INTRODUCTION

Socionomic professions refer to People to People occupations based on communication and interaction. Socionomic professions are distinguished by the peculiarities of the conditions, means, object, and product of labor (ISAEV, 2013). Activity in professions of socionomic type is focused on other people (or their groups), who have their activity, evaluating, facilitating, or, on the contrary, counteracting the actions of the subject of labor (TEMNOVA; FAYMAN, 2019). Socionomic or helping professions are related to ongoing work with people who have the most varied individual psychological features. Consequently, socionomic professions represent a "risk group" for onset and development of professional burnout, professional personality deformations, and deterioration of general mental health and psychological well-being (BODROVA, 2019; TEMNOVA; FAYMAN, 2019; SPIRIDONOV et al., 2018).

Contemporary studies contain extensive empirical material devoted to the occupational health of specialists in socionomic professions. At the same time, there is ambiguity in the interpretation of the very concept of "occupational health," which is considered mainly from medical (VERBINA, 2010; DRUZHILOV, 2013; MITINA, 1998; RAZUMOV; PONOMARENKO; PIKUNOV, 1996; RYUTINA; RYUTINA, 2017; GOLENKOV et al., 2021; MOROZOVA et al., 2020) and psychological (NIKIFOROV; AVGUSTOVA, 2010; NIKIFOROV; SHINGAEV, 2015; MOROZOVA et al., 2015) points of view. In medical science, occupational health is generally understood as the ability of the body to maintain maximum performance under any occupational stress (DRUZHILOV, 2013; SHINGAEV, 2020; BONKALO; LOGACHEV; SHMELEVA, 2021; MIKHAYLOVA; SHMELEVA; MAKHOV, 2015a, 2015b).

In psychology, occupational health is considered in conjunction with the psychological state of the individual. As an integral characteristic of the functional state, professional health determines the ability to effectively carry out professional activities under any conditions (ULANOVA, 2016). Currently, occupational health is considered to be the property of the body to maintain compensatory and protective mechanisms ensuring the professional longevity of the individual (SHOSTAK, 2006; MAKAROVA et al., 2015; MIKHAYLOVA; SHMELEVA; MAKHOV, 2015a), the ability to maintain physical, emotional, an mental well-being in different conditions of professional activity (NIKIFOROV; AVGUSTOVA, 2010), a state of the individual, reflecting the effectiveness of the process of labor adaptation (MUCHINSKI, 2004; BONKALO et al., 2016), the absence of occupational diseases and injuries (GONCHAROV; BOBROV; SCHELANOV, 1994; MAKAROVA et al., 2015), a system property of the personality that involves cognitive, emotional and behavioral well-being, which determines productivity and high efficiency of the activity (MITINA, 1998).

Problems of occupational health are of particular importance for certain types of professional activity, which, first of all, should include the activity of healthcare professionals (BONKALO;
In recent years, several works have been published on the problems of occupational health of healthcare professionals, which allows maintaining high performance and productivity of healthcare work.

Maintaining the physician’s and the nurse’s performance and productivity depends on many personal and impersonal factors. As such factors, researchers pinpoint, first of all, individual psychological features of the specialist’s personality and features of the emerging relations in Physician to Patient system (NEDURUEVA, 2012; ULANOVA, 2016).

However, separate partial studies look at the influence of the environment on the occupational health of representatives of socionomic professions, including healthcare professionals. The professional environment creates the conditions in which the personality of a professional is formed and develops (TEMNOVA; FAYMAN, 2019). The professional environment includes all the characteristics of a particular organization: work/rest schedule, healthcare professionals’ working conditions, relationships with managers of organizations, relationships with colleagues, including the characteristics of its organizational culture.

The concept of “organizational culture” is widely used to refer to the set of behaviors developed in a particular organization and the system of values shared by its employees. It is complex and includes management style, the nature of communication, characteristics of conflict resolution, and attitudes towards employees (TITOV, n.d.).

Developed or positive organizational culture allows establishing a system of values that unite the organization’s staff, acts as a sustainability factor in a crisis and ensures competitiveness and efficiency. Organizational culture also plays a vital role in maintaining the psychological health of employees, which is especially important for healthcare institutions because the healthcare occupations carry significant risks for the emotional and mental sphere of healthcare professionals’ personality (STOLYARENKO; PODKOLZINA, 2017).

