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**Final Written Assignment by
Christos D. Gandas**

Project Title

**“A Narrative Approach to the Work Related Stress
and the Burnout Syndrome”**

**Dulwich Centre Coordinator: David Denborough
Supervisor: Sue Mitchell**



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1. General

The work fragmentation, the distinction between programming, production and work execution, the utilization of specialized personnel, the detailed definitions of delivery time and actions, resulted to a new kind of pathology which is called anthropogenic. This pathology is associated with the work related stress and with its more extreme manifestation, which is the burnout syndrome. The term "burnout" was first introduced by the psychiatrist Herber Freudenberger in the mid 1970's in the USA [1], in order to describe a condition of physical and mental exhaustion as a result of someone's occupation. It is an occupational pathology which is manifested with high frequency to those that perform social work like the doctors, nurses, teachers and social workers as well as to professions that contain stress such as executive managers, police and military officers and artists. The pathology of the burnout syndrome is characterized by the fast consumption of the physical and mental energy of the professionals, resulting to reduced efficiency and therefore inability to execute their duties in ways that would help other people.

The burn out syndrome is one of the four (4) more common occupational problems in Europe [2]. A recent research in France indicates that 1/3 of the nurses that work in the Intense Care Units experience the burn out syndrome [3]. Another recent research at the Aristotelion University of Thessaloniki has shown that 25% of the specialist doctors and 33% of the doctors who are trained to become specialist at the hospitals, manifest symptoms of the burn out syndrome [4]. The same study indicates that the burn out syndrome affects primarily people of the ages between 35 and 45 years, single men and married women doctors and those that exhibit great enthusiasm in the performance of their work. The burn out syndrome is characterized by three (3) main symptoms [5]:

1) **Emotional exhaustion.** It refers to the reduced feelings that a person has towards the recipients of his/her services. A common symptom is the unwillingness of the person to go to his/her job next morning. The person is trying to protect himself from the exhaustion by establishing a negative or aggressive communication with the others.

2) **Depersonalization.** The person treats the recipients of his services in a negative and cynical way. He treats them as objects in his attempt to be discharged from the burden of his negative emotions. A classic example of depersonalization for the doctors is when they refer to their patients with their illness. Instead for example to say that "today I visited Mr. Smith in room 7", they say that "today I visited the heart attack in room 7". The person is characterized by reduced self-esteem and increased feelings of differentiation which can lead to his personal collapse accomplishment

3) **Reduced feeling of personal accomplishment.** The person performs negative evaluation of himself especially in regards to his services towards the others. He/she experiences negative feelings and misery in reference to the results and the content of his work.

Based on the above characteristics Christine Maslach [6], a pioneer in the study of the

burn out syndrome, established a test which is called MBI (Maslach Burnout Inventory). It is considered to be the most commonly used tool for someone to self-assess whether he might be at risk of burnout. The MBI contains 22 questions covering the three (3) characteristics. While this tool may be useful, it must not be used as a scientific diagnostic technique, regardless of the results. Its objective is simply to make a person aware that anyone may be at risk of burnout. In the area of the medical practice, the main causes of the burnout syndrome are as following:

1. **The pressure in the working environment.** The working environment constitutes a major factor of the quality of life for the people who work there. Since they spend there a big part of their daily activity, the influence of the working environment has a great impact in their personhood. The increased workload, combined with the lack of infrastructure and equipment, result to increased stress during the performance of their duties.
2. **The responsibility.** All the medical practices contain a high degree of responsibility resulting to increased psychological pressure.
3. **The counteracting with people in the performance of their duties.** The medical services require a great degree of emotional engagement with the patients, empathy, clear mind and alertness. These facts in combination with the high personal expectations that the practitioners have, result to increased stress.
4. **The demographic characteristics** like the gender, the family condition, the training and the experience.

People who display work related stress and its more severe expression, the burnout syndrome, exhibit the following symptoms:

1. **Physical symptoms.** The person does not feel healthy. He/she feels exhaustion, migraines, ulcers, sleep disorders, high blood pressure, breathing problems, tension, weight loss and sexual dysfunction.
2. **Psychological symptoms.** Such as depression, anger, disappointment, alienation, low self-esteem, stress, cynicism and irritability.
3. **Behavioral symptoms.** Low performance, poor communication skills, indifference, absenteeism, interpersonal conflicts and increased feeling for refrain from the work.

It is apparent that the work related stress and the burnout syndrome constitute major problems for people's lives and their well being. In the same category we can include the cases of people who lost their jobs and the long-standing unemployed. In our days, in many countries in Europe, the unemployment rate is skyrocketed especially between the young ages. These people experience similar symptoms and they pose a huge social problem of unprecedented proportion.

2. Description of the project

The idea of the current project lies in a project that has been initiated by Dulwich Centre with the title "Children, Parents and Mental Health". [7,8] The contributors of that project were Natasha Kis-Sines, Daria Kutuzova, Ruth Pluznick, Shona Russell, David Denborough, David Newman, and Cheryl White. That project was a collection of stories from children of parents with mental health difficulties. Its purpose was not only to serve as collective therapeutic document and a document of alternative knowledge about this topic, but also as a source of questions for those working with people whose parent has experienced mental health problems.

