

# Some Aspects of Research on Interpersonal Relationships and Motivations of Healthcare Professionals

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## Abstract

The modern theory and practice of medicine, as well as a number of other edological (helping) disciplines and practices, have been supplemented by a very productive area called “evidence-based medicine”. Its occurrence is associated with a large number of bioethical problems, including the problem of the conflict of interests between a doctor and a patient. A conflict of interest is born as a result of conflicting motives of relationships and interactions between the activities of a medical worker. The contradiction of interests and motives of activity is manifested in the phenomena of professional psychological burnout and professional deformations. The article highlights the main motives contributing to the conflict of interest, as well as ways of preventing and correcting conflicts of interest in connection with the implementation of these motives. Among the main motives, one can name the motives associated with the unresolved personal and interpersonal problems of a specialist: his need for power and control, for confirmation and for belonging.

KEY WORDS: motivation, health care, doctor-patient relationship



## Introduction

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The problem of healthcare efficiency is one of the most significant problems of modern society. This is a multifaceted problem that unites different aspects. This problem manifested itself especially sharply during the COVID-19 pandemic. But in this work, we will consider the traditional problems that exist. These are the doctor-patient relationship, efficiency, motivation, etc. In modern World a doctor-patient relationship (DPR) is considered as a main issue. It shows us the meaning of our work as a doctor and psychologist. Due to the relationship, psychologist owes a responsibility to the patient to proceed toward the ailment or conclude the relationship successfully. Very important direction is doctor-patient relationship in health care. A lot of medical reviews have covered ways to form a relationship between a psychologist and a patient. But our research is very interesting and our approach gave very high remark in the International meetings [1,2]. Very essential features are important for maintaining a healthy DPR communication, doctor empathy, trust, professional boundaries, informed consent: This is based on the moral and legal arguments of the patient's autonomy (independence in decision making). In relation to trust, the psychologist needs to be honest with the patient and his family to provide a genuine assessment of favorable and unfavorable outcome probabilities, along with the suggested therapy. One of the most important issues related to solving the problems of increasing the productivity of medical care is the issue of motivation for work and career growth of specialists. The problem of the motives of specialists in the field of medicine is relevant. It is very important to prevent and resolve conflicts of interest problems. In the structure of the conflict of interest in medicine and other branches of science, the vital functions of medical personnel in general are important. The appearance of a conflict of interest is due to the fact that a person relies not so much on reality as on a subjective understanding of it. When a conflict of interest arises, people usually inadvertently interpret the circumstances of the situation in such a way that the decision-making emphasizes their competence. This is due to the lack of moral education. Therefore, sometimes they talk not about conflict, but about competition and competing interests. The professionalism of the doctor, his honesty towards himself and the world, sincerity, morality, balance and harmony, etc. – ethical characteristics that control vital activity, as well as the correspondence between the declared and real semantic motives of professional activity. One of the most important issues related to solving the problems of increasing the productivity of medical care is the issue of motivation for work and career growth of specialists. The problem of motives from specialists in the field of medicine is relevant. It is very important to prevent and resolve conflicts of interest. In the structure of the conflict of interest in medicine and other branches of science, the vital functions of medical personnel in general play an important role. The emergence of a conflict of interest is due to the fact that a person relies not so much on reality as on a subjective understanding of it. When a conflict of interest arises, people usually inadvertently interpret the circumstances of the situation in such a way that the decision-making emphasizes their competence. This is due to the lack of moral education. So sometimes they do not speak about the conflict and about the competition and competing interests or motives (competing interests) [3]. The professionalism of the doctor, his honesty towards

himself and the world, sincerity, morality, balance and harmony, etc. – ethical characteristics that control vital activity, as well as the correspondence between the declared and real semantic motives of professional activity. For the first time, the problem of motivation was posed by A. Smith, who believed that people are governed by selfish motives. Today, it is noted that the orientation of employees to achieve health goals is the main task of the management of medical personnel. Due to changes in the health care system (automation and informatization of health care), the management of health care facilities has become more complicated. Ong and de Haes distinguish three different concepts of labor motivation [4].

