

Burnout Syndrome as an instability Indicator of professional Meaningfulness with a special Focus on the Profession of general Practitioners for Adults in the postmodern and post-COVID Era

Z. Mojzesova (Zuzana Mojzesova)¹, M. Mojzes (Marcel Mojzes)²

¹ General practitioner clinic for adults in Presov, SK.

² Greek-Catholic Theological Faculty, University of Presov, SK

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E-mail address:

marcel.mojzes@unipo.sk

Reprint address:

Marcel Mojzes
Greek-Catholic Theological Faculty, University of Presov
University of Presov in Presov
Slovakia

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Tadeusz Bak
Institute of Economics and Management PWSTE Jaroslaw, PL
Zofia Szarota
WSB Academy / WSB University in Dąbrowa Górnicza, PL

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Abstract:

Burnout syndrome (WHO, 2019), especially in the post-COVID era, seems like a pandemic of the 21st century. Burnout is often the result of prolonged stress in the workplace (Butz et al., 2024). Identifying the syndrome itself and pointing out the importance of its causes and ways to overcome it is essential in many professions. It mainly affects the so-called helping professions, the group in which the medical profession and doctors belong. There is a crisis in the health sector (in the Slovak Republic), but little attention is paid to the instability of the medical profession. However, if there is a crisis of general values within our postmodern society, which would be supported to a large extent by the post-COVID era,

then the primary focus of the medical profession – to help and heal, which means to give the whole of oneself for the good of others – is being questioned as a value. At the same time, doctors are not satisfied with their professional fulfillment. For the stabilization of the medical profession, it would certainly be helpful to rediscover the profession of a doctor as a person who performs an art instead of doing a craft, and as one who practises his/her profession instead of doing business (Stavdal, 2023). In addition, the rediscovery and subsequent development of a gratitude culture in the workplace could be a proper substitution for the culture of careerism and rivalry.

Among physicians, general practitioners for adults represent one of the most endangered groups for burnout (Tidy, 2023). This paper deals with the burnout syndrome etiology, which is based on the essence of human beings, meaning a human-being focused on self-transcendence and on creating values. Therefore, the causes of burnout syndrome cannot only be narrowed down to the amount of work. In comparison to non-post-communist countries, building a company philosophy within clinics is an important element in the still recently established institution of GP clinics for adults as companies. It is based on the principal question: Why is working in a GP clinic for adults important? This question is legitimate not only for workers (healthcare workers), but also for clients – patients. The answer to this question should be based on values.

The paper also analyses symptoms, such as anticipatory anxiety, loss of creativity, loss of authenticity and the ability to relax, as well as resignation to innovation and inefficient functioning of clinics consisting of just one doctor and one nurse. These symptoms are generally mentioned less frequently among both the lay public and professionals. However, they seem to be essential indicators of burnout syndrome. For this reason, their proper recognition is also very important in solving the problem of burnout. Last but not least, we identify the uncertainty regarding the profession of a doctor in the framework of postmodern instability. We assume that the anchoring of the position of a doctor as the bearer of the profession, which has a self-transcending and unquestionably altruistic dimension, is the way to find professional stability as a prerequisite for a sense of fulfillment. Feeling the satisfaction from job fulfillment is a protective factor against burnout.

1 Complexity of the conditions for the emergence of burnout syndrome

Burnout syndrome is a complex health condition. It is dependent not only on the amount of work, but also on many other conditions. As a matter of fact, people are not only workers. Their lives are not only determined by their work, but also by other variables that are of the same importance as one's working life.

In 2023 at the Sydney Medical Congress, the president of the International Organization of General Practitioners for Adults (WONCA), namely A. Stavdal, quoted the eminent physician Sir William Osler (1849-1919) when she said: „The practice of medicine is an art, not a trade; a calling, not a business; a calling in which your heart will be exercised equally with your head“ (Stavdal, 2023).

Doctors do not meet their patients in a vacuum. However, they are embedded in a socio-economic context. The rapid development of technology can represent both a boon and a stressor factor at the same time. Every medical record is stored in a software application called Electronic Health („E-health“), meaning that doctors' work can be immediately checked and monitored. In addition, doctors are dependent on technologies. For example, when applications for electronic drug prescriptions or electronic sick leave do not work, it becomes an insurmountable obstacle for doctors to do their job. Technological progress and an emphasis on telemedicine was strongly accentuated during the COVID-19 pandemic. This required many doctors to make rapid changes in the usual running of outpatient clinics.

1.1 Generational continuity

In the postmodern era (Aylesworth, 2015), certain general values are being questioned, some of which have already been pointed out in *Slovak Historic Tales for Young and Old* by Pavol Dobšinský in a story called „O troch grošoch“ [About three pennies]. These values include, for instance, generational continuity, social cohesion, a functional family and a supportive wider community. It was Albert Einstein who expressed his feelings in a similar way, when he said:

„How strange is the lot of us mortals! Each of us is here for a brief sojourn; for what purpose he knows not, though he sometimes thinks he senses it. But without deeper reflection one knows from daily life that one exists for other people... A hundred times every day I remind myself that my inner and outer life are based on the labors of other men, living and dead, and that I must exert myself in order to give in the same measure as I have received and am still receiving“ (Popova, 2012).