Based on this idea, the current project is dealing with the issue of work related stress and the burnout syndrome. It focuses on a specific occupational group that is to doctors that work in hospitals in order to become specialists. In Greece the medical studies last for six (6) years. When a student graduates from the medical school, he has to serve for one (1) year as a doctor in rural medical centers in order to get some experience. When he completes this obligation he applies to several hospitals in order to become a specialist. Since there are many candidates and few openings, the waiting period is on average 5 years in the best case scenario. Once the doctor is accepted at the hospital, it takes him another 4-5 years in order to become a specialist. By adding all these years we realize that it takes about seventeen (17) years from when someone starts his studies until he becomes a specialist. That is, when he completes his training, he is at the age of mid thirties. It is apparent that this fact by itself is a possible cause of stress. In addition to that many studies have indicated that this working group experiences many symptoms of the work related stress and the burnout syndrome.

A group of four (4) doctors agreed to participate in this project on a voluntarily basis. The group was consisted of three (3) men and one (1) woman. Namely, the people of the group were Anna age 29, Simon age 36, James age 30 and Bruce age 33. That is the average age was approximately 32 years old. Anna is married, while the other three are singles. The characteristics of this project were as following:

Location: The interviews took place at the Medical School of the Democritus University of Thrace, in the city of Alexandroupolis.

Type of interview: It was a group session that lasted several hours. It was a one off session and there were two (2) brakes. We were all sitting in a circular ordinance facing each other.

If we compare this project with the one from Dulwich Centre, we will find the following differences:

1) The Dulwich Centre project referred to children whose parents had mental health problems. Therefore, it was an existing problem and it was investigating the way that the children cope with the problem. In the current project the four (4) doctors were not suffering from work related stress or at least they did not express any particular concern about it. It was a random group and the scope of this investigation is to

discuss about this issue in a narrative way and to identify ways of dealing with it.

2) In the Dulwich Centre project the sessions were person to person while in this project it was a group session.

3. The Group Session

The following section constitutes a selection of the discussion that we had during the session. In the beginning, I welcomed them in the session and I thanked them for their participation. I explained to them briefly about Narrative Therapy and the scope of this project. I assured them about their anonymity and the names that appear in this project are not the real ones. I asked them to speak freely in any order, but they should let the others to complete their sayings.

I began the session by asking questions in accordance to the Statement of Position 1 [9, 10]. So, I first asked them to give a name to the problem. They all agreed to call the problem "work related stress". It seems that they preferred this expression than "burnout" which has a heavier impact. The conversation processed in the following way:

Christos: *How is the work related stress is manifested? How do you experience it in your every- day activities?*

Anna: *It is created through the great expectations in my job. These expectations create a burden resulting to my inability to cope with these expectations.*

Christos: *You are saying Anna that your stress is created due to your inability to cope with the demands of your job? Am I right?*

Anna: *Yes. The demands of our profession are very high. We spend too many hours working continuously in the hospital and it is not humanly possible to cope with it. This results to the creation of the work related stress. However, sometimes I believe that stress is creative as well. It motivates you in a sense. But this is not always the case.*

Christos: *Is somebody else that would like to say something about it?*

Simon: *I totally agree with Anna. There are too many working hours. There are of course the regulations that determine how many hours we should work, but these regulations are violated regularly. This long working-hours attitude is very common in all the hospital's clinics and it applies especially to the doctors that become specialists. There are cases that we work continuously 36 hours shifts. After you finish your shift, you walk back home, you go to bed in order to wake up next morning to go to the hospital again. It is humanly impossible to deal with these working conditions. If the administration followed the regulations, things would be much better. There is a shortage of doctors in the hospitals resulting to these exhausting time tables. Besides, the doctors who become specialists are in the bottom of the hierarchy in the hospitals. As a result we do most of the jobs there. Of course that's one of the reasons for the work related stress. There are of course some other reasons too.*

Christos: *You are saying that there are some others reasons too. Which are these other reasons James?*

James: *Very often we are called to deal with medical problems that are not related to our specialty. Due to the staff shortage we are treating patients of all kinds. It is a situation against the specialty regulations and against our expectations. This creates a lot of stress. Another important reason is the formation of the trained team. Our participation in the team is the result of seniority. That is when we apply to become specialists, we get an application serial number and when time comes we are appointed to the position. There is not any kind of evaluation. Therefore, the teams in the clinics are formed by people that they don't have the same kind of qualifications and this constitutes a source of problems.*

Christos: *Bruce, what about the nature of your profession?*

Bruce: *That's exactly what I was thinking about. In our profession we have to deal with people who suffer and have problems. This creates additional stress in comparison to other professions.*

Christos: *Well, someone can conclude that the stress in your profession is multilateral. It has to do with the nature and the structure of your work and the very long working hours. Do I understand it correctly?*

