

## The Peculiarities of Confidence Manifestation and Psychological Conditions of its Development in the “Doctor – Patient” System

### Особливості прояву довіри та психологічних умов її розвитку в системі «лікар – пацієнт»

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### ABSTRACT

**The aim of the article** is to present the results of empirical study on the peculiarities of the manifestation of confidence and psychological conditions of its development in the "doctor-patient" system.

**Methods.** The following methods were used: empirical method to study the manifestation of patient's confidence in a doctor – "Methodology for assessing confidence / suspicion of an individual in other people" (adapted by O. Savchenko, V. Petrenko); in order to research the ability to take risks in interpersonal communication – the technique "Personal decision-making factors"; to identify strategies of self-presentation of doctors – the methodology "Strategies of self-presentation" (S. Lee, B. Quigley); mathematical and statistical methods of data processing.

**The results of the research.** The research has proved that patients show a high level of trust in doctors: the subjects are able to form stable positive relationships with other people, interact constructively with others in specific situations, they are confident in other people, and are able to rely on them in the process of interaction. The psychological conditions of confidence development in the "doctor-patient" system have been empirically investigated. According to the data obtained, the self-confidence of patients appears at an average level: in general, they trust their feelings, experiences, logical conclusions, but, at the same time, they may sometimes have doubts about their own competence, they do not always believe in their own strength, significance, value. It has been established that the studied patients have a high level of willingness to take risks in interpersonal communication, that is, they are ready to take a certain risk by establishing confidence in another person. Peculiarities of self-presentation among doctors have been studied. Among the studied doctors, the strategy of "Attractive behavior" is dominant.

**Conclusion.** According to the results of the study, the assumption that the development of confidence in the "doctor-patient" system is determined by a

*complex of psychological conditions (self-confidence, willingness to take risks, the effectiveness of the strategy of self-presentation in communication) has been confirmed.*

**Key words:** *confidence, interpersonal confidence, self-confidence, self-presentation, willingness to take risks, “doctor-patient” system.*

## Introduction

Modern research in Ukrainian and foreign medicine and psychology convincingly proves that the success of the process of prevention and treatment depends not only on the professional training of a doctor. Studies indicate that in almost all areas of medicine, a psychological component is important – the organization of interaction between a doctor and a patient, which contributes to the mutual correctness and effectiveness of the relationship between them. Improving the interaction between a doctor and a patient includes the transition to a dialogic interaction, providing feedback, creating an atmosphere of trust and promoting mutual understanding, which helps a patient to believe both in a doctor and in his own inner reserves.

In this connection, the problem of the patient’s confidence in the doctor, which is the fundamental basis of interaction in medical practice, becomes relevant. When a patient feels that he can trust his doctor, he is more likely to follow medical recommendations, which in turn contributes to the effectiveness of treatment. In addition, the patient’s trust provides psychological comfort, which is important for a positive approach to the treatment process and faster recovery. The study of the patient’s confidence in doctor also helps to identify possible problems in communication between the medical staff and patients. Understanding the factors that influence the level of trust allows to improve the interaction for the development of strategies, in particular by teaching doctors the skills of empathy and effective communication.

The scientific basis for considering the problem of confidence is the works of Ukrainian and foreign scientists, who studied: the dynamic aspect of the development of interper-

sonal trust (Кравців, & Тавровецька, 2024); peculiarities of the development of self-confidence in youth (Єрмакова, 2023); the connection of self-confidence with empathy in adolescence (Danilova, 2019); interpersonal trust as a prerequisite for partnership relations (Чуйко, & Чаплак, 2020). Scientists have also studied issues of trust in interpersonal interaction (Ситнік, & Пивоварчик, 2021; O'Doherty, 2023); psychological factors of the development of confidence in a teacher among students of a technical university (Лашко, 2021); the client's trust in a psychologist (Wu, Deng, & Evans, 2022).

The issues of trusting relationships between a doctor and a patient are presented in a few works by foreign scientists (Kong, Chen, & Wang, 2023; Rolfe, & Cash-Gibson, 2014; Krot, & Rudawska, 2016).

### **The aim of the article**

Therefore, despite a significant amount of research on trust, the problem of confidence in the "doctor-patient" system is not given due attention. The study on the patient's confidence in a doctor is important for improving the quality of medical care, ensuring psychological comfort of patients and the effectiveness of treatment, as well as for the development of communication strategies in medical practice.

