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THE EFFECTIVENESS OF THE SELF-CONTROL METHOD (COPING STRATEGY) IN CASE OF EMOTIONAL BURNOUT OF ONCOLOGICAL NURSES

Abstract

Nurses working in the oncology field face unique challenges and pressures in their profession on a daily basis. Due to high demands, fear of mistakes, emotional overload and frequent contact with traumatic events, it is especially important for them to use effective coping strategies, in other words, self-control methods. The purpose of the study is to analyze the characteristics of different methods of self-control (coping strategies), identify the level of emotional burnout in cancer nurses and implement the author's training program. The main area of research is the evaluation of the effectiveness of coping strategies used by nurses of cancer centers and departments. This includes using a questionnaire to identify which coping strategies they most often use in COMECON.

The article identifies and describes 16 effective self-coping techniques that can help nurses reduce stress and burnout. These include seeking emotional support, taking care of your health, physical activity and relaxation. As an empirical study, the authors used the questionnaire "Professional burnout", adapted by N. Vodopyanova and E. Starchenkova, which allowed to determine the level of emotional burnout in nurses of cancer centers. The developed training program helped to increase the degree of emotional stability among nurses from the experimental group, which, in turn, demonstrates its effectiveness in preventing emotional burnout. Main results show that the use of effective coping strategies significantly reduces burnout and improves the quality of life of nurses. The contribution of this study to the field of psychology and medicine is the development of practical recommendations for improving the psycho-emotional state of medical workers. The practical significance of the results of the work lies in the possibility of introducing the proposed strategies into the daily practice of medical institutions.

Key words: self-control method, coping strategies, emotional burnout, cancer nurses, health workers, emotional stability.

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ОНКОЛОГИЯЛЫҚ БЕЙІНДЕГІ МЕЙІРБИКЕЛЕРДЕГІ ЭМОЦИОНАЛДЫ КҮЙІНУ КЕЗІНДЕ ӨЗІН-ӨЗІ ИГЕРУ ӘДІСІНІҢ (КОПИНГ-СТРАТЕГИЯ) ТИІМДІЛІГІ

Андатпа

Онкологиялық салада жұмыс істейтін медбикелер күнделікті өз кәсібінде ерекше қиындықтар мен ауыртпалықтарға тап болады. Жоғары талаптарға, қателіктерден қорқуға, эмоционалды шамадан тыс жүктемеге және травматикалық оқиғалармен жиі байланыста

болғандықтан, тиімді копинг-стратегияларды, басқаша айтқанда, өзін-өзі басқару әдістерін қолдану өте маңызды. Зерттеудің мақсаты - өзін-өзі басқарудың әртүрлі әдістерінің (копинг-стратегия) сипаттамаларын талдау, онкологиялық профильдегі медбикелердің күйіну деңгейін анықтау және авторлық тренинг бағдарламасын жүзеге асыру. Зерттеудің негізгі бағыты онкологиялық орталықтар мен бөлімшелердің медбикелері қолданатын күрес стратегияларының тиімділігін бағалау болып табылады. Бұл олардың эмоционалды күйіну жағдайында қандай копингтік стратегияларын жиі қолданатынын анықтау үшін сауалнаманы пайдалануды қамтиды.

Мақалада медбикелерге стресс пен шаршау деңгейін төмендетуге көмектесетін өзін-өзі басқарудың 16 тиімді әдісі көрсетілген және сипатталған. Оларға эмоционалды қолдау іздеу, денсаулыққа қамқорлық жасау, физикалық белсенділік және релаксация кіреді. Эмпирикалық зерттеу ретінде авторлар Н. Водопьянова мен Е. Старченкова бейімдеген «Кәсіби күйіну» сауалнамасын қолданды, бұл онкологиялық орталықтардың медбикелеріндегі эмоционалды күйіну деңгейін анықтауға мүмкіндік берді. Өзірленген тренинг бағдарламасы эксперименттік топтағы медбикелер арасында эмоционалды тұрақтылық дәрежесін арттыруға көмектесті, бұл, өз кезегінде, оның күйіп қалудың алдын алудағы тиімділігін көрсетеді. Эмоционалды күйіну медицина қызметкерлерінің, әсіресе онкологиялық мекемелерде жұмыс істейтін медбикелердің кәсіби қызметіндегі маңызды мәселелердің бірі болып табылады. Ауыр науқастармен үнемі байланыста болу, жауапкершіліктің жоғары деңгейі және психологиялық күйзеліс елеулі стресстік жағдайларға әкеледі.