Simon: *That is correct. When you are dealing with people who suffer and it is your responsibility and your duty to treat them and ease their pain, it creates a lot of stress. You have to perform your duties successfully. I don't know if there are any legal implications in case that you fail. But regardless of that there must be a state of tranquility during the performance of our duties. We have to be calm in order to assess each medical case with the proper attention based on the clinical picture, our knowledge and our experience. Don't forget that we don't have a lot of experience and that adds to our stress. This fact in combination with what we said before about the long working hours, result to the decreasing of the degree of tranquility and we experience physical and mental exhaustion. I should add though, that we are continuously the recipients of a lot of pressure from our supervisors in our every-day activities.*

Anna: *I would like to add something on what Simon said. Our supervisors, the specialists, have a lot of expectations from us. The stress in this way is very high especially in the first six months. Of course it is subjective, but I believe that we all feel it stronger in the beginning. We have the feeling that we are in deep waters and we must perform in a professional way. This is I believe the source of the greatest stress.*

Christos: *Suppose that you have completed your training and you are specialists working in the exact environment that you are now. How would you feel the stress then? Do you think that it would be the same, inferior or superior?*

Simon: *Judging from myself, since I am about to complete my training, as time goes by you become more experienced. That helps you to deal with many situations. You are concentrated in the work of your specialty and you don't have to do so many different things that the trainees are doing. Those things are distracting you from your main activities. You also don't have time to do some reading in the area of your interest. I might sound bitter now, but my colleagues can confirm it, in hospitals the*

trainees are working according to the time table and the specialists according to their knowledge. What I am saying is that the specialists, although they should be at the hospital on their call day, they are not. They know that the trainee will substitute them adequately and that reduces their stress and increases their potential to make right diagnosis.

Bruce: *I do not agree with what Simon said. I do believe that the specialist feel the stress too. Maybe of a different type but it is still stress. From my experience at the hospital, I see that the specialists feel the work related stress. It is focused at different issues, but it has the same intensity. I don't believe that there is any doctor who doesn't experience stress in his job.*

James: *Another aspect that must be noted is the connection of the trainee with the specialist who is going to evaluate him and to present his title. On a daily basis the trainee is working for the person who is going to evaluate him. Therefore the trainee is not able to develop any trade union actions against his immediate supervisor since his future depends on him.*

Anna: *I agree about it.*

Christos: *Is it a matter of ethics?*

James: *Definitely it is a matter of ethics.*

Christos: *Let me ask you something else. The four of you are trained at the hospital in order to become specialists. Imagine yourselves in the future, as specialist. You might work at a hospital or you might have your private practice. Having the present experience, if you can project yourselves in the future, do you believe that the situation will be different as far as the stress concerns?*

Anna: *The nature of our profession has an additional stress in respect to our decision of what specialty we should get. It is very hard to find someone who is 100% sure about the selection of his specialty. He or she always wonders whether he/she made the right decision. They all have doubts about their decisions.*

Christos: *Anna said before that stress can be creative as well. That is an element of creativity lies within stress. Do you, the rest, feel the same about it?*

James: *I don't think so. There is the motive to do your job but for the stress to be creative, I don't think so. It's a different thing if there are some expectations that you have to comply with. I would call this motivation. It is not stress. I don't know.*

Simon: *I believe that partially Anna is right. I caught myself to perform better on secondary activities under stress, especially on call days. It was like having a mental clarity in doing those tasks. But I wouldn't say that it was creative.*

James: *I think that what you describe Simon is a situation of "Fight or Fly". It is not creativity.*

Simon: *Yes, I agree with that. It feels like you have taken drugs and you feel that you*

can do anything. You are in a condition of hyper stimulation.

Christos: *Bruce, would you like to add something?*

Bruce: *Whenever I tried to do something creative or to do something more, I was disappointed. I realized that the general conditions do not allow you to do something that is creative. So far I have never had a chance to succeed.*

Christos: *Anna let me ask you something. Does stress prevent you to do things in your personal live that you would like to do?*

Anna: *Of course. The work related stress has also to do with the feeling of inability that you experience during the performance of your duties. Therefore, you need to read more and spend more time in the clinics, resulting to the compression of your personal time. Another effect is that you spend less time with your significant one. You can't share things with him and your friends. Your social life changes dramatically. It also prevents me from doing some other activities like going to the gym, going for shopping, meeting my girlfriends for a coffee.*

Christos: *Time is one important element. What about the stress though?*

Anna: *Yes. You become more irritable and temperamental.*

Christos: *Bruce do you agree with Anna?*

Bruce: *I totally agree with Anna.*

Simon: *Basically I agree with my colleagues too. I would like to add another element though. Many times stress makes you sybaritic. When you have some conflicts with your friends or your significant one, you relent, where in other cases you wouldn't. I have experienced that.*

James: *Stress destroys your creativity. I personally don't feel much stress during my work or during my spare time. What affects me the most is that it destroys my creative thinking. Before I started my training, I used to do many creative things with my professor that I can't do anymore. I feel drained. The daily routine of going back and forth to work, it makes me to think about the meaning of it.*

I ask a question in order to identify any unique outcome.