Organizational culture as a unique phenomenon is a relatively recent study. In the works of T. Parsons, F. Selznick, C. Barnard, G. Hofstede appeared in the second half of the twentieth century, basics of business culture and its impact on the organization’s work were analyzed. The final recognition of the role of organizational culture as a factor in its development occurred only in the last quarter of the twentieth century when organizational culture becomes the subject of study by specialists in sociology, economics, management, and other scientific fields. During this period, the works confirming the influence of corporate culture on various indicators of organizational performance appeared. Among the authors who have made the most significant contribution to the study of this topic are T.E. Deal, A. Kennedy, S. Davis, H. Schwartz, E. Schein et al. Among the domestic scientists, it is necessary to note the works of S.G. Abramova, I.A. Kostenchuk, N.Yu. Lebedeva, N.M. Shironina, A.N. Asaul, P.Yu. Erofeev, I.V. Groshev, A.S. Mishchenko, N.A. Dosalieva, Yu.A. Emelyanov, N.A. Lytneva, E.A. Mishin et al. In the works of these authors mentioned above, organizational culture is described as a unique phenomenon with a complex multi-level structure formed in adapting the organization to the external and internal environment of its activities.

In view of the aforementioned a study focused on identifying the relationship between the type of organizational culture of a healthcare institution and the features of occupational health of healthcare professionals was conducted.

**MATERIALS AND METHODS**

The study involved 3,500 healthcare professionals (including 1,320 doctors and 2,180 nurses) from 30 healthcare organizations in Moscow and Moscow region.

As diagnostic techniques, we used I.D. Ladanov’s methodology “Level of organizational culture development” (TITOV, n.d.), focused on revealing the level of organizational culture development in a healthcare institution, and a set of techniques for assessing the occupational health of healthcare professionals allowing to determine the features of their psychological and emotional state, the level of self-esteem (“Psychological portrait of a healthcare professional”), stress resistance (Emotional stability questionnaire) and degree of satisfaction with work (methodology by N.V. Kalinina and M.I. Lukyanova). These techniques are based on the psychodiagnostic program developed by M.I. Lukyanova to determine the
occupational health of teachers (LUKYANOVA; KALININA, 2004). We have adapted this complex for healthcare professionals.

The methodology of studying the level of development of organizational culture includes 29 statements. A respondent should rate each of these statements on a 10-point scale regarding fairness to a particular organization. All suggested statements are divided into four blocks: work, communication, management, motivation and organizational morale. The overall level of organizational culture development is determined based on the total indicator - the sum of points on all scales of the methodology. Statistical methods included frequency and percentage distributions, comparative ($\chi^2$ criterion), and correlation (Spearman’s correlation coefficient) analyses.

RESULTS
As a result of the study conducted in thirty healthcare institutions (multifaceted polyclinics), reliable correlations were revealed, which gives us grounds to speak about the influence of the organizational culture of healthcare institutions on the occupational health of its employees. Thus, it was found that the average level of occupational health of medical staff is 2 points (an average level characterizes 41% of medical staff), 34% of medical staff has a low level of psychological health, 25% is high level (Figure 1).

Fig. 1. Percentage distribution of respondents (medical workers) by the level of professional health (n = 3500)

![Percentage distribution of respondents (medical workers) by the level of professional health](image)

Source: Search data.

The study of the organizational culture of the healthcare organizations where the surveyed respondents work indicates their heterogeneity. The study identified three types of healthcare institutions: institutions focused on management and strict work discipline, institutions focused on developing and maintaining the motivation of healthcare professionals, and institutions focused on friendly and cooperative relationships between their employees (Figure 2).
Figure 2. The results of the study of the characteristics of the organizational cultures of medical organizations (average score)

| Organizational culture criteria | Work orientation | Communications orientation | Control orientation | Motivation orientation | Morality orientation |
|--------------------------------|------------------|---------------------------|--------------------|-----------------------|---------------------|
| Management orientation        | 6,5              |                           |                    |                       |                     |
| Motivation orientation        | 4,8              |                           |                    |                       |                     |
| Communication orientation     | 8,2              |                           |                    |                       |                     |

Source: Search data.

Work orientation is characteristic of all healthcare organizations (the average score for this criterion is 6,5 points). It should be noted that management-focused organizations have lower scores on the Motivation scale (4,8) and higher scores on the Management scale (8,2), indicating a lower organizational culture than other organizations.

It should also be noted that almost 47% of healthcare organizations can be attributed to organizations focused on management and the observance of strict labor discipline; 27% each are those organizations where the focus on motivating healthcare personnel and establishing cooperative relations among employees prevails. The percentage distribution of healthcare organizations by dominant attribute of organizational culture and by the level of its development are shown in Figure 3.