Moreover, certain „-isms“ tend to appear in the public sphere (Weir, 2023, p. 36). One of them is ageism, which means age discrimination. Every day, we can witness the accentuation of discrimination against the older generation. Unfortunately, older people are no longer being perceived as those who represent „the bearers

of wisdom and life experience“, but instead as an unproductive part of society. Such a society emptied of the stability of traditional values is increasingly focused on success, image, money and youth, which are in contradiction with the altruistic profession of a doctor.

1.2 Acting in accordance with the human heart

Doctors have to face the fact that while performing medical practice there are fewer and fewer opportunities for them to act in accordance with what they feel in their heart, meaning in accordance with the innermost motives of the doctor's personality. The famous writer L. N. Tolstoy succinctly described the possibility to act according to one's heart in his novel *Anna Karenina*. It states:

„The more often it occurred to him that the ability to act for the public welfare, which he seemed to have completely been lacking, may not even be an advantage, but on the contrary, it is a certain disadvantage in the form of deficiency – however, it is not the lack of good, honest, and noble desires or tendencies, but the lack of life force, of that abstract thing we understand by the term heart, and also of that specific effort which forces a person not only to choose exactly one life path from all countless paths life offers us, but also to desire only that one already chosen path. He noticed that public servants were not drawn to this work by their hearts, but by the fact that they rationally came to conclusion it was the right thing to do - to deal with public welfare and to take part in its creation. This assumption was also confirmed by Levin's brother's opinion that issues related to the public welfare... should be taken so seriously as a game of chess or the ingenious mechanism of a new technology machine“ (Tolstoj, 2019, pp. 323 – 324).

Furthermore, it is important to mention a statement by professor Špidlík: „A person is dissatisfied if he does not act in accordance with his/her heart“ (Špidlík, 2005, p. 105). Many of the „ars curandi“ that make a doctor a person who treats, heals and applies his/her knowledge in practice, result from the mentioned setting of

a doctor's heart. Patients feel such qualitative differences significantly. When examined by doctors who act from the „heart“, they perceive their professional interest, which is subsequently reflected in patients' compliance to treatment (Mir, 2023). However, if patients are examined by doctors with different personal values, patients' compliance is much lower, and, in turn, so is the therapeutic success. This is how a reciprocal therapeutic relationship is created (Suchman & Matthews, 1988), in which the doctor's interest in a patient provides the doctor with positive feedback regarding the patient's compliance and satisfaction.

Nowadays, it is quite problematic for doctors to be and stay patient-oriented. This mainly boils down to the fact that this altruistic dimension of their profession is losing its social prestige more and more. Therefore, the motivation of many young people – future doctors – is then reduced only to the financial aspect of the profession.

1.3 A profession or a job

From everything that has been mentioned above, a logical question has arisen about whether being a doctor is more of a profession than a job, or vice versa. Moreover, if we define a job as an activity due to which a person secures material goods for his/her life, it is also true that such an activity is interchangeable with any other activity providing him/her with necessary material goods. Based on this concept, a doctor could easily be engaged in business or hotel management as well. However, if we consider being a doctor not a job, but a profession, it is important to mention purpose, meaningfulness and heart as the centre of the human personality. It is true that a person is dissatisfied if he/she does not live in accordance with his/her heart. In this context, we understand heart to mean the whole abstract human inside that characterizes each individual personality, with all his/her feelings, temperament, character and will (Mojzeš, 2011, pp. 85 – 92).

After more than 30 years of professional medical practice, Doctor Anne Malatt from the USA reflected on medicine as a profession when

she stated: „People's health care starts with us. The fact is that we can only care for other people as deeply as we care for ourselves“ (Malatt, 2022).

1.4 Self-reflection

When talking about being a doctor, the focus is put on human existence itself. In that case, it is almost impossible to avoid asking who a doctor is and how he/she reflects his/her existence. Knowing yourself, i.e., the self-reflection of one's being, is a necessary prerequisite for running a successful medical clinic.

„Medicine is a lifelong journey, immensely rich, scientifically complex, and constantly developing. It is characterised by positive, fulfilling experiences and feedback, but also involves uncertainty and the emotional intensity of supporting colleagues and patients. It is characterised by positive, fulfilling experiences and feedback, but also involves uncertainty and the emotional intensity of supporting colleagues and patients.“¹

Nowadays, the speed of life is so fast that many people do not have time for self-reflection. Some people do not manage to do it during their whole lifetime, and others just do not want to do it. For this reason, personality mechanisms come to the fore (Bailey & Pico, 2023) – I see myself as I want to see myself. Such a trap also waits for doctors. Both society's and doctors' own expectations lead them towards a pedestal of infallibility, and they are finally put on it. This situation is very dangerous for the doctor profession in general, as well as for the maturation process of a doctor's personality.