Бұл факторлар эмоционалды шаршаудың даму қаупін арттырады, бұл көрсетілетін медициналық көмектің сапасын айтарлықтай төмендетуі, кәсіби қанағаттануды нашарлатуы және кәсіби деформацияға әкелуі мүмкін. Осыған байланысты өзін-өзі басқарудың тиімді әдістерін (төбелесу стратегияларын) зерделеу және енгізу медбикелердің кәсіби дамуының және эмоционалды күйіуді алдын алудың маңызды аспектісі болып табылады.

Зерттеудің өзектілігі сонымен қатар нақты медициналық тәжірибеде қолданылуы мүмкін күйіді азайтудың қолжетімді және ғылыми негізделген тәсілдерін табу қажеттілігімен анықталады. Тиімді күресу стратегиялары медбикелердің эмоционалды жағдайын жақсартып қана қоймайды, сонымен қатар онкологиялық бөлімшелердің жалпы тұрақтылығы мен тиімділігін арттырады

Түйін сөздер: өзін-өзі басқару әдісі, копингтік стратегиялары, эмоционалды күйіну, онкологиялық медбикелер, медицина қызметкерлері, эмоционалды тұрақтылық.

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ЭФФЕКТИВНОСТЬ МЕТОДА САМОСОВЛАДАНИЯ (КОПИНГ-СТРАТЕГИИ) ПРИ ЭМОЦИОНАЛЬНОМ ВЫГОРАНИИ У МЕДИЦИНСКИХ СЕСТЕР ОНКОЛОГИЧЕСКОГО ПРОФИЛЯ

Аннотация

Медсестры, работающие в онкологической области, ежедневно сталкиваются с уникальными вызовами и нагрузками в своей профессии. В связи с высокими требованиями, страхом перед ошибками, эмоциональным перегрузом и частым контактом с травматическими

событиями, им особенно важно пользоваться эффективными копинг-стратегиями, иными словами, методами самосовладания. Цель исследования заключается в анализе характеристик разных методов самосовладания (копинг-стратегий), выявлении уровня эмоционального выгорания у медсестер онкологического профиля и реализации авторской тренинговой программы. Главным направлением исследования является оценка эффективности копинг-стратегий, применяемых медсестрами онкологических центров и отделений. Это включает использование опросника, для выявления того, какие копинг-стратегии они чаще всего используют при СЭВ.

В статье выделены и описаны 16 эффективных методов самосовладания, помогающие медсестрам уменьшить уровень стресса и эмоционального выгорания. Они включают поиск эмоциональной поддержки, проявление заботы о своем здоровье, физическую активность и релаксацию. В качестве эмпирического исследования, авторами был применен опросник «Профессиональное выгорание», адаптированный Н. Водопьяновой и Е. Старченковой который позволил определить уровень эмоционального выгорания у медсестер онкологических центров. Разработанная тренинговая программа помогла повысить степень эмоциональной устойчивости среди медсестер из экспериментальной группы, что, в свою очередь, демонстрирует ее эффективность в предотвращении эмоционального выгорания. Эмоциональное выгорание является одной из наиболее значимых проблем в профессиональной деятельности медицинских работников, особенно медсестер, работающих в онкологических учреждениях. Постоянный контакт с тяжелобольными пациентами, высокий уровень ответственности и психологическая нагрузка приводят к значительным стрессовым ситуациям.