Figure 3. Percentage distribution of medical organizations by the dominant characteristic of organizational culture and by the level of its development

| Communication orientation | 25% | 50% | 25% |
| Motivation orientation    | 75% | 25% | 0%  |
| Management orientation    | 7%  | 36% | 57% |

Source: Search data.

Of all healthcare organizations with high values on the Management scale, 57% are characterized by a low level of organizational culture development (the total score on all scales falls within the range of low values); 36% are medium, and only 7% are high. In contrast, among organizations focused on the motivation of medical staff and their career development, the majority (75%) are characterized by a high level of organizational culture. Among organizations with the dominance of communication values and values of building a favorable psychological
climate in the organization, involving friendly interpersonal relationships between employees, 50% are organizations with an average level of organizational culture and 25% - high and low, respectively. The correlation analysis revealed that the higher is the organizational culture of a healthcare institution, the higher is the level of occupational health for its employees (Table 1).

| Occupational health indicators / organizational culture indicators | Psycho-emotional states of medical workers | Self-assessment of healthcare professionals | Job satisfaction and the medical profession | Stress tolerance |
|---|---|---|---|---|
| Job orientation | 0.194* | 0.177* | 0.189* | 0.203* |
| Communication orientation | 0.413*** | 0.203* | 0.398*** | 0.201* |
| Organizational management orientation | 0.084 | 0.101 | 0.069 | 0.185* |
| Focus on staff motivation | 0.618*** | 0.655*** | 0.617*** | 0.211** |
| Orientation to organizational morality | 0.244** | 0.281** | 0.193* | 0.271** |
| General level of development of organizational culture | 0.311** | 0.243* | 0.282** | 0.241** |

* p < 0.05; ** p < 0.01; *** p < 0.001

The higher is the level of organizational culture of the organization, the better is the psycho-emotional state of its employees (r = 0.311; p < 0.01), their self-esteem as a subject of healthcare professional activity (r = 0.243; p < 0.01), the higher is the degree of healthcare workers' satisfaction with their work and profession in general (r = 0.3282; p < 0.01), the higher is their stress resistance and resistance to stressful situations (r = 0.241; p < 0.01), and consequently, the higher is their level of occupational health.

The psycho-emotional state of healthcare workers is related to the extent to which organizational leaders focus on developing friendly relationships within the team (r = 0.4133; p < 0.001), as well as their activities to develop motivation among medical staff (r = 0.6185; p < 0.001).

**DISCUSSION**

The study results confirm the scientifically grounded information. The healthcare professionals' activity, reflecting the peculiarities of socionomic professions, causes an actual risk of deterioration of the subjects' occupational health. At the same time, by occupational health, we mean such a state of a subject of healthcare work, which reflects a favorable psycho-emotional state, a high level of stress resistance, adequate self-assessment of the results of his/her work, and a high degree of satisfaction with the healthcare services provided by the institution.

Only a quarter of the healthcare professionals surveyed have a favorable psycho-emotional state. They do not lose self-control even under excessive professional stress and retain the ability to make good decisions in situations of increased responsibility for their actions. Their emotional stability ensures high work capacity and positive self-perception of their professional activity and themselves as to its subject. Their high level of occupational health reflects a high degree of satisfaction with all aspects of medical care provided by the medical institution.

However, more respondents - 34% - on the contrary, demonstrated a low level of occupational health. An unsatisfactory psycho-emotional state is characteristic for them. Working in an institution providing medical care to patients takes a lot of physical and spiritual energy. As a result, they often experience feelings of anxiety, fatigue, impotence of mind, and irritation.
Having low-stress tolerance, such healthcare professionals are not satisfied with their professional results or providing medical care in the medical institution.

The study revealed that a more significant number of healthcare professionals, characterized by a high level of occupational health, are employed by healthcare institutions with a high level of organizational culture development, where the functioning of the healthcare institutions is focused not only on work and management but also on motivation and communication.

The results of correlation analysis confirm the hypothesis of the study that one of the dominant factors of occupational health of representatives of socionomic professions, in particular, representatives of healthcare professions, is the organizational culture of the institution, involving a balance of behaviors focused on improving the quality of services, the formation of favorable interpersonal relationships between employees, development of staff motivation to work and his/her professional ethics.

**CONCLUSION**

The study results showed the feasibility of developing and implementing targeted programs to establish and develop its organizational culture in each healthcare institution. Such programs include working with managers of organizations as part of their professional development and working with healthcare personnel to maintain their occupational health. Specific features of professional activity of healthcare workers contribute to persistent psycho-emotional and physical tension, which adversely affects the productivity of their professional behavior. Often a healthcare worker as an employee of a particular institution is aware that a problem exists but cannot solve it independently. The program should gain knowledge in preserving their internal psychological resources, maintaining physical health, and mastering techniques for preserving and maintaining their health to be successful in professional activities.