1.5 Dubito ergo sum – I doubt, therefore I am

Descartes's statement „dubito, ergo cogito, cogito ergo sum“ (I doubt, therefore I think; I think, therefore I am) is being oppressed. As a result, another urgent question has arisen: „Is a doctor allowed to doubt?“ „A growth mindset combined with the recognition of failure is es-

¹ The reflective practitioner - guidance for doctors and medical students (2021). [online] [Retrieved December 4, 2023] Available at: https://www.gmc-uk.org/-/media/documents/dc11703-pol-w-the-reflective-practitioner-guidance-20210112_pdf-78479611.pdf

sential for a successful medical practice“, says Dr. Franz Wiesbauer. As British actor Damian Lewis said, „fallible characters are ultimately more interesting than superheroes“ (Wiesbauer, 2017). The crystallization of thought processes represents one of the biggest obstacles to creativity and leads to an increased number of mistakes in professional performance.

1.6 Authenticity

Only a doctor who is capable of professional self-reflection can succeed in the authenticity test when being judged by colleagues, patients or him/herself. The subject matter of authenticity goes along with admitting limits, which leads all human beings towards the willingness to overcome them. Moreover, it is authenticity that leads us to the possibility of creating a functional therapeutic relationship. Simply prescribing pills is definitely not enough for treatment. The role of a professional medical worker can be demanding, hectic and sometimes even unappreciated, and it is important to admit that being a medical worker is never going to be easy. However, staying loyal to one's patients and duties is of the utmost importance. Authenticity in medical professions means being natural to yourself in your role as a healer, a counsellor and a message-bearer to your patients every day (Ramalingam, 2021).

1.7 A holistic approach towards patients

Analysing what it means to be a doctor involves defining a doctor as a person. However, we must not forget about the dimension of human beings in their self-transcending context. Doctors themselves truly do have that feature. Furthermore, only in relation to it can they meet another person who also has a self-transcending dimension. In summary, patients expect doctors to be mature, self-reflective, authentic and self-transcending people. They are able to recognise a doctor's approach to them. From a holistic point of view, doctors see patients as people who dispose of all the personal attributes mentioned above, not just as objects suffering from diseases.

If it is really true that a positive approach to

others makes people feel good and that a feeling of fulfillment is an inseparable part of professional practice, then the feeling of job satisfaction could not exist without this important holistic approach to the patients that involves the acceptance of all patient modalities. To be more specific, a holistic approach involves patients not only being seen as objects suffering from diseases, but as people with all the attributes we have already mentioned. Nevertheless, such an approach puts much greater demands on doctors. If a doctor's personality in all its complexity is separated from the factors that influence it, then reducing burnout symptoms down to each individual symptom in relation to professional practice does not describe the issue entirely. A healthy person is defined by self-awareness, which can be significantly impaired when it comes to burnout syndrome. For this reason, it is also necessary to apply a holistic approach when it comes to doctors.

General practitioners for adults as „gate keepers“ encounter a wide range of diseases and health problems much more often than any other medical specialty. They also become patients' first listeners in various life troubles, not necessarily only when it comes to solving their health problems. In addition, the spectrum of health problems is as wide as medicine itself. After years of medical practice, we dare to say that general practitioners encounter all medical and psychological diseases and are burdened by the need to differentiate the severity and etiology of diseases. Furthermore, at the same time, they have to apply a holistic point of view and see each patient in his/her socioeconomic, cultural, environmental and spiritual context (Mojzešová & Mojzeš, 2018).

1.8 General practitioners for adults and burnout syndrome

Among all medical professions, general practitioners for adults are considered the most threatened by the risk of burnout syndrome (Karuna et al., 2022). In spite of the fact that burnout affects individuals, it strongly depends on the level of healthcare system functionality.² Doctors doing outpatient care encounter inef-

² What is physician burnout? (2023). [online] [Retrieved December 4, 2023] Available at: <https://www.ama-assn.org/practice-management/physician-health/what-physician-burnout>

ficient functioning of the healthcare system on a daily basis. Firstly, during medical studies at universities, and after that, during specialization studies, student doctors and doctors have only limited opportunities to interact with institutions. Therefore, they are not prepared enough for their role as an outpatient care manager. A lot of doctors who feel the calling to be a general practitioner cannot identify themselves as a limited company director. Possible restrictions and the gradually increasing pressure of controlling authorities, not to mention insurance companies, coupled together with patients' demands, which are often accompanied by complaints, make it quite frustrating for every doctor. The forensic implication of a physician's work that looms over every decision he or she makes is a substantial variable that contributes to burnout development. On the contrary, therapeutic success and the establishment of a satisfactory and deep therapeutic relationship between the doctor and his/her patient that best fits the general practitioner belong among the concepts that help to prevent burnout syndrome. However, doctors' necessary interaction with administrative institutions often causes doctors to have a fear of failure and a sense of threat.