Эти факторы увеличивают риск развития эмоционального выгорания, что может существенно снижать качество оказываемой медицинской помощи, ухудшать профессиональную удовлетворенность и приводить к профессиональной деформации. В этой связи изучение и внедрение эффективных методов самосовладания (копинг-стратегий) становится важным аспектом профессионального развития и профилактики эмоционального выгорания у медсестер.

Актуальность исследования также определяется необходимостью поиска доступных и научно обоснованных подходов к снижению уровня выгорания, которые могут быть использованы в условиях реальной медицинской практики. Эффективные копинг-стратегии способны не только улучшить эмоциональное состояние медицинских сестер, но и повысить общую стабильность и эффективность работы онкологических отделений

Ключевые слова: метод самосовладания, копинг-стратегии, эмоциональное выгорание (СЭВ), медсестры онкологического профиля, медработники, эмоциональная устойчивость.

Introduction

In modern living conditions, people often find themselves in stressful situations and experience professional crises. Certain specialists are particularly susceptible to high levels of stress and anxiety due to the nature of their professional activities. For example, healthcare workers face a high risk of developing emotional burnout syndrome, which is caused by the heavy responsibility for patients' lives, chronic fatigue, and a lack of opportunities to relax and recover.

When speaking about healthcare workers, it is most often oncologists and oncology nurses who face patient deaths due to illness. Since cancer is difficult to completely cure, and some of its types are not treatable at all, patients are forced to live the remainder of their lives contemplating imminent death. As for the nurses, empathizing with patients and regretting their inability to help them, they deplete their emotional resources. Moreover, hearing the sorrowful and sometimes accusatory remarks of the patient's relatives, the nurses sink even deeper into a state of crisis and demotivation in their work in this field.

To prevent emotional burnout, specialists are advised to use various coping strategies, or, in other words, methods of self-regulation. These refer to ways of coping with stress that manifest in a person's thoughts, feelings, and actions. There are many coping methods that healthcare workers can

apply. However, it is important to understand the characteristics of these coping strategies and their impact on emotional burnout among nurses before recommending and actively using them.

Thus, the purpose of this study is to analyze the characteristics of various methods of coping (coping strategies), identify the level of emotional burnout among oncology nurses, and test the developed training program.

The research tasks are as follows:

1. To review previous studies on coping methods in the context of medical practice;
2. To analyze effective coping strategies suitable for oncology nurses;
3. To identify the benefits of these coping strategies;
4. To diagnose the state of emotional burnout among oncology nurses;
5. To develop and implement a training program for enhancing emotional resilience and stress tolerance in nurses.

Literature Review

O.I. Komolkina analyzed the specific characteristics of emotional burnout among nurses working in ward and procedural settings, using V.V. Boyko's method of studying emotional burnout. In her study, Komolkina demonstrated significant differences in the emotional burnout process among different categories of nurses (Komolkina, 2016: 14).

I.A. Vasilieva and her colleagues studied the issue of burnout syndrome in conjunction with dominant coping strategies and the severity of alexithymia among medical workers in oncology. The researchers conducted a study among doctors and nurses from the "Nadezhda" Oncology Center, which revealed a correlation between alexithymia levels and the severity of burnout syndrome (EBS) in medical staff. Their results showed a positive correlation between alexithymia and burnout indicators (Vasilieva, 2016: 4).

A.V. Semenova, in her thesis, studied potential measures for preventing professional burnout among medical staff. She presented a training program aimed at reducing the risk of burnout, which included various coping strategies. Semenova emphasized the importance of preventing professional burnout, noting that its development can lead to negative consequences such as decreased quality of professional performance and impaired psychological contact with patients (Semenova, 2019: 3).

P.A. Kislyakov and his co-authors examined the resilience and coping strategies used by Russian medical workers to combat emotional burnout during the fourth wave of the COVID-19 pandemic. Their research identified a negative correlation between resilience and anxiety levels, along with burnout during that period. Constructive coping strategies were most commonly practiced by medical workers, helping them avoid burnout, while non-constructive strategies led to increased burnout levels (Kislyakov, 2022: 227).