**The purpose of the article** is to present the results of an empirical study of the features of confidence manifestation and the psychological conditions of its development in the "doctor-patient" system.

### **Methods of the research**

The psychodiagnostic methods consist of the following ones: to study the manifestation of the patient's confidence in a doctor – "Methodology for assessing trust / mistrust of an individual in other people" (Савченко, Петренко, & Тімакова, 2022); in order to research the ability to take risks in interpersonal communication – the technique "Personal decision-making factors" (Колесніченко та ін., 2020); to identify the strategies of

self-presentation of doctors – the method “Strategies of self-presentation” by S. Lee, B. Quingli (Пепир, 2017). Mathematical and statistical data processing methods were used (IBM SPSS-20: descriptive statistics, correlation analysis).

An empirical study of the features of confidence manifestation was conducted on the basis of the multidisciplinary hospital “UniClinic”. 20 patients (9 men, 11 women) aged 36-44 took part in the study; 20 doctors of the diagnostic department aged 35-46 (10 men, 10 women) as well.

The research is based on the assumption that the development of confidence in the “doctor-patient” system is conditioned by the complex of psychological environment (self-confidence, willingness to take risks, effectiveness of the strategy of self-presentation in communication).

### Results and their discussion

A certain level of trust is always present in every act of communication; it is an important condition for positive interpersonal relationships, because without it, relationships can turn into conflict. Trust relationships are based on moral credit and voluntary mutual obligations. Trust in others is an expression of faith in the world and can be considered as an intrapersonal phenomenon (Вірна, 2019).

The psychological content of trust consists in a specific relationship between subjects and objects of trust, which arises as a result of their direct or indirect interaction and reflects internal attitude of the subjects, which is determined by the assessment of favorable results of this interaction. Trust always has its own specific meaning arising from personal experience, which is present in it as a set of certain perceptions, feelings and reactions to specific environmental conditions and situational features (Uslaner, 2008).

One of the key aspects of medical profession is a doctor’s personality and a level of personal influence on professional activity. The personal level encompasses a variety of competencies and

qualities such as authority, autonomy, responsibility, reflexivity and trust. The psychological model of interaction between a doctor and a patient assumes the presence of trust as one of the main aspects of this cooperation, as it contributes to effective treatment, cooperation and psychological comfort of all participants (Філоненко, 2019).

While analyzing the scientific literature, we identified a set of psychological conditions that can contribute to the development of trust in the "doctor-patient" system. These conditions include the following:

1. *Self-confidence*. Self-confidence is characterized by the belief in one's own success in various aspects of life, including knowledge of personal capabilities, skills, and a sense of security in these areas. Confidence in one's own personality is a prerequisite for complete self-control and an important condition for a person's self-organization, self-realization both in relationships and communication with other people, and in professional activities as well. Self-confidence is closely related to trust in others, and dominance of one of these areas can lead to personality's disharmony (Dwyer, & Marsh, 2017; Кузьмич, 2022). The patient's confidence has a significant impact on the development of trust in the "doctor-patient" system, particularly in such aspects as mutual understanding and cooperation; increasing confidence in medical care; development of open dialogue.

2. *Readiness to risk*. The situation of trust is characterized by the subjectivity of perception and the problem of mutual understanding of subjects due to their internal attitudes and personal priorities. This leads to a high level of uncertainty, as it is impossible to predict the partner's behavior. In addition, the situation of trust is related to the vulnerability of the subject in relation to the partner; the manifestation of confidence turns a situation of trust into the situation of risk, but at the same time trust reduces the level of social uncertainty. When the decision on trust has already been made, the situation is partially resolved, bringing the psychological relief and relaxation (Лашко,

2021). Thus, willingness to take risks and interpersonal trust may interact influencing the patient's perception of medical decisions and cooperation with the physician.

3. *Self-presentation strategy effectiveness in communication*. Self-presentation is a process in which a person tries to form an impression about oneself in others. Every social interaction involves presenting oneself, one's personal or professional characteristics; self-presentation acts as a means of controlling the formation of impressions (Колодяжна, 2015). The doctor's self-presentation is of great importance because it affects the interaction and communication with a patient. The doctor's demonstration of expertise, openness, empathy, and compliance with obligations and confidentiality can positively influence the process of developing interpersonal trust and improve treatment outcomes.