In medical practice, doctors encounter unpredictable events that result from the nature of their profession, which in this case refers to doctors' interactions with patients and their health. Professional books describing characteristic symptoms of many diseases form the levels of doctors' expertise and knowledge only to a certain extent. The ability to perceive possible relations among diseases, think of new ones and sense the right direction for determining the correct diagnosis differentiates good doctors from the rest of the group. Even though medicine has always been evidence-based, the ability to both creatively diagnose and creatively treat is one of the essential skills that characterizes a good doctor. However, a doctor's creativity is one of the most burnout-threatened qualities. We noticed this with doctor's abilities to respond creatively and efficiently to unpredictable events, such as the one brought about by the COVID-19 pandemic.

1.9 Several selected symptoms as indicators of burnout syndrome

In this article, we do not want to deal with the symptoms of burnout syndrome, as they have already been published comprehensively in different publications (Akkayagorn, 2023; Casarella, 2022; Tavella et al., 2021). We want to point out certain aspects that are less often mentioned that also contribute significantly to burnout syndrome development.

When it comes to less-known symptoms, we decided to focus on the symptom of anticipatory anxiety.³ It is defined as a state in which a person feels anxious and stressed about situations in advance for no specific reason. In terms of patient health, it can be the fear of the necessity of going to visit a doctor. In a private group of over 400 general practitioners for adults on one social network, a question appeared asking whether doctors felt uncomfortable on Sundays about going to work the following day, even if they already had many years of medical practice. The vast majority of doctors answered that they felt anxious.

Loss of creativity is one of the prominent symptoms in the diagnosis of burnout syndrome. As a matter of fact, creativity is a strong burnout-protective factor, and its loss signals a serious threat of burnout syndrome development. Creativity, referring to independent thinking about concepts, requires a moment of quiet silence and an open-minded doctor. A person under the pressure of all the medical fears and anxiety is hardly able to create such mental conditions for his/her intellect. Creativity requires energy, peace of mind and a vision of perspective. Burnout takes away all of these elements. Mental exhaustion destroys creative sparks, and then problems seem insurmountable (Razzetti, 2020).

2 How to overcome burnout

Human beings have a self-transcending dimension, and they naturally suffer if they cannot let this aspect fully develop. The symptoms of burnout syndrome lead towards existential loneliness as a result of one's social and emotional isolation. On the contrary, being open to the out-

³ Cf. 15 Tips for Nurses to Deal with Pre-Shift Anxiety (2023). [online] [Retrieved December 11, 2023] Available at: <https://www.floatcare.net/post/tips-for-nurses-to-deal-with-pre-shift-anxiety>

er world for relationships, inspirations, innovations, life visions and the occasional introspection, which requires a certain personal distance, protect people against burnout syndrome.

Generally, art leads to self-transcendence. A person participating in an artistic experience enters a reality that is the result of art reflecting an innovative point of view, whether it be visual, acoustic or in the form of a written story. To give more arguments to support this need, we can mention numerous doctors who, besides their medical professions, are also active artists, painters, writers or musicians (Subramanian & Brooks, 2022).

2.1 Bibliotherapy

The key point of bibliotherapy lies in a person's full concentration on a narrative story. The experience of being immersed in a story can enhance the sense of well-being. Mental transportation from our physical surroundings can provide an escape or an opportunity for meaningful contemplation. Bibliotherapy is well-established. Reading books and other written materials help to improve mental health and well-being; however, the question remains, what types of books are the most essential to recommend reading (McNicol & Brewster, 2018). Some doctors even record real anonymous stories from their outpatient clinics based on their experiences with different patients and illnesses. Thus, writing stories not only becomes therapy for doctors themselves, but also for their patients (Mojžešová, 2021; Mojžešová, 2022).

2.2 Innovation – minds playing with concepts. Active idleness

Albert Einstein once said that he had never made any of his discoveries through the process of rational thinking, and that a new idea had always come to his mind suddenly and in a relatively intuitive way. However, he considered intuition nothing else but the result of previous intellectual experience.⁴

In the sense of active idleness, creativity, i.e., the ability of the mind to play with concepts when we let associations related to our

profession flow freely, can often lead to finding innovative solutions. These can be such things as a vision for developing an outpatient clinic, a way to improve work organization or anything that becomes a new element and helps to improve the clinic microenvironment. The mind playing with concepts can be done during both active and passive relaxation. This can happen while sitting in a favourite armchair during an afternoon rest, or even during such activities as swimming in the pool. The aspect of active rest increasingly comes to the fore in direct proportion to the difficulty of medical work done under the time stress factor and the burden of possible forensic consequences due to incorrect diagnostics.

In addition to what was mentioned previously, we can mention some examples of famous people and their ways of active resting. Albert Einstein took breaks from his mental scientific work by playing the violin. Beethoven preferred long, vigorous walks, during which he always had a pencil and blank sheet music with him. Mahler, Satie and Tchaikovsky all believed in the power of a regularly scheduled midday walk.

