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Psychological Foundations of Emotional Burnout in Adolescents with Disabilities

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Abstract: This article examines the psychological foundations of emotional burnout in adolescents with disabilities. The study analyzes internal and external factors influencing the development of emotional tension, including individual psychological characteristics, stress resilience, social environment, communication opportunities, and the availability of psychological support resources. Additionally, typical manifestations of emotional burnout—such as anxiety, fear, depressive mood, stress, and frustration—are explored as key indicators of emotional strain. The findings highlight the importance of identifying emotional vulnerability in this group and emphasize the need for preventive and corrective psychological interventions to support their emotional well-being and social adaptation.

Keywords: adolescents with disabilities, emotional burnout, stress, psychological factors, emotional states, social adaptation, fear, anxiety, frustration, psychocorrection, psychoprevention.

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Introduction

The process of acquiring social experience and consciously internalizing it throughout one's life activities is referred to as socialization. Socialization is the process through which an individual becomes integrated into society, adopts its norms, values, expectations, and demands, and demonstrates these principles through their behavior and communication. This process is reciprocal: as the individual adapts to societal influence, they also exert a certain degree of influence on their surroundings.

For adolescents with disabilities, socialization is primarily expressed through communication and participation in various cooperative activities. The social influences directed toward such adolescents are not absorbed mechanically; rather, they are processed in relation to their individual psychological characteristics, emotional state, cognitive development, and perception of the world. Therefore, the same social environment or external influence may lead to different behavioral responses and adaptation strategies among different adolescents.

The foundational elements of social behavior in adolescents with disabilities are formed primarily within the family and the system of familial relationships. In other words, the initial patterns of personality

development are established in the family environment, and these patterns are later refined and strengthened under the influence of other social groups within the broader society. Alongside the family, the local community also plays a significant role in shaping how social influences are perceived by adolescents with disabilities. The environment in which a child grows inevitably affects them, and both its strengths and shortcomings are reflected in the child's psychological development.

Furthermore, educational institutions — including schools and other learning environments — constitute another important source of social influence. It is within these settings that the understanding of social norms and values is purposefully structured, and where educational and developmental processes are systematically integrated"[1;88].

Materials and Methods

From this perspective, teachers who are able to respond to the needs, interests, and expectations of adolescents with disabilities are more likely to be recognized and accepted by them. Conversely, if the teacher's approach does not align with these psychological needs, their influence may generate negative reactions rather than constructive engagement.

The social climate formed within the classroom also plays a significant role. In some classroom environments, cooperative interaction, peer support, and collective responsibility are well established. Such groups often create conditions that encourage open discussions, collaborative problem-solving, and constructive debate. A positive classroom climate naturally directs the social behavior of its members toward prosocial and adaptive forms.

The collected observations indicate that the perception and internalization of social influences among adolescents with disabilities largely depend on the internal dynamics of the group, the quality of peer communication, and the overall structure of interpersonal relationships. These factors directly affect the adolescent's self-evaluation, identity formation, and personal development.

Literature review

The term "emotional burnout" was first introduced into scientific literature in 1974 by the American psychiatrist H. J. Freudenberger. Initially, this concept was used to describe changes in the psychological state of a mentally healthy individual and referred to emotional exhaustion that emerges as a result of prolonged, intensive, and emotionally charged interactions with clients or patients in the process of providing professional care. Research on the phenomenon of emotional burnout has been extensively continued by numerous scholars. In foreign psychology, the contributions of M. E. Seligman, L. Abramson, K. Peterson, C. Carver, M. Scheier, and S. Maddi are particularly significant in the development of this field. In Russian psychology, this issue has been examined by researchers such as K. A. Abulkhanova, T. N. Berezina, L. Ye. Keselman, M. G. Maskevich, K. Muzdybayev, O. A. Sichev, and N. G. Kapustina, whose scientific work has further expanded the theoretical and empirical understanding of the concept. According to the definition of the World Health Organization, **"Emotional Burnout Syndrome" (EBS)** is a form of physical, emotional, or motivational exhaustion associated with reduced work productivity, fatigue, insomnia, and increased susceptibility to somatic illnesses. Currently, work-related stress issues considered within the framework of EBS (including difficulties related to managing one's own life) are classified under the heading **Z73.0 "Burnout Syndrome"** in the 10th revision of the International Classification of Diseases (ICD-10)**.** Initially, the term was described as a state of exhaustion accompanied by a sense of inefficacy. Modern researchers emphasize that, among adolescents with disabilities, emotional burnout may be associated with the development of chronic fatigue syndrome [2;96].

Analysis and results

In recent years, considerable attention has been devoted to the emotional sphere of the individual in scientific research. It is worth noting that in contemporary foreign literature, the phenomenon of emotional burnout is described as a form of emotional disturbance arising under the influence of various

external and internal factors. Among diverse psychological phenomena, emotional states hold a particularly significant place.

The study of emotional burnout and its causes among adolescents with disabilities is considered a specific psychological research direction. This includes the need to assess emotional states using psychodiagnostic methods, develop psychological strategies for preventing their occurrence, and conceptually describe emotional states such as fear, anxiety, worry, stress, frustration, and depressive moods, which represent manifestations of emotional tension. This research area remains highly relevant today.

