowing and experiencing all this on his own, it is extremely dangerous for a doctor to choose the path of "accepting" cynicism as a "way out" from this harsh reality.

Since a person is not biologically programmed for cynicism, he is morally free to choose good and "smart" suffering. And despite the fact that the activity of a doctor is full of difficult situations, it is nevertheless accompanied by satisfaction and joy. The only possible way to cope with the complexity of medical activity is to understand and accept all professional difficulties, to maintain sympathy, empathy, mercy through comprehension of the dialectic of opposition and unity of "sorrow and joy" [9].

The first attempt in the history of medicine to overcome cynicism in the work of a doctor is the Hippocratic Oath. One of the 10 principles of the oath, which says "I will conduct my life and my art purely and blamelessly" [6], is a statement underlying the high morality of a doctor. With this morality, according to Kant (1724–1804), cannot be due to either calculation or profit. Moral behavior, the philosopher argues, cannot have external motives at all. And the only internal motive for such behavior is only duty [1].

In the medical literature, a number of virtues are highlighted that are necessary for medical practice. All virtues are classified into four groups: virtues of character (courage, mercy, reliability, honesty, empathy); virtues of competence (complete possession and understanding of medical knowledge and methods, communication skills); virtues of conscience (self-giving, self-criticism, responsibility, self-development); general moral qualities (high moral values, respect for the patient, colleagues,

modesty, benevolence). All of the above virtues are important for other professions, but in medical practice their significance is enhanced to a greater extent by the specifics of the activity itself, the highest value of which is human life and health.

The fundamental virtues of a doctor are such personal qualities, without which it is difficult to imagine medical activity, such as courage, determination, self-control, patience, discipline. Courage, as a cross between fear and courage, equates to the core that allows the doctor to make difficult decisions at crucial moments. Without this personality trait, doctors would not be able to diagnose seriously ill patients and carry out proper treatment, and drugs that are of paramount importance in medical practice would simply not be found. Along with courage in medical practice, decisiveness is also needed as the ability to mobilize strength and skills for the successful implementation of the necessary professional actions to assist the patient in critical and non-standard situations. A very important quality is self-control as the ability to control the emotional and physical state in such a way that negative emotions, thoughts and conditions do not interfere with working with patients in critical and emotional situations. Of no small importance is patience, which consists in the inner overcoming of difficulties, painful mental states that often arise in medical practice, prompting to perform their professional duties despite unfavorable events and circumstances. Discipline is a character trait or tendency of a person to follow the rules of work and norms of behavior. It is indispensable in medical practice, and is developed by the collective experience and actions of the medical community for optimal patient benefit.

The above personal qualities are most in demand when performing medical duties in especially difficult conditions: unsatisfactory material support, lack of necessary medicines and medical equipment, remuneration for work inappropriate to the costs of mental and physical forces, high loads, lack of time for rest, inability to regain strength, threat to life and health in conditions of epidemics, wars, natural and man-made disasters [16]. These are circumstances that increase the risk of cynicism, the opposite of which is altruism. This most important emotional and moral quality of a doctor is disinterested concern for the well-being of others, a willingness to help a person at the cost of giving up his own benefits and sometimes even risking his own life. Altruism is closely related to such moral qualities as heroism and mercy. Along with the above, medical practice requires exceptional tact, which consists in sociability, tact and delicacy.

Essentially important (even mandatory) for the doctor N.I. Pirogov considered a sincere solution to the main question of life – "to which of the three categories he ranks himself, what he believes and what he recognizes". Moreover, it is necessary to do this with maximum honesty, first of all in front of oneself: "You do not have to be timid in front of yourself, wag your tail and move back, and answer yourself ambiguously" [17, p. 153]. And the main thing here is to frankly answer the question of

whether he recognizes the existence of God and whether he believes in God: and physical" [17, pp. 153–154]. Spiritual and moral education of medical workers, achieving the unity of their values with patients will become the basis for the successful formation in the future of a new, partner model of moral relations in medicine, built on mutual understanding, respect and trust. And the spiritual and moral education of the population, carried out at all levels of the education system, will contribute to the development of these relations, acting as an important factor in the ethical regulation of the entire set of medical practices [18].

Spirituality comes to a person through literature, art, folk wisdom, customs, cultural traditions, especially families, science and education. A spiritually rich person always stands out even in everyday life. Striving for spiritual values helps any person to easily overcome life difficulties and obstacles, to live in harmony with society and nature. The moral and social maturity of a person is manifested in his education and culture, honesty and decency, indifference to the pain and suffering of others. These higher human qualities are extremely important for people who have chosen the profession of a doctor [12].

Spiritual and moral education of future doctors is an organizational and purposeful activity of teachers, parents and clergy in the formation of the highest moral values among students of medical universities. Spiritual and moral education is understood as the process of promoting the spiritual and moral formation of a person, the formation of: moral feelings (conscience, duty, faith, responsibility, citizenship, patriotism); moral character (patience, mercy); moral position (the ability to distinguish between good and evil, the manifestation of selfless love, readiness to overcome life's trials); moral behavior (readiness to serve people and the fatherland, manifestation of spiritual prudence) [19, 20].

Conclusions. So, in the conditions of modern society, the interests of the subject are biased towards private goals and needs. The subject, as a rule, does not want to sacrifice his own well-being for the sake of sublime goal-setting. He prefers to satisfy his own needs and his own desires, turning his interests into the sphere of material and personal.

Cynicism in the postmodern era takes on the form of a diffuse phenomenon that is significantly different from its classical prototype and therefore acquires new characteristics that require consideration and analytical description. As a type of reflective worldview, cynicism affects the deepest layers of the human psyche and the foundations of society. In this regard, there is a need for a philosophical analysis of the named type of worldview and related changes related to the social sphere, its functioning as a field of manifestation of the subject – the bearer of a cynical way of thinking.

Receiving the title of doctor and starting medical practice, doctors swear to devote all moral and physical strength, knowledge and experience to the protection of human health, to preserve and develop the traditions

of domestic medicine, to be guided in their activities by moral principles. And I would like to think that for young doctors these will not be just words. The history of Russian medicine knows many examples of selfless service to their cause and the interests of society. Life is changing, new technologies and methods of examination and treatment come to medicine, but humanism and high moral and moral qualities of the doctor's personality must remain unshakable. So that the prestige of the medical profession in society does not fall, this baton of humanism and high moral qualities should be taken up by young people. Overcoming the negative impact of high psycho-emotional stress and the closely related risk of emotional burnout is possible only by developing the best human qualities.

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