Christos: *Are there any days, any times when you feel that the stress is reduced? That is lower compared to its usual intensity?*

Simon: *I would say as time passes by. I am ahead of my colleagues since I am about to finish my training. I have noticed it with James. Since he first started, the expression of his face has changed, the way he walks is different, is more relaxed, and the subjects of our discussions are different (laughs). Although we do not meet that often, I have noticed a big difference in his behavior. I have also noticed this on myself too. I often hear from people who know me, that before I used to talk only about things related to my job. Now things are different. I might still talk about some*

important issues of my job, but for some other stressful issues, I don't feel the urge to talk about them. I have learned to manage them. I believe that there is a difference. It has to do with the experience you get through time.

Christos: *Simon, since you are about to finish and you have more experience than the others, maybe you are handling this type of stress differently. In your case though what would you say about the stress related to your future after you complete your training?*

Simon: *You hit the jackpot now (laughs). I have never had the stress of what I am going to do in the future. All my life my decisions were taken in a moment. In the same way I chose my medical specialty. I am not very organizing type. It works for me and I feel comfortable about it. In some cases I realize that maybe it's not to my benefit. But that's how I am. Now as far as my colleagues concern, when they will be getting nearer to completion, they will have many questions about their future. This will reach its highest intensity, during their last quarter of their training. The stress will be enormous. I would say that the work related stress decreases, as time goes by, while the stress about the future increases.*

James: *Simon described it very vividly. In my case, since I have three (3) more years to complete my training, I consider this stage as transitional. Even though now at the hospital that I have a salary, if it was possible to skip those three years, I would do it gladly. The problem is what's next.*

Bruce: *I like to plan things for the future (laughs). There is of course some stress but I am trying to organize things in advance. I have already started to investigate what I can do in the future. It has to do with my specialty as well. I do not have too many options. However, I examine the possibilities of doing some research or to go abroad.*

Christos: *Anna, are there any moments that you feel more relaxed and you are experiencing less stress?*

Bruce: *I am sorry for my intervention but I wanted to say that I have this feeling when I finish my duties at the hospital and I go home. That lasts until the next morning.*

James: *When you are on duty and this lasts for 36 hours that is the biggest problem. And this happens against the regulations. If we had the appropriate days off, we would be fine.*

Christos: *What do you do in order to resist to the stress? What actions are you taking in order to reduce it?*

Anna: *What helps me a lot, is exercising. Whenever I have a chance I go to the gym. I feel that I am discharged. Another thing is shopping (laughs). To be with good friends is another thing that helps me to release my stress. Or to do some activities with your significant one, like going to a restaurant or to the movies. I would also like to add that when you are rewarded for your job it helps to release the stress. Whenever I did a good diagnosis I felt so good that the stress went away. It is the satisfaction that you get.*

Bruce: *I am trying to get involved with things that are not related to my job at the hospital.*

James: *I do the same. I am trying not to get involved with medical things. For instance I don't watch these popular TV series with doctors and hospitals (laughs) as many do. A lot of doctors that I know are watching these TV series, recycling all the time their conversations about the same issues. Another thing, no matter how strange it might sound to you, is that most of my friends are not doctors. And I believe that this helps a lot because you don't recycle the same conversations about medical subjects. Finally, another thing that helps a lot is my contact with some of my professors. Through the interesting discussions that we have in various fields, I feel stress to be diminished.*

Christos: *I am sorry Simon, would you like to add something?*

Simon: *Yes. I agree with what colleagues said, like exercise, company with other people, things not related to the hospital etc. But Christos, I think that you are talking now with four (4) people that they know how to handle these things. But there are some other trainees, and it's unfortunate that we don't have here anyone of them now, who when they are asked in which way are they confronting stress, they would tell you that they travel (everybody laughs).*

James: *Indeed, It's funny to hear that when they are stressed they are going for a trip. If it is for you to go to the "Land of Fire" (Tierra del Fuego) in order to release your stress, that doesn't make any sense.*

Simon: *It is really funny. When you ask them they always say that they are going for a trip. And where do they go to? They go to medical conferences (laughs). This is true. In a way they are trying to escape but they end up in the same loop.*

James: *I have noticed something else, especially with women. They start crying after they finish their duties at the hospital. Maybe it's a relief reaction.*

Simon: *Yes, I have seen that too.*

Christos: *Anna, since you are the only lady here, I would like to ask you whether the work related stress is associated with your gender.*

Anna: *I believe that there are different factors of the work related stress that affect men and women. While the woman experiences the stress more on her personal life, looks, significant one, children, the man is stressed by his job placement.*

Bruce: *Well, I am not a woman but if I could be in their shoes I would probably have an issue with elegance. Well it's hard to see a woman to be for 36 hours in a hospital taking care patients, handling blood and biological fluids without having a chance to take care herself. I think that I would have some problems under these circumstances.*

Simon: *Would you accept her to work fewer hours than you, under those circumstances?*