Alongside the growing recognition of the universality and significance of the emotional domain, an increase in emotional disorders—primarily anxiety and depressive conditions—has also been observed. In analyzing the structural composition of emotional functioning, the theoretical framework proposed by E. P. Ilyin plays a crucial role. According to Ilyin's conception, emotional burnout is categorized as part of emotional states [3;36].

According to researcher R. S. Rubin, emotional tension is characterized as an unfavorable emotional state linked to an individual's evaluation of events occurring in their life and the extent to which their needs are satisfied [4;222]. An analysis of existing scientific literature shows that researchers often use related terms such as emotional disturbance, emotional strain, and stress when describing the concept of emotional tension.

Researcher S. Folkman defines the term tension as a form of intense and fluctuating emotional state. In her view, tension (as a psychological state) is expressed through feelings of pressure, imbalance, and readiness to alter one's behavior in threatening situations. She argues that the addition of the term emotional to the concept of tension is unnecessary, since any form of tension is inherently emotional in nature.

In contrast to this approach, the works of N. I. Nayenko and O. V. Ovchinnikov offer a different perspective. These authors distinguish between two types of tension: operational tension and emotional tension. According to their findings, operational tension arises when an individual maintains a neutral attitude toward the activity itself, and it is characterized by the dominance of the task-related motive. In this framework, operation refers to repetitive and structured internal actions performed within a system. Operational tension is directly associated with high work pace under conditions where motives and goals are aligned. "Emotional tension, however, emerges when there is a sharp intensification of motives and goals, resulting in a discrepancy between the objective meaning of an activity and its personal meaning for the individual. The authors conclude that emotional tension is typically stronger and more influential than operational tension" [5;208].

Researcher I. Ya. Nechayenko attempts to conceptualize emotional tension by linking it with the notion of emotional exhaustion. According to the author, the term emotional exhaustion was first introduced in 1974 by American psychiatrist H. J. Freudenberger to describe the psychological state of healthy individuals engaged in intensive and emotionally demanding interactions with clients. Initially, the term referred to a state of fatigue accompanied by feelings of inefficacy. Later, the phenomenon of emotional exhaustion was further examined and systematized by researchers such as B. Pelman and E. Hartman, who identified three core components:

emotional or physical fatigue;

a sense of personal inefficacy;

decreased work productivity.

According to researcher **A. V. Suvorov**, the development of **emotional fatigue** is triggered by emotional tension, which functions as a provoking mechanism. Based on this perspective, it can be concluded that persistent emotional discomfort and stress affect not only an individual's psychological and physiological functioning, but also their work performance [6;101]. Therefore, understanding the essence of the

concept of emotional tension requires examining psychological states such as stress.

Among adolescents with disabilities, responses to stress may vary externally; however, the underlying psychological mechanisms and outcomes often demonstrate similarities. These responses are generally classified into **two types**. The first is an **inhibitory reaction**, characterized by reduced activity, difficulty processing or retaining new information, and an inability to perform even simple tasks. In such cases, dominant emotional states include fear, dependency, and apathy. The opposite form, marked by heightened activity, is referred to as an **impulsive reaction**.

Emotional tension in adolescents with disabilities is influenced by both direct and indirect factors, including increased workload and time constraints. Excessive tasks, insufficient time, immersion in work, and social withdrawal are among the primary contributors to occupational stress across many professional domains.

Since humans are inherently social beings and psychological processes play a leading regulatory role in their functioning, stress becomes a central regulatory mechanism. Some authors categorize factors leading to psychological stress into two major groups: **informational stress** and **emotional stress**. Informational stress occurs when an individual is unable to process incoming information adequately, lacks sufficient time to make correct decisions at the required pace, faces high responsibility for decisions made, or experiences cognitive overload due to excessive information.

In emotional states where self-regulation is weakened, adolescents with disabilities may exhibit characteristics such as increased irritability, emotional instability, impulsivity, excessive reactivity, and difficulties maintaining behavioral balance. Individuals with heightened emotional sensitivity tend to act impulsively and make decisions without sufficient reflection.

Conclusion/Recommendations

In conclusion, it can be stated that the emergence of emotional burnout among adolescents with disabilities is influenced by several factors, including their individual psychological characteristics—such as the level of emotional stability, emotional regulation skills, behavioral tendencies, specific features of the nervous system, vulnerability of the nervous system—as well as social and developmental traits associated with adolescence. Preventing emotional burnout and stress in adolescents with disabilities requires creating effective conditions for their socialization. This includes identifying their interests and organizing meaningful leisure activities aligned with those interests, as well as involving them in sports, art, and other areas of activity that promote social engagement and active participation.

The social adaptation of adolescents with disabilities largely depends on the availability of opportunities that allow them to test and apply their skills and abilities across various activity domains. Engagement in socially meaningful activities contributes to the prevention of emotional burnout and stress, while simultaneously fostering social activity, self-confidence, and a sense of personal capability.

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