Internationally, M.N. Litvinenko studied the role of coping strategies in preventing burnout among healthcare personnel. Her research focused on the manifestation of burnout syndrome and the relationship between the severity of burnout and the coping strategies applied by healthcare workers. The study found that healthcare professionals with high levels of burnout predominantly employed unproductive coping strategies, such as confrontation and acceptance of responsibility, while rarely using productive strategies like distancing, problem-solving planning, and seeking social support (Litvinenko, 2021b: 53).

M.A. Al-Ruzzieh and O. Ayaad analyzed the relationship between workplace stress, coping strategies, and quality of life among oncology nurses in a specialized cancer center. The results of the empirical research showed that oncology nurses experience a moderate level of work-related stress, as well as moderate scores on coping strategies and health-related quality of life. Work stress indicators negatively correlated with the latter factor, indicating that an increase in work stressors reduces the quality of life for oncology nurses. At the same time, the participants most frequently resorted to coping methods such as seeking social support and problem-solving, balancing between emotion-focused and problem-focused coping strategies. In conclusion, the researchers emphasized the need for proper training in effective coping strategies (Al-Ruzzieh, 2021: 3002).

Elena Ortega-Campos and her colleagues analyzed the levels and prevalence of emotional burnout, psychological fatigue, and low compassion satisfaction among oncology nurses, as well as the ways to address them. The researchers found that nurses in oncology departments have the highest levels of emotional burnout and compassion fatigue. They note that increases in cases of emotional burnout and compassion fatigue among nursing staff can be avoided through proper assessment and the development of training programs (Ortega-Campos, 2019: 1).

Materials and Methods

To achieve the objectives, the following methods were used:

1. Theoretical analysis of the literature on the research problem;
2. Comparative analysis of coping strategies recommended for healthcare workers;
3. The "Professional Burnout" questionnaire in Russian by N. Vodopyanova and E. Starchenkova (the authors of the original version are C. Maslach and S. Jackson (Maslach, 2001));
4. Methods of statistical data processing (Fisher's criterion and Mann–Whitney U test).

The survey and formative experiment involved 52 nurses from oncology centers, including the "Emirmed" Scientific Research Medical Institute and the Raevsky Clinic in Almaty.

Results and Discussion

Theoretical Research

Let us begin by defining the term “coping strategy” (self-control method). According to the definition provided by psychologist A.A. Zyuzkina, coping strategies are conscious techniques used by individuals to cope with difficulties and crisis situations (Zyuzkina, 2022: 1). In our case, these are methods of dealing with stress and psychological crises.

“Coping” generally refers to the variable emotional, behavioral, and cognitive efforts aimed at managing specific external and internal stressors (Mikhaylova, 2018: 258).

To resolve crisis or stressful situations, individuals develop a personal way of behavior aimed at reducing stress, called coping behavior. Coping behavior, as a type of social behavior, is characterized by situational, personal, and resource components (Bright, 2003: 196).

There are adaptive, relatively adaptive, and non-adaptive behavioral strategies. These can also be categorized as problem-solving strategies, strategies for seeking social support, and strategies for avoiding problems and engaging in non-adaptive behavior (Zhuravleva, 2011: 154).

In a broad sense, self-control methods involve a set of strategies and practices aimed at managing emotions and stress. This method helps nurses cope with emotional burnout and restore their mental and emotional resilience. Techniques such as deep breathing, meditation, yoga, psychotherapy, and others are part of self-control methods designed to help nurses recover, reduce stress levels, and improve their quality of life.

Considering the importance of practical implementation of self-control methods in combating emotional burnout, it is crucial to understand the nature of this phenomenon. Emotional burnout syndrome is a state of mental and physical exhaustion that occurs as a result of prolonged exposure to chronic stress in work environments.

According to O.I. Babich, EBS is a specific occupational disease common among people who work with other people, such as teachers (Babich, 2007: 3). In other words, individuals whose work involves interpersonal communication and interaction, including teachers, doctors, nurses, psychologists, psychotherapists, managers, and others, are more prone to EBS.