Even nowadays, different people rest in different ways. Some prefer walks and breaks during the day. Others spend their free time developing skills in fields they are deeply interested in, but which are completely different from their profession. It usually varies from music to painting. Pursuing creative endeavours can help people discover and also connect what they already know with what they have been longing to know.⁵

Stress, which ultimately isolates people and makes them closed in themselves, does not allow people to have open minds and let associations flow freely, and thus be creative. This can be one of the first signs of incipient burnout, since creativity itself is considered a strong protective factor of this syndrome.

2.3 Education

A study conducted among Danish general practitioners showed a positive correlation between life-long learning and the prevention of

⁴Albert Einstein's Unique Approach to Thinking (2017). [online] [Retrieved January 4, 2024] Available at: <https://evernote.com/blog/einsteins-unique-approach-to-thinking>

⁵Ibid.

burnout syndrome (Brøndt et al., 2008). Life-long learning not only provides satisfaction from the fulfillment of doctors' professional requirements, it also leads to greater diagnostic and therapeutic certainty. We are of the opinion that even during medical studies at the Faculty of Medicine, emphasis should be placed not on the amount of knowledge, but on understanding the principles. With such an approach, when a medical practice is interrupted by parental leave, doctors are able to return back to work with self-confidence very quickly and can easily continue building onto knowledge they have already acquired. Forms of life-long learning then become continuing steps in already gained education and provide doctors with appropriate argumentative skills when offering patients possible treatments and building compliance towards the treatments. If doctors are able to obtain a patient's compliance, they also gain feedback in the form of satisfaction from reaching the therapeutic goal. In addition, a doctor's erudition is important from a credibility point of view, and it results from the intersection between a doctor's expertise level and his/her character features.

2.4 The transfer of medical competencies

The feeling of irreplaceability experienced by doctors in outpatient clinics becomes a significant predisposition to burnout syndrome development. The working model of a clinic consisting of just one doctor and one nurse seems to be outdated. It is expected that many healthcare activities that do not necessarily have to be performed by doctors will soon be transferred to mid-level health workers or nurses, who will then acquire higher competencies within the clinic and the health sector in general. In each outpatient clinic, a director should be a person with a specific vision of clinic development, and to fulfill that vision, he or she needs to be able to motivate other workers. It is necessary to define clear competences for all workers. Moreover, we consider it of high importance to implement adequate team building activities with the clinic workers themselves as well as general practitioners from different clinics, analogously to Balint groups (Kabát, 2018). Similarly, when it comes to nurses and their prevention of burnout syndrome, we focus predominantly on those nurses working in outpatient clinics of general

practitioners for adults. Taking that into consideration, their profession includes such a wide range of medical and administrative duties, probably more than any other kind of specialist; therefore, it is necessary for a doctor to have the opportunity to transfer medical competencies among the workers (Bassi, 2023). It even seems to be very beneficial to interchange those competences among them at certain time intervals. For example, taking care of patients in the waiting room would be assigned cyclically to all nurses from the clinic. It is necessary for doctors in the Slovak healthcare system to give up the feeling that they are irreplaceable and to learn how to create the correct conditions in outpatient clinics to transfer many of their current duties to middle-level health workers and nurses. Furthermore, it is important to create a model of an outpatient clinic with two doctors. In such a model, doctors do not compete with each other, but create conditions for a more efficient allocation of working time and the possibility for relaxation. In addition, it would help them to prevent the fear of being absent from the clinic, and thus of not meeting the demands of their patients. In this way, a doctor would be available for the patients of his/her clinic at all times. Planned examinations would not have to be postponed, and medical work would not accumulate during the time period of a doctor's absence from the clinic. It is definitely extremely difficult to run an outpatient clinic where, even within the framework of subsidiarity, all workers, whether doctors or nurses, feel appreciated and perceive the value of their job position. Collegiality and common visions among doctors in one clinic would become the rare variable necessary for building a model of one clinic with two or more doctors.

2.5 The ability to be awed

George Vaillant describes seven concepts of positive mental health: effective functioning, character strengths, maturity, positive emotional balance, social-emotional intelligence, life satisfaction (genuine happiness) and resilience (Cloninger, 2012, p. 103). In our opinion, the ability to be awed belongs to the above-mentioned personal qualities as well. A lack of this in human lives is one of the subtle initial symptoms of possible burnout syndrome development. Awe is the ability to perceive the beautiful,

extraordinary and impressive part of everything that surrounds us. Many people associate awe with immaturity. Therefore, when they grow up, they think they are too old, sensible or intelligent to be amazed. Beauty is something that a person appreciates or admires without any concern for personal gain. If we use this definition, we can understand why it is so difficult to perceive beauty. Unfortunately, today's society is focused on „What is in it for me?“ and „How does it benefit me?“ (Snow, 2017).

People who are interested in new facts not only suffer less from burnout, but also live longer. The ability to be awed is a true indicator of a functional mental state. Only people who are not focused on their own anxious experience are capable of feeling awe and amazement. In other words, it is only these people who are capable of getting excited about something. Awe provides a cleansing, cathartic experience and transfers the focus of human attention to an object that is „wonderful“ and therefore deserves to be admired. The ability to perceive goodness, beauty and other generally positive values could be therapy as well as an indicator of psychological health.