Bruce: *No, no I wouldn't accept it.*

Simon: *When a woman gets into the hospital and follows the schedule, she loses her femininity. I have noticed too, that they are aging faster. In many cases they sacrifice more things than men. If for instance, are mothers, they sacrifice time that they could spend with their children. (The others agree with this statement). Anna is lucky in a sense because she is married. But for the single women who start their training, the situation is very difficult. That's why it is very common to see a woman doctor to get married to a man doctor. There is more understanding between them about the demands of their profession. In the opposite case, it is extremely difficult for a woman to explain to her husband (who is not a doctor) the demands and the dedication of the medical profession. The stress is tremendous and it affects their lives in many ways.*

Christos: *Anna, you are the only one here that you are married. Do you believe that if you were single the work related stress would affect you in a different way than it affects you as a married woman?*

Anna: *I can say that the fact that I am married it helps me to cope with the stress. Thanks god I have a very normal relationship with my husband. I believe that I have solved this problem. I also believe that it helps the fact that he is not a doctor. So when I go home, I don't have to discuss about medical issues. However, there is the issue that Simon described. Since he is not a doctor he is not able to fully understand the demands of the profession. But there is understanding.*

Bruce: *Well Anna doesn't have any children. If she had I believe that she would be more stressed. A child is an additional responsibility.*

Christos: *As we are about to conclude this meeting and by having discussed issues that are related to the occupational stress, what would you think about it, since you have listened to each other's opinions? Have you noticed something that you hadn't experienced or thought about it before?*

Anna: *No. I am covered. I would like to add though that from my experience the doctors' idiosyncrasy is different from other people. They are more closed to themselves, a little bit more antisocial, I could say. They also don't take care much of themselves, as other people do.*

Bruce: *I agree too. There are not all people the same. There are hills and valleys. However, everybody in this profession knows that it is a demanding profession and requires sacrifices. It's a matter of choice.*

Simon: *I believe that in this profession everything is well organized, as far as the regulations and the legislation concerns. The bad thing is that no one follows the rules. I believe that it is absolutely normal to have stress. The same applies to the behaviors too. Another source of stress, that we haven't discussed about it yet, are people. They are more informed now days and therefore they have increased demands and expectations. Let me sum up the things. If the hospitals apply properly the regulations, then the work related stress will be milder. There are always going to be what Anna called "the creative stress". But this is a positive fact.*

Christos: *I have heard about the difficulties of your profession like the long hours, the low payment, the stress, the non conformity with the regulations and so on. However, your profession provides to you a moral satisfaction since you are helping needing people and cure their illnesses. Does this compensate for all the difficulties that you experience during the performance of your duties?*

Anna: *No, no.*

James: *No. I believe in any profession there is a moral element. The fact that they put us in a nice box with a beautiful ribbon, and they say to us that your profession is an important function, it presses us.*

Anna: *You get temporarily satisfaction for helping people. It comes and goes.*

Simon: *I don't agree. I live in a village and quite often people are calling me to provide my services, charge free of course. The satisfaction that I get from that is very high. It is the "thank you" that they will say to you, or the coffee that they will offer to you. It feels very nice. Also during my duties at the hospital, whenever someone thanks me for my services, I feel to be recharged. Maybe I am romantic.*

James: *Well in a sense we all feel that way. But not to the point that the negative facts that we are experiencing every day, to be erased.*

Anna: *Also in Greece there is no recognition. If you do your job well and you make successful diagnosis, has no effect to your progression. We are all in the same barrel. There are no incentives.*

James: *There is a condition of cronyism in our profession. We are appointed at the hospitals as a result of seniority. It is not according our qualifications. It is very common to see trainees that they do absolutely nothing. And regardless of that, they will become specialists. In a sense they have "a good time" and the hard working ones are doing most of the job. It has passed my mind to do the same. I thought to pretend that I am inefficient. I won't do it of course but it's tempting.*

Christos: *I would like to thank you all for your participation in this conversation. I would like to know though, what do you think about this process? Did our conversation help you at all in understanding and dealing with the work related stress?*

Simon: *I believe it worked. It is very good to listen to the opinions of my colleagues.*

James: *Yes. If it was just one person it wouldn't be that good. We have realized that there are many common issues that we are faced with and it's always good to hear the ways with which our colleagues are dealing with the work related stress.*

Christos: *Again, I thank you so much for your time. I remain in your disposal on any matter that you might have. We will be in touch.*

4. Collective Documents

Most of the surveys that have been conducted, if not all, for the investigation of the work related stress at the hospitals, were quantitative surveys. That is, the researchers used questionnaires in order to investigate the size and the intensity of the work related stress and the burnout syndrome among the doctors. The present project has a different approach. In a narrative therapy way of questioning, the participants describe their experiences and their feelings. Through this process each member of the group can share his/her experiences, to listen how other colleagues deal with the problem and to provide some advice to others who are dealing with similar problems.

It must be noted that the four (4) doctors, who participated in this project, were randomly selected and they had not expressed any particular concern about their work related stress. That is they never felt stressed enough, in order to ask for counseling. It must be noted too, that during the session I asked many landscape of action question and not as many landscape of identity questions. It has to do probably with the fact that it was a group session and time constrains.