This method brings many benefits to oncology nurses. First, it helps them effectively manage emotional stress and improve psychological stability. Second, the self-control method enhances emotional well-being, leading to better relationships with patients and improved quality of medical care. Additionally, it promotes professional growth by increasing self-efficacy and confidence in nurses.

There are various classifications of self-control methods or coping strategies. One widely known classification by E. Heim, who identifies three types of coping strategies based on their adaptability:

- Adaptive

- Relatively adaptive
- Non-adaptive (Arestova, 2020: 76)

Moreover, Heim's classification also categorizes coping strategies by the type of mental activity involved:

- Emotional
- Cognitive
- Behavioral (Hachaturova, 2013: 162)

I.A. Sych studied the role of non-constructive coping strategies in the development of emotional burnout among healthcare workers. Sych found that the use of non-constructive coping strategies (e.g., avoidance, distancing, and self-control) led to high levels of burnout, accompanied by exhaustion and resistance. In contrast, constructive strategies (e.g., seeking support, positive re-evaluation, and problem-solving planning) were prevalent among individuals with lower levels of burnout (Sych, 2018: 603).

Oncology nurses, like other healthcare workers, have various strategies for coping with the stress and demands of their profession. Some of the most effective self-control methods for oncology nurses, considering the specific challenges of working with cancer patients, include the following:

1. *Planning and Organization.* Developing a work plan and organizing time effectively helps nurses manage their schedules more efficiently. This includes task lists, prioritizing work, and allocating time based on task importance and urgency. Time management skills are essential for nurses.

2. *Setting Healthy Boundaries.* It is important for nurses to learn to say "no" and establish boundaries with colleagues and patients. Oncology nurses need to determine which requests and demands can be reasonably met and which should be declined to avoid excessive workload and dissatisfaction.

3. *Emotional Support.* It is important for nurses to have a place where they can express their emotions and receive emotional support. This can include care from family, conversations with colleagues, participation in group therapy sessions, or seeking external support from a psychologist or counselor. Engaging in professional communities where they can communicate with people facing similar challenges can reduce anxiety and stress levels.

4. *Understanding and Empathy.* Working in oncology is emotionally demanding, so nurses must develop skills in understanding and empathy. While it is important for nurses to be empathetic towards patients, they also need to conserve their emotional resources and not become overly immersed in others' problems.

5. *Self-Care.* Oncology nurses must pay close attention to their physical and emotional well-being. A healthy diet, proper sleep, regular physical activity, and time for relaxation are essential to reduce stress and prevent burnout.

6. *Developing Communication Skills.* In the healthcare profession, especially in oncology, it is important for nurses to exhibit high levels of communication and persuasion skills. Interacting with cancer patients requires delicacy and sensitivity in communication. Nurses must learn to listen to and understand patients, clearly explain complex information, and provide emotional support. Additionally, communication skills help strengthen interpersonal relationships with colleagues.

7. *Continuous Learning and Improvement.* Oncology nurses should strive for continuous professional growth and development. Participating in seminars, conferences, and educational programs allows them to enhance their knowledge and skills in patient care. With updated knowledge and skills, nurses feel more confident and competent in their work.

8. *Seeking Support and Collaboration with Colleagues.* Teamwork can serve as a significant source of support for oncology nurses. Sharing experiences, solving problems together, and receiving support from colleagues can help reduce stress and improve the work environment. Developing collaborative skills and maintaining an open line of communication is essential.

9. *Meditation and Relaxation.* Meditation and relaxation techniques help oncology nurses reduce stress, improve concentration, and promote positive thinking. Regular meditation sessions can help nurses disconnect from problems, improve their mood, and find inner harmony. Techniques such as deep breathing, yoga, and massage can also be used to relieve tension and manage stress effectively.

10. *Maintaining Work-Life Balance.* Balancing work and personal life are crucial for self-control. Nurses should make time for themselves, their loved ones, and hobbies that help them relax and recharge. Engaging in cultural activities and hobbies brings joy and mental refreshment, allowing healthcare workers to disconnect from their daily professional duties.