## Materials and methods

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The research was carried out on the basis of the Kursk State University. Several health authorities were included in the study. We investigated the external and internal motivators of the activity of doctors of different ages. We used statistical programs. And also the standard skills of the doctor were investigated by special original questionnaires.

## Results

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Part of our results you can see in Table 1.

## Discussion

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Based on our research, it turned out that the regulators of motivation and the main motivators were in the following relationship. Motivation regulators are work, environment, remuneration, personally safety. The main motivators are involvement in the process, interest. Details of our research you can see in the table. Some authors show that incentivizing workers is a major problem for most managers. The art of management plays an important role in the effectiveness of the organization. Motivation is an important causal factor in an individual's performance. Lack of coordination between the doctor and the head of the hospital, polyclinic leads to an increase in economic and professional inefficiency. Furthermore, large corporate executives are not interested in the maximum profit of their companies, as it is associated with increased risk. Therefore, to maintain their position, managers choose development options focused on short-term and stable income. Pod the influence of a complex socio-economic conditions of the degree of activity and physician base on the



labor motivation. Complementary trends in the development of incentive systems. On one hand, the need of taking into account the specific social needs of different groups of workers is obvious. However, at critical, extreme, unexpected moments in the functioning of organizations, which provoke non-competitiveness of external and internal assessments, these methods lose their positive qualities. This requires the development of situational complexes, methods that provide efficient operation in unusual circumstances [5,6,7].

## Conclusion

It is important to note that the motivation of activity affects not only the life of the specialist himself, but also those with whom he is connected, with the life of the organization, its partners and patients. That is why the motivation of professional activity and the career of a specialist is one of the key problems of optimizing medical care. Research in this direction is now especially important when the work of doctors in particular is associated with pandemic – the new coronavirus.

**Table 1.** Activities and orientations: activity-semantic motivation for the work of doctors of different ages (experience). YD – counts of young doctors, MD – counts of mature doctors, T – total counts

Type	YD	MD	T
Transformative activities	80	54	67
Communicative activity	56	34	45
Utilitarian-pragmatic activity	68	82	70
Cooperative activities	56	64	60
Competitive activity	48	54	52
Achievement activities	62	42	52
Procedural orientation	72	68	66
Resulting orientation	28	32	34

## Reference

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1. Kaba R, Sooriakumaran P. The evolution of the doctor-patient relationship. *Int J Surg*. 2007 Feb;5(1):57-65. doi: 10.1016/j.ijisu.2006.01.005. Epub 2006 Mar 3. PMID: 17386916
2. Harbishettar V, Krishna K, Srinivasa P, Gowda M. The enigma of doctor-patient relationship. *Indian J Psychiatry*. 2019 Apr;61(Suppl 4): S776-S781. doi: 10.4103/psychiatry.IndianJPsychiatry\_96\_19. PMID: 31040473; PMCID: PMC6482679
3. Ong L, Haes J, Hoos A, Lammes F. Doctor-patient communication: a review of the literature. *Soc Sci Med*. 1995 Apr;40(7):903-18. doi: 10.1016/0277-9536(94)00155-m. PMID: 7792630
4. Wade D, Kitzinger C. Making healthcare decisions in a person's best interests when they lack capacity: clinical guidance based on a review of evidence. *Clin Rehabil*. 2019 Oct;33(10):1571-1585. doi: 10.1177/0269215519852987. Epub 2019 Jun 6. PMID: 31169031
5. Moller AC, Jager AJ, Williams GC, Kao AC. US Physicians' Work Motivation and Their Occupational Health: A National Survey of Practicing Physicians. *Med Care*. 2019 May;57(5):334-340. doi: 10.1097/MLR.0000000000001101. PMID: 30893248
6. Shah S, Zaidi S, Ahmed J, Rehman S. Motivation and Retention of Physicians in Primary Healthcare Facilities: A Qualitative Study From Abbottabad, Pakistan. *Int J Health Policy Manag*. 2016 Aug 1;5(8):467-475. doi: 10.15171/ijhpm.2016.38. PMID: 27694660; PMCID: PMC4968250
7. Arpentieva M, Mantkava M. Motives of doctor patient relationship and problem of interest conflict. *Sci-Articles*. 2016; 54 :52-59