The conversation with the doctors can be divided in two (2) parts. The first part refers to the ways that these people experience the work related stress. How it affects their lives. What consequences it has in their relations with others. How intense it is. Are there any common characteristics or each one of them perceives it in a different way? The second part refers to the ways that they are dealing and coping with the work related stress. What actions do they take in order to get relieved from the stress? What skills are they developing in order to cope with it? What are their inspirations for their future?

Upon David Denborough's suggestion, two separate documents can be produced from this project. The first one will include the ways that the work related stress affects peoples' lives. Since this is an ongoing project, some other professions will be investigated. Therefore, I believe that it will be interesting to record the ways that the work related stress is manifested within these professions. Are there going to be any similarities or any distinctive differences? Do people from different professions deal with stress in similar or different ways? By sharing this knowledge, people from different professions will be able to assess their stress and to examine their perspectives. The second document will include the ways that these people are dealing with the stress. What actions do they take in order to decrease the harmful consequences of their stress? This can become a collective document which will be shared by all these people and it can also be a useful reference for everybody in these professions.

4.1 First Collective Document

Collective narrative documentation is a methodology in order to be used as a response to collective trauma. According to David Denborough, *"Often, in our work, we are responding to effects not only of individual trauma, but of collective trauma. This is true in situations of genocide, disaster and military occupation, but it is also true in women's experience of men's violence, those experiencing mental health struggles, and so on. The traumatic experience that many individuals face is often shared in*

some way by a broader collective” [11]

Collective documents have been produced not only in cases of trauma but in a broader variety of contexts. They have been used to document the skills and knowledges of:

- People experiencing anxiety and depression (Moreland Community Health,2008)
- Those who have experienced bullying
- Employees of companies who have been experienced conflict
- People seeking supervision
- Workers in East Timor ant etc [11]

The case of the doctors, in relation to the work related stress, lies within this context. After the one extensive session that we had and our discussion in a narrative way the doctors talked about the ways that they experience the work related stress. They all responded to my questions and they even established a conversation between them. Their responses to my questions in reference to the ways that the work related stress is manifested and the main reasons for that constitute the generating material for the first collective document.

Doctors who are specializing in Greek hospitals and are residents. How they experience the Work related Stress in their jobs

This document describes the ways that these doctors, who are trained in hospitals in order to become specialists, are experiencing the work related stress in their jobs. This collective experience might be possible to be shared with other doctors from different hospitals in Greece and/or different regions of the world. It can also be shared with other professionals like nurses, teachers and social workers who are facing similar problems.

The demands and the expectations of the profession

The demands of our profession are very high. We spend too many hours working continuously in the hospital and many times it is not humanly possible to cope with it. This fact, in conjunction with the great expectations that our supervisors and our patients have from us, result to the creation of the work related stress. Our supervisors, the specialists, have a lot of expectations from us. Therefore the stress is very high especially during the first six months. Of course each one of us perceives it in a different way, but we feel it stronger in the beginning. We feel that we have been thrown into deep water and we have to perform in a professional way.

I find it very difficult to cope with the working hours. They are of course the regulations that determine how many hours we should work, but these regulations are violated regularly. There are cases that I work continuously 36 hours shift. When I finish, I walk back home exhausted in order to wake up next morning to go the hospital again. Very often we are called to deal with medical problems that are not related to our specialty and this causes a lot of stress.

The structure of the system

We believe that there is something wrong in the formation of the training teams. Our participation in a team is the result of seniority. That is, when we apply to become

specialists, we get an application serial number and when time comes, we are appointed to the position. There is not any kind of evaluation. Therefore, the teams in the clinics are formed by people that they don't have the same qualifications and this constitutes a source of problems. Another aspect that must be noted is the connection of the trainee with the specialist who is going to evaluate him/her. On a daily basis the trainee is working for the person who is going to evaluate him/her. Therefore, the trainee is not able to develop any trade union actions against the immediate supervisor since his/her future depends on him. I feel that in the Greek hospitals there is no recognition. If you do your job well and you make successful diagnosis, has no effect to your progression. We are all in the same barrel. There are no incentives. Due to the staff shortage we are told by our supervisors to treat patients of all kinds beyond our specialty. This is clearly a case against the specialty regulations and against our expectations. It creates a lot of stress.

The uncertainty of the future

The nature of our profession has an additional stress in respect to our decisions of what specialty we should get. It is very hard to find someone who is 100% sure about the selection of his/her specialty. He or she always wonders whether he/she made the right decision. To some extent we all have doubts about our decisions. I am about to complete my training and therefore I can see things from the finishing line. As far as my colleagues concern, when they will be getting nearer to the completion, they will have many questions about their future. This will reach its highest intensity during their last quarter of their training. The stress will be enormous. From my experience I would say that the work related stress decreases as time goes by, while the stress about the future increases. Some of us, even though we are in the beginning of our training, have already started to investigate employment possibilities for the future. We somehow have the feeling that we do not have too many options. We are considering the case of migration to other countries.

The nature of the profession

In our profession we have to deal with people who suffer and have problems. It is our responsibility and duty to treat them and ease their pain. We must perform our duties successfully. We need to be calm in order to assess each medical case with the proper attention based on the clinical picture, our knowledge and our limited experience. This creates additional stress in comparison to other professions. Some of us, due to the lack of experience, have a feeling of inability during the performance of our duties. This forces us both to spend additional time to the clinics and to read more, resulting to the compression of our personal time.