The main directions of such programs should include the implementation of a culture of health; equipping a psychological relief room; providing healthcare professionals with the opportunity to take distance training on a specially developed program, “Occupational Health Culture”; preparing and distributing special booklets and memos for healthcare professionals; placing information on methods of maintaining psychological health on the website of the institutions; organizing Health club for employees and providing opportunities to engage in physical exercises, practices to reduce psycho-emotional tension under the guidance of their own and invited specialists.

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Impact of organizational culture on the occupational health of specialists in socionomic professions

Impacto da cultura organizacional na saúde ocupacional de especialistas em profissões socionômicas

Impacto de la cultura organizacional en la salud ocupacional de los especialistas en profesiones socionómicas

Resumo

Profissões socionômicas referem-se às ocupações de Pessoas para Pessoas baseadas na comunicação e interação. As profissões socioeconômicas se distinguem pelas peculiaridades das condições, meios, objetos e produto do trabalho. O estudo envolveu 3.500 profissionais de saúde (incluindo 1.320 médicos e 2.180 enfermeiros) de 30 organizações de saúde na região de Moscou e Moscou. Como técnicas de diagnóstico, utilizamos a metodologia “Nível de desenvolvimento da cultura organizacional” de Ladanov, focada em revelar o nível de desenvolvimento da cultura organizacional em uma instituição de saúde, e um conjunto de técnicas para avaliar a saúde ocupacional dos profissionais de saúde, permitindo-nos determinar as características de seu estado psicológico e emocional, o nível de autoestima (“Retrato psicológico de um profissional de saúde”), resistência ao estresse (Questionário de estabilidade emocional) e grau de satisfação com o trabalho (metodologia por N.V. Kalinina e M.I. Lukyanova). Os resultados do estudo mostraram a viabilidade de desenvolver e implementar programas direcionados para estabelecer e desenvolver sua cultura organizacional em cada instituição de saúde.

Palavras-chave: Profissões socionômicas. Cultura organizacional de uma organização de saúde. Profissionais de saúde. Estado psicoemocional. Saúde ocupacional.

Abstract

Socionomic professions refer to People to People occupations based on communication and interaction. Socionomic professions are distinguished by the peculiarities of the conditions, means, object, and product of labor. The study involved 3,500 healthcare professionals (including 1,320 doctors and 2,180 nurses) from 30 healthcare organizations in Moscow and Moscow region. As diagnostic techniques, we used I.D. Ladanov’s methodology “Level of organizational culture development”, focused on revealing the level of occupational culture development in a healthcare institution, and a set of techniques for assessing the occupational health of healthcare professionals allowing us to determine the features of their psychological and emotional state, the level of self-esteem ("Psychological portrait of a healthcare professional"), stress resistance (Emotional stability questionnaire) and degree of satisfaction with work (methodology by N.V. Kalinina and M.I. Lukyanova). The study results showed the feasibility of developing and implementing targeted programs to establish and develop its organizational culture in each healthcare institution.

Keywords: Socionomic professions. Organizational culture of a healthcare organization. Healthcare professionals. Psycho-emotional state. Occupational health.

Resumen

Las profesiones socionómicas se refieren a las ocupaciones de personas a personas basadas en la comunicación y la interacción. Las profesiones socionómicas se distinguen por las peculiaridades de las condiciones, medios, objeto y producto del trabajo. El estudio involucró a 3.500 profesionales de la salud (incluidos 1.320 médicos y 2.180 enfermeras) de 30 organizaciones de atención médica en Moscú y la región de Moscú. Como técnicas diagnósticas, utilizamos la metodología “Nivel de desarrollo de la cultura organizacional” de I.D. Ladanov, centrada en revelar el nivel de desarrollo de la cultura organizacional en una institución de salud, y un conjunto de técnicas para evaluar la salud ocupacional de los profesionales de la salud que nos permiten determinar las características de su estado psicológico y emocional, el nivel de autoestima (“Retrato psicológico de un profesional de la salud”), resistencia al estrés (cuestionario de estabilidad emocional) y grado de satisfacción con el trabajo (metodología de N.V. Kalinina y M.I. Lukyanova). Los resultados del estudio mostraron la viabilidad de desarrollar e implementar programas específicos para establecer y desarrollar su cultura organizacional en cada institución de salud.

Palabras-clave: Profesiones socionómicas. Cultura organizacional de una organización de salud. Profesionales sanitarios. Estado psicoemocional. Salud ocupacional.