11. *Avoiding Harmful Habits.* Smoking and alcohol consumption are the most common harmful habits that can lead to addiction and negatively affect physical and mental health. In fact, people become more irritable after smoking, even though they try to relieve stress and relax through it. This is because tobacco smoke and nicotine do not relieve nerve tension, but rather "slow down" critical processes in the central nervous system. Medical staff should not abuse tobacco products, as nicotine negatively affects intelligence and productivity, manifesting in memory deterioration, inability to solve mental tasks, and impaired logical thinking. They should also avoid excessive alcohol consumption, as it negatively impacts cognitive processes and behavior, exacerbating psychological and personal problems.

12. *Physical Activity.* Regular exercise and physical activity can reduce stress and anxiety levels. Physical training enhances stamina, improves mood, and strengthens the immune system. Oncology nurses should prioritize their physical health to maintain the necessary resources to combat emotional burnout and fulfill their professional responsibilities.

13. *Practicing Positive Thinking.* Negative thoughts and expectations can worsen stress and negative emotional states. Healthcare workers can benefit from practicing positive thinking, identifying the positive aspects of their work, finding reasons for gratitude and joy, and fostering a sense of optimism. Creating a supportive psychological environment is key.

14. *Creating a Supportive Environment.* A supportive workplace environment where nurses can openly discuss their emotions and stressors is important. This can be achieved through debriefing sessions, regular communication, and joint problem-solving related to patient care and staff relationships. Given the complexities of oncology work, nurses must find their own coping strategies that match their individual needs and help them effectively handle the challenges they face daily.

15. *Taking Responsibility for One's Psychological State.* It is important for nurses to recognize and accept their problems and seek solutions. Everyone is responsible for their own life and the difficulties they face. Understanding this, nurses should work on developing emotional and stress resilience to ensure psychological well-being and prevent emotional burnout.

16. *Problem Solving.* Once the problem—emotional or professional burnout—has been identified, it is advisable for nurses to analyze ways to address it and take action. This could involve participating in training programs on stress management, emotional control, and applying productive coping strategies.

The above-mentioned coping methods and recommendations for successfully combating emotional burnout are illustrated in Figure 1.



Figure 1 - Coping Strategies for Emotional Burnout in Oncology Nurses

By analyzing the benefits of these coping strategies, the following positive outcomes can be highlighted:

1. *Developing Emotional Resilience.* Healthcare workers benefit from developing skills for managing emotions and maintaining composure. This can be achieved through practices such as meditation and relaxation, as previously mentioned. Attending psychological training for stress management can also be helpful.

2. *Emotional Unloading.* Nurses must be able to express their emotions constructively and find support from colleagues. Empathy and understanding from colleagues, family, and friends can help oncology nurses feel better, calmer, and find the strength to continue their professional duties.

3. *Emotional Management.* Oncology nurses are frequently exposed to patients' pain and suffering. Experiencing compassion fatigue, nurses must learn to conserve their emotional resources and approach others' problems more easily, while maintaining professionalism and a friendly attitude toward patients.

4. *Reducing Emotional Burnout.* Regularly practicing self-control methods helps nurses cope with high levels of stress and emotional tension, thereby reducing the risk of developing burnout.

5. *Improving Work Quality.* Nurses who pay attention to their psychological well-being and apply adaptive coping strategies are better equipped to meet the demands of their profession. This leads to better patient care and enhanced job performance.

6. *Strengthening Physical Health and Immunity.* Maintaining a healthy lifestyle, including proper nutrition, sufficient sleep, developing good habits, and maintaining optimism, positively impacts a nurse's overall health, allowing them to restore energy and remain productive.

7. *Personal and Professional Growth.* Developing flexible skills, such as time management, open-mindedness, communication, collaboration, and problem-solving, enhances personal abilities and increases the chances of career advancement.

8. *Life Satisfaction.* Nurses who make time for personal life, family, and rest report higher levels of life satisfaction. Engaging in hobbies and spending time with loved ones help healthcare workers relax and refresh themselves before the workday.