Personal life and the relations with the significant one

Another effect in our lives, in relation to our profession, is that we spend less time with our significant ones. We can't share things of our work with our significant ones and our friends. Our social lives change dramatically. Not only that, but we also have the feeling that we can't do other activities like going to the gym, meeting friends, going to the movies, playing games and going for shopping. What affects me the most is that it destroys my creative thinking. Before I started my training, I used to do many creative things with my professor that I can't do anymore. I feel drained. The daily routine of going back and forth to work, it makes me to think about the meaning of it. Sometimes we have the feeling that we are becoming more irritable and temperamental because of our job.

Gender and marital status

We believe that there are different factors, of the work related stress, that affect men and women. While women experience the stress more on their personal lives, their looks, their significant ones and children men are stressed more about their job placement. I am not a woman but if I could be in their shoes I would probably have an issue with elegance. Well it's hard to see a woman to be for 36 hours in a hospital taking care patients, handling blood and biological fluids without having a chance to take care herself. I think that I would have some problems under these circumstances. When a woman gets into the hospital and follows the schedule, she loses her femininity. I have noticed too, that they are aging faster. In many cases they sacrifice more things than men. If for instance, are mothers, they sacrifice time that they could spend with their children. For the single women who start their training, this situation is very difficult. That's why it is very common to see a woman doctor to get married to a man doctor. There is more understanding between them about the demands of their profession. In the opposite case, it is extremely difficult for a woman to explain to her husband (who is not a doctor) the demands and the dedication of the medical profession. The stress is tremendous and it affects their lives in many ways. I can say that the fact that I am a married woman, it helps me to cope with the stress. Thanks god, I have a very normal relationship with my husband. I believe that I have solved this problem. I also believe that it helps the fact that he is not a doctor. So when I go home, I don't have to discuss about medical issues. However, there is the issue about it. Since he is not a doctor he is not able to fully understand the demands of the profession. But there is understanding.

Moral satisfaction and status of the profession

I live in a village and quite often people are calling me to provide my services, charge free, of course. The satisfaction that I get from that is very high. It is the "thank you" that they will say to you, or the coffee that they will offer to you. It feels very nice. Also during my duties at the hospital, whenever someone thanks me for my services, I feel to be recharged. Maybe I am romantic. In a sense, we all feel that way. But not the point to erase the negative facts that we are experiencing every day. We get temporarily satisfaction for helping people, but it comes and goes. We do believe to the high values of our profession, this is one of the reasons that we chose it, but we also believe that there is a moral element in any profession.

4.2 Second Collective Document

After we discussed about the effects of the work related stress in their lives and the ways that it is manifested, I asked them to discuss the ways that they deal with it. What do they do in order to reduce it? What skills are they developing in order to cope with the stress? This conversation presented me with the chance to thicken their stories. It provides also the opportunity to create a collective document that can be used by their colleagues in order to find ways to deal with the work related stress. However, I have the feeling that I did not explore and develop these conversations to the degree that I wanted to. I used more landscape of action questions rather than landscape of identity. There were opportunities to extent my questions and to establish rich descriptions about their solution knowledge. Since this project will go on with some other professions, this fact will guide me to further explore this area with the other groups. A second collective document has been produced about the way they cope with the work related stress as following:

Doctors who are specializing in Greek hospitals and are residents. How they cope with the work related stress in their jobs

This is a document that describes the ways that these doctors, who are trained in hospitals in order to become specialists, are coping with the work related stress in their jobs. It is hoped that this document can be used by other doctors in Greece, or in any other country, and by other professionals in occupations that have similar characteristics like nurses, social workers and teachers.

Engagement to various activities

We all are trying to get involved with things that are not related to our jobs. When we are socializing with other people, we avoid to discuss medical issues or to share stories from the hospital. We are participating in various physical activities like swimming, soccer and basketball. What helps me a lot, is exercising. Whenever I have a chance I go to the gym. I feel that I am discharged. Another thing is shopping. To be with good friends is another thing that helps me to release my stress. Or to do some activities with your significant one, like going to a restaurant or to the movies. I would also like to add that when you are rewarded for your job it helps to release the stress. Whenever I did a good diagnosis, I felt so good that the stress went away. It is the satisfaction that you get. We know that some of our colleagues are watching the popular TV series with doctors and hospitals. We don't think that this is a good idea because they are recycling, all the time, their conversations about the same issues. Also when we ask some of our colleagues how they get discharged from the work related stress, they say that they travel. The irony is that they are attending medical conferences, either in the country or abroad, and as a result they don't have a chance to relax and to get discharged from the pressure.

Friends and relations

We enjoy the company of good friends. This helps a lot to release the stress. We discuss various things about the news, politics, social issues and gossiping. When we are with our friends, even if there are present few doctors, we avoid talking about medical issues. Another thing, no matter how strange it might sounds, is that most of my friends are not doctors. And I believe that this helps a lot because you don't recycle the same conversations about medical subjects. Finally, it helps a lot my contact with some of my professors. Through the interesting discussions that we have in various fields, I feel stress to be diminished.