2.6 A culture of gratitude

Negative emotions such as „a priori“ disagreement lead to feeling intrapersonal tension. Learning to agree, praise and see the good in colleagues, situations and patients is medicine for the doctor's soul (Svačina, 2012).

The impact of gratitude on employee motivation cannot be underestimated. When employees feel appreciated for their work, they are more likely to put in extra effort and show increased loyalty towards their employer and institution they work for. The power of gratitude lies in boosting morale, increasing job satisfaction and reducing turnover rates. Employees who feel appreciated stay longer and perform better (McKinney, 2023).

Currently, more and more healthcare organizations are coming to the conclusion that a culture of gratitude is good for their employees, and therefore also good for their patients (Bozena, 2018).

2.7 Mental resilience

The current importance of the topic we are dealing with in this paper can be confirmed by

an interview in Forbes magazine with Zuzana Čmelíková, an expert on ethical leadership and resilience. Among other things, she mentioned that in today's era, which is characterized by constant change, pressure to do one's best and unclear rules in society, psychological resistance—resilience—plays an absolutely important role (Okšová, 2023). The Czech neuropathologist František Koukolík describes mental resilience as a key feature that is important for people living in the 21st century. However, resilience was also discussed during the times of great philosophers like Plato and Aristotle. As Martin Seligman, the father of positive psychology, says, resilience should not only be about ways of overcoming problems, but also about how to live meaningfully.

The most important prerequisite for mental resilience is self-awareness. The most resilient people are those who are aware of who they really are. Despite all personal traumas and failures, they manage to maintain meaningfulness in their lives. From other necessary prerequisites we can mention critical thinking, self-regulation, the ability to build healthy relationships, tenacity, perseverance and, last but not least, good energy management. Based on these seven key competencies, a resilience quotient is determined that is evaluated similarly to IQ and EQ. Using the proper resilience tests, we can determine the level of the aforementioned competencies and start working on them.

The question of how to have a good balance between work and personal life is important. Many people focus on how to recharge their batteries physically, but they find out it is not enough. We need to gain energy in other ways as well. During the day, we need to have enough stimuli to bring us joy and have people around us who we can look forward to seeing, whether at work or at home. Last but not least, we need to feel the meaningfulness of what we do. Sometimes we find it in material things, but it becomes a much greater driving force when we feel it through our relationships. It can also be found in our relationship to work. If we feel joy in what we do, we maintain some inner curiosity and enthusiasm, and therefore are better at finding solutions to problems. The key is to always look for ways to cooperate with other people and find out how to get along and form a strong bond

with them. However, leaders should allow employees from their team to experience even less standard situations so that they get to know each other better on different occasions and, despite their character differences, manage to create a stable basis for a bond to arise among them. For this reason, it is important for companies to organise experiential empirical team building events at which people can get to know each other in different situations and gradually start to form stronger relationships (Okšová, 2023). All of this helps to overcome burnout syndrome.

2.8 Company philosophy – focus on values

As a post-communist country, Slovakia is still in the stage of building company philosophies. It is characterised by a principled question about each company's values that can be asked both by employees and clients, meaning patients. It should be remembered that this question is not only legitimate, but also necessary. Not only does it create a framework, bring stability and reflect a company's vision, in case of an incipient crisis, it is a key point for all company leaders and employees. To be more specific, the answer to such a principled question in our outpatient clinic is the very name of the clinic itself with all of its contextual meaning—*Salus animarum, Ltd.*—which means health (in Latin, also the salvation) of souls. Furthermore, the full Latin text says *Salus animarum suprema lex*, meaning the health (salvation) of souls is the highest law. We even consider building this kind of company philosophy essential in outpatient clinics of general practitioners for adults.

Conclusion

The existence of burnout syndrome in the medical profession with general practitioners for adults is a real fact in both global and local meanings in the Slovak context. It was strongly accentuated in the post-COVID era. However, it is necessary to take into consideration the devaluation of this profession as such resulting from the values of instability of postmodern societies. For this reason, we agree with the statement that although burnout affects individuals, it is strongly dependent on the level of healthcare system functionality as a whole. In addition to common burnout symptoms, of which detailed analysis can be found in many other publications, we have

focused on some specific indicators of burnout syndrome that can also be considered very early or subtle indicators of this syndrome. Their identification contributes to burnout prevention and helps its treatment. These symptoms include the loss of creativity, the ability to be awed and a desire to continue life-long learning. This topic appears to be very current and needs to be further developed (Verhoef & Blomme, 2022).

It is of the same importance to build a culture of gratitude within outpatient clinics of general practitioners for adults in order to develop doctors' abilities to have mental resistance, which is also referred to as mental resilience.

Creating a list of personal value rankings as the framework for successfully running an outpatient clinic and building a company philosophy this way is still appropriate to be remembered and developed in the healthcare system of general practitioners for adults in the Slovak Republic.