Empirical research

We used the “Professional Burnout” questionnaire, adapted by N. Vodopyanova and E. Starchenkova based on the model of K. Maslach and S. Jackson, both before and after the intervention in our experiment. After implementing the training program in the experimental group, the following results were obtained (as shown in Table 1).

Table 1 – Fisher’s Angular Transformation Criterion Calculation Results after the Intervention

Groups	"Effect present": Emotional stability formed	"No effect": Emotional stability not formed	Totals
	φ^*_{emp}	φ^*_{emp}	
Experimental group	18 (69.2%)	8 (30.8%)	26 (100%)
Control group	9 (34.6%)	17 (65.4%)	26 (100%)

Based on these calculations, we found the empirical coefficient for Fisher’s criterion (φ^*_{emp}), which is plotted on the significance axis.

Significance axis:

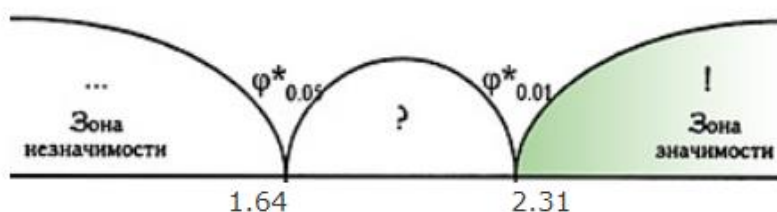


Figure 2 – Significance axis

Result: $\varphi^*_{emp} = 2.549$

The empirical value of φ^*_{emp} lies in the zone of significance. The null hypothesis (H_0) is rejected.

Now let's take a closer look at the effectiveness of the formative experiment by comparing the results of the experimental and control group members by levels.

Table 2 – Comparative analysis of emotional resilience levels before and after the formative experiment

Levels	Experimental Group		Control Group	
	Before Experiment	After Experiment	Before Experiment	After Experiment
High	6 (23,1%)	8 (30,8%)	5 (19,2%)	6 (23,1%)
Average	7 (26,9%)	10 (38,4%)	9 (34,6%)	9 (34,6%)
Low	13 (50,0%)	8 (30,8%)	12 (46,2%)	11 (42,3%)