Study as a compensation for the lack of experience

We believe that one thing that contributes to the work related stress is the feeling of inability that we experience during the performance of our duties. In order to overcome that, we read more and we spend more time in the clinics. In many cases though we consider this as a positive incentive in order to become better doctors. I would also like to add that when you are rewarded for your job it helps to release the stress. Whenever I did a good diagnosis, I felt so good that the stress went away. It is the satisfaction that you get.

Upon completion of the two documents, they were sent to the four (4) doctors in order to read them and to make their comments. It was not possible to have an oral ceremonial re-telling due to time constrains and schedule arrangements. However, they have received them via e-mail and they have responded to my letter (Appendix A). From their responses, it seems that they appreciated this process and they enjoyed reading the two documents. The documents reminded them the long session that we had some time ago, and they indentified themselves with the content of the documents.

They also expressed their interest to participate in the exchange process of the collective documents with other doctors and occupational groups.

4.3 Next steps

The writer's intention is to continue this project with some other professions, like the nurses and the teachers. It would be interesting to investigate the similarities and the differences in the way these people perceive and cope with the work related stress. The documents that will be produced could be interchanged between people both from the same and from different professions. It would be interesting too, if this project could take place in some other countries, in order to examine the influence of the various cultures. Finally, people who lost their jobs due to the current financial situation could be an equally interesting group for investigation.

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APPENDIX A

The two collective documents were sent to the doctors with the following attached letter:

Dear (Anna, Simon, James and Bruce)

It has been some time since our last meeting at the university. I hope that you are well. Once again, I take the opportunity to thank you for your participation in the long session that we had regarding the work related stress in your job. It was an excellent opportunity for me to practice the principles of narrative therapy and to complete my project. I really enjoyed the whole process and I hope that you felt the same way.

Attached, please find two collective documents that I produced from our conversation during the session. Since it is very difficult to have another session with all of you, in order to read them together, I will appreciate if you can go through those documents and send back to me your comments, thoughts and ideas about them. I would also like to inform you that in the near future, I intent to have similar meetings with some other people from different professions like nurses, teachers and social workers regarding the work related stress in their jobs. The collective documents that will be produced will be interchanged between the participants in order to make a contribution. Needless to say that the anonymity of the participants is guaranteed.

Therefore, I am asking for your consent to do that. I would also like to inform me whether you are interested to be part of this extended project. In any case, I will keep you updated about any new developments.

I wish you all the best.

Kind regards,

Christos D. Gandas

All of them kindly replied to me with the following letters:

I received the following letter from Simon.

Dear Christos,

Thank you for your letter and the attached documents. I went through them and they reminded me the session that we had. The documents reproduce in a vivid way our conversation and the thoughts are popping out of my mind. I have to tell you that our session was a new experience for me because we discussed about a serious issue and we did it as a group with my colleagues. I really enjoyed it and now that I am going through the documents, I feel that is very helpful. Needless to say that you can forward these documents to other groups of people. I will be glad if you keep me updated with all new developments. Finally, I would like to inform you that by the end of the year I will complete my practice and I will become a specialist. It's about time.

Regards,

Simon

I received the following letter from James:

Hi Christos,

I received your letter and the collective documents. As I was reading them, I remembered the session that we had and our extensive conversation. I believe that the two documents describe accurately what we said during the session. I can't think of anything new that I would like to add, but as you know life goes on and you never know how things will be in the future. I would like to tell you that I enjoyed the session too and it helped me to realize that my colleagues are experiencing similar feelings and thoughts about this issue. I am about to start a PhD, at the same time with my specialty, and I am thinking that stress might become bigger. However, I feel confident about it and I believe that I will succeed. Since I don't have any family obligations, I believe that it is the right time to do it.

Feel free to circulate these documents to other groups. I will be happy if you keep me updated and I wish to participate in the document exchange project.

All the best.

James

The letter from Anna was as following:

Dear Christos,

I am really glad to receive your letter. I am doing well and I have just returned from my summer holidays. I read both documents you sent me. I found them very interesting and they reminded me the session that we had at the university. I would say that I identify myself with the context of the documents. I think it's a good idea to write down our discussion in this "concentrated" form. It helped me a lot to think again what my colleagues and I have said during that session.

If you continue this project with other professions, I would like to participate. You can process the collective documents wherever you want to. Please keep me updated.

Best regards,

Anna

Bruce's letter was as following:

Dear Christos,

It's nice to hear from you. I carefully read the two collective documents you sent me. I believe that they are an excellent overview of our session. As a matter of fact I intended to contact you, after our session, but the daily routine prevented me to do so. I would like to tell you that the discussion we had with my colleagues, about the work related stress, helped me to deal with it. I believe that it's nice to share your thoughts and feelings with other people who are facing similar problems.

Definitely I would like to participate in the project. Feel free to send the documents to other people. If you need anything else from me, do not hesitate to contact me.

All the best,

Bruce