References

1. AKKAYAGORN L (2023) Burnout syndromes. [online] [Retrieved December 12, 2023] Available at: <https://www.medpark-hospital.com/en-US/lifestyles/burnout-syndrome>.
2. Albert Einstein's Unique Approach to Thinking (2017). [online] [Retrieved January 4, 2024] Available at: <https://evernote.com/blog/einsteins-unique-approach-to-thinking>.
3. AYLESWORTH G (2015) Postmodernism. In: ZALTA, E. N. (ed.) *The Stanford Encyclopedia of Philosophy*. [online] [Retrieved December 22, 2023] Available at: <https://plato.stanford.edu/archives/spr2015/entries/postmodernism/>.
4. BAILEY R, PICO J (2023) Defense Mechanisms. In: *StatPearls*. [online] [Retrieved December 4, 2023] Available at: <https://pubmed.ncbi.nlm.nih.gov/32644532/>.
5. BASSI B (2023) How to Delegate Tasks and Avoid Burnout in Private Practice? [online] [Retrieved January 4, 2024] Available at: <https://www.telepsychhealth.com/blog/how-to-delegate-tasks-and-avoid-burnout-in-private-practice/>.
6. BROZENA C (2018) How Gratitude Can Reduce Burnout in Health Care. [online] [Retrieved December 11, 2023] Available

- at: https://greatergood.berkeley.edu/article/item/how_gratitude_can_reduce_burnout_in_health_care.
7. BRØNDT A et al. (2008) Continuing medical education and burnout among Danish GPs. In: *British Journal of General Practice* 58 (546), pp. 15–19.
 8. BUTZ M et al (2024) Stress and Burnout in the European Workplace and the Role of Resilience. In: *Clinical Social Work and Health Intervention* 15(3), pp. 6–13.
 9. CASARELLA J (2022) Burnout: Symptoms and Signs. [online] [Retrieved December 12, 2023] Available at: <https://www.webmd.com/mental-health/burnout-symptoms-signs>.
 10. CLONINGER C R (2012) Healthy personality development and well-being. In: *World Psychiatry* 11(2), pp. 103–104.
 11. 15 Tips for Nurses to Deal with Pre-Shift Anxiety (2023). [online] [Retrieved December 11, 2023] Available at: <https://www.floatcare.net/post/tips-for-nurses-to-deal-with-pre-shift-anxiety>.
 12. GUTH A (2020) We defeat Covid 19 In Rehabilitation. Vol 57, No 2. p. 76. ISSN: 0375-0922.
 13. KABAT J (2018) Balintovské skupiny [Balint groups]. [online] [Retrieved January 4, 2024] Available at: <https://psychosomatika.cz/balintovske-skupiny/>.
 14. KARUNA CH et al. (2022) Prevalence of burnout among GPs: a systematic review and meta-analysis. In: *British Journal of General Practice* 72 (718), pp. 316–324.
 15. LUDVIGH-CINTULOVA L, BENO P (2019) Risk of Burn Out Syndrome in Health Care Social Services In *International journal of Health, New Technologies and Social work*. Vol 14, No. 2, ISSN 1336-9326 print.
 16. MALATT A (2022) When Medicine is a ‘Calling’. [online] [Retrieved December 15, 2023] Available at: <https://tomedicine-withlove.com/articles/when-medicine-is-a-calling/>.
 17. MCKINNEY PH (2023) The Surprising Effects of Gratitude. [online] [Retrieved December 22, 2023] Available at: <https://www.philmckinney.com/the-surprising-effects-of-gratitude/>.
 18. MCNICOL S, BREWSTER L (Eds.) (2018): *Bibliotherapy*. Facet.
 19. MIR T H (2023) Adherence Versus Compliance. In: *HCA Healthcare Journal of Medicine* (2023) 4 (2), art. 22. [online] [Retrieved January 11, 2024] Available at: <https://scholarlycommons.hcahealthcare.com/hcahealthcarejournal/vol4/iss2/22>.
 20. MOJZES M (2011) *Spirituality of the Christian East*. Presov : GTF PU.
 21. MOJZES Z (2022) *Argentine tango with COVID*. Kosice : Byzant.
 22. MOJZESOVA Z (2021) *We have a goldfish in the clinic*. Bratislava: I.D.L. I.D.L., s. r. o.
 23. MOJZESOVA Z, MOJZES M (2018) The importance of a holistic approach to the patient in 21st century medicine (*Ars curandi - the art of healing*). In: *Clinical Social Work and Health Intervention*, 9 (4), pp. 84-89.
 24. OKSOVA L (2023) How to increase mental resilience? It won't hurt if we indulge in discomfort, says coach. In: *Miraculous Life and Health: Forbes* 1/2024. [Online] [Downloaded 7 January 2024] Available at: <https://www.forbes.sk/ako-zvysit-psychicku-odolnost-nezaskodi-nam-ak-si-doprajeme-aj-nepohodlie-hovori-koucka/>.
 - RAMALINGAM G (2021) What is authenticity in healthcare? [online] [Retrieved December 11, 2023] Available at: <https://www.drganeshramalingam.com.sg/authenticity-in-healthcare/>.
 25. RAZZETTI G (2020) Burnout: The Reason Your Team Is Not Innovating. [online] [Retrieved December 11, 2023] Available at: <https://www.forbes.com/sites/forbescoachescouncil/2020/02/06/burnout-the-reason-your-team-is-not-innovating/?sh=27767fd23763>.
 26. SLADEK K (2022) An interdisciplinary approach to the challenges of patient care in the post-COVID-19 era. *Acta Missiologica* 16, no. 1, (2022): 43-44.
 27. SNOW J (2017) The Ability To Feel Amazement. [online] [Retrieved December 12, 2023] Available at: <https://steemit.com/steemiteducation/@jonsnow1983/the-ability-to-feel-amazement>.
 28. SRAMKA, M et. Al (2021) Post-COVID-syndrome and nervous system In *International journal of Health, New Technologies*