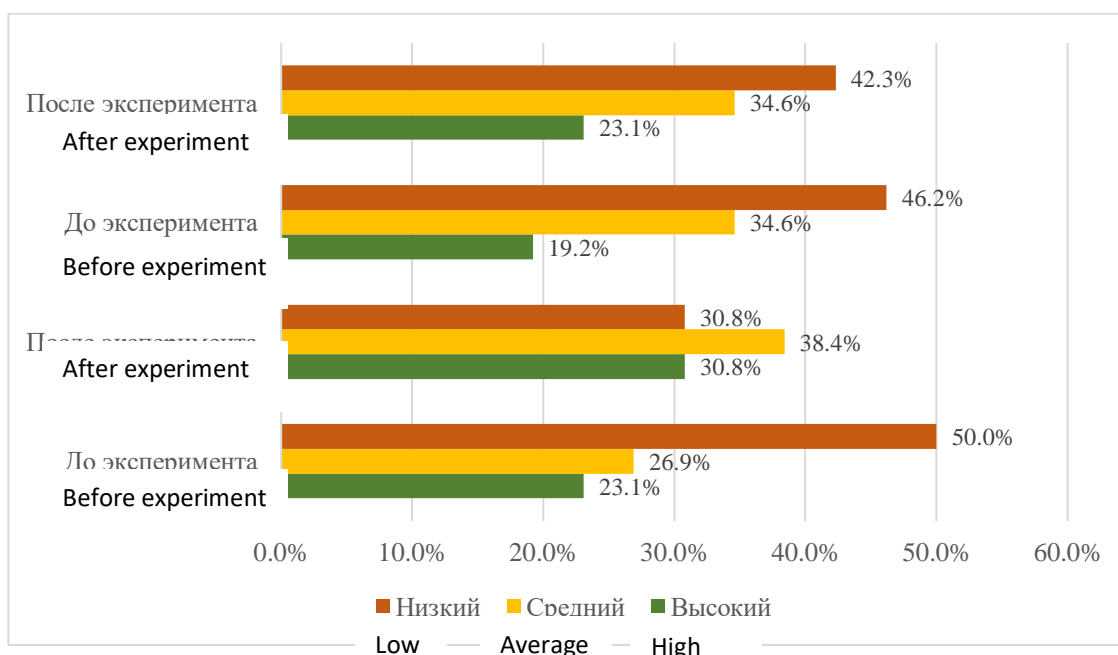


Figure 3 – Graphical Analysis of the Emotional Resilience Levels of Study Participants Before and After the Formative Experiment

As seen from Table 1 and Figure 3, the greatest improvement in emotional resilience (ER) and emotional resource management was shown by the members of the experimental group. Fewer changes were observed in the control group members, who did not undergo special training.

Thus, after the experiment, 8 out of 26 oncology nurses in the experimental group demonstrated a high level of emotional resilience, which is 2 more people than before. In the control group, one person was added to those who achieved high results (6 people).

Ten nurses showed an average level of emotional resilience after completing the training program, which is 3 more people than before. Among the control group, there were no significant changes (9 participants before and after the experiment).

As for low emotional resilience levels and high burnout severity, their number decreased by 5 people in the experimental group (from 13 to 8). In the control group, one person left this category and raised their emotional resilience level (from 12 to 11 nurses).

Table 3 – Analysis of the Effectiveness of the Formative Experiment Using the Mann-Whitney Criterion

Parameter	M	N	Mean rank	Rank sum	Mann-Whitney U	Asymptotic Significance
Emotional Resilience	Control	26	22,01	198,00	48,000	0,09*
	Experimental	26	24,03	250,00		
	Total	52				
Adaptive Coping Behavior	Control	26	21,03	214,50	90,800	,365*
	Experimental	26	24,97	260,50		
	Total	52				
Time management	Control	26	21,46	191,50	67,500	,049*
	Experimental	26	25,17	259,50		
	Total	52				

*- Differences are statistically significant ($p \leq 0.05$)

An analysis of empirical data comparing the scale scores of participants in the control and experimental groups, processed using the Mann-Whitney criterion, revealed significant differences across all parameters. This confirmed the effectiveness of the formative experiment aimed at developing emotional resilience, adaptive coping behavior, and time management skills.

Thus, in the experimental group, the developed training program was implemented. As a result, high levels of emotional resilience and self-control were achieved by the participants of this group compared to the control group members. This indicates that the training exercises used had an effect on helping nurses cope with stressful situations in their daily nursing practice in the oncology department of a medical clinic.

Conclusion

Oncology nurses are constantly exposed to stress, emotional strain, and long working hours, which can lead to the development of emotional burnout. Burnout manifests as feelings of exhaustion, detachment from work, and decreased motivation. However, various coping methods can help nurses manage emotional burnout and maintain their mental well-being.

Coping strategies are an effective tool in combating emotional burnout and play an important role in maintaining the mental health of oncology nurses. Combining different strategies, such as meditation, physical activity, seeking emotional support, and maintaining a balance between work and personal life, can help nurses manage stress and preserve emotional well-being. Recognizing the importance of self-care and implementing coping strategies should become a priority in supporting healthcare workers, particularly those working in oncology.

Self-control methods help healthcare professionals restore the emotional balance and energy levels required to provide adequate care to patients. The main benefits of these methods include improving self-efficacy, enhancing psychological well-being, and fostering professional development. Incorporating self-control methods into the daily practice of oncology nurses not only benefits them but also improves the quality of care and overall patient well-being.

The analysis of optimal coping strategies for oncology nurses has enabled the development of an author-designed training program aimed at increasing emotional resilience and stress management. The positive results of our experimental research demonstrate the effectiveness of using combined coping strategies that require cognitive, emotional, and behavioral efforts.

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