- and Social work. Vol 16, No. 3, ISSN 1336-9326 print.
29. STAVDAL A (2023) Keynote address „Healthcare In Uncertain Times“, WONCA World Conference, Sydney. Summary available at: <https://racgp.eventsair.com/RACGPEvent WebsitePortal/wonca-2023/wonca-2023-program/Agenda/AgendaItem-Detail?id=c454d6b5-6d20-4b6a-b3ed-5b66e79323cb>.
 30. SUBRAMANIAN R, BROOKS M J (2022) How a Medical Orchestra Cultivates Creativity, Joy, Empathy, and Connection. [online] [Retrieved December 4, 2023] Available at: <https://journalofethics.ama-assn.org/article/how-medical-orchestra-cultivates-creativity-joy-empathy-and-connection/2022-07>.
 31. SUCHMAN A L, MATTHEWS D A et al. (1988) What Makes the Patient-Doctor Relationship Therapeutic? Exploring the Connexional Dimension of Medical Care. In: *Annals of Internal Medicine*. 108, pp.125–130.
 32. SVACINA S (ed.) (2012) *About the doctor's soul*. Triton.
 33. SPIDLIK T (2005) *Anima di Pellegrino [Pilgrim's Soul]*. Milano : Gribaudi.
 34. TAVELLA G et al. (2021) Burnout: Redefining its key symptoms. In: *Psychiatry Research*, vol. 302. [online] [Retrieved December 12, 2023] Available at: <https://www.sciencedirect.com/science/article/pii/S0165178121003206>.
 35. The reflective practitioner - guidance for doctors and medical students (2021). [online] [Retrieved December 4, 2023] Available at: https://www.gmc-uk.org/-/media/documents/dc11703-pol-w-the-reflective-practioner-guidance-20210112_pdf-78479611.pdf.
 36. TIDY C (2023) Burnout in Primary Care. [online] [Retrieved January 4, 2024] Available at: <https://patient.info/doctor/burnout-in-primary-care#nav-1>.
 37. TOLSTOJ L N (2019) *Anna Kareninova [Anna Karenina]*. Bratislava : Slovart.
 38. TOMICZEK V et al. (2022) The role and experiences of social workers in hospices during the peak of the covid-19 pandemic, *Acta Missiologica* 16, no. 2, (2022): 59-65.
 39. VERHOEF N C, BLOMME R J (2022) Burnout among general practitioners, a systematic quantitative review of the literature on determinants of burnout and their ecological value. In: *Frontiers in Psychology* 13. [online] [Retrieved January 7, 2024] Available at: <https://www.frontiersin.org/journals/psychology/articles/10.3389/fpsyg.2022.1064889/full>.
 40. WEIR K (2023) Ageism is one of the last socially acceptable prejudices. *Psychologists are working to change that*. In: *Monitor on Psychology* 54 (2), pp. 36–43. [online] [Retrieved January 4, 2024] Available at: <https://www.apa.org/monitor/2023/03/cover-new-concept-of-aging>.
 41. WIESBAUER F (2017) Why physicians need to celebrate their fallibility. [online] [Retrieved December 11, 2023] Available at: <https://www.medmastery.com/magazine/why-physicians-need-celebrate-their-fallibility>.
 42. What is physician burnout? (2023) [online] [Retrieved December 4, 2023] Available at: <https://www.ama-assn.org/practice-management/physician-health/what-physician-burnout>.
 43. WHO (2019) Burn-out an „occupational phenomenon“: International Classification of Diseases. [online] [Retrieved December 15, 2023] Available at: <https://www.who.int/news/item/28-05-2019-burn-out-an-occupational-phenomenon-international-classification-of-diseases>.
 44. FARAH D, KOMAL N (2024) Confronting Climate Chaos: Socio-Economic Strategies for Climate Resilience in Pakistan. *Pakistan Journal of Society, Education and Language (PJSEL)*, 10(2), 129–138. Retrieved from <https://pjsel.jehanf.com/index.php/journal/article/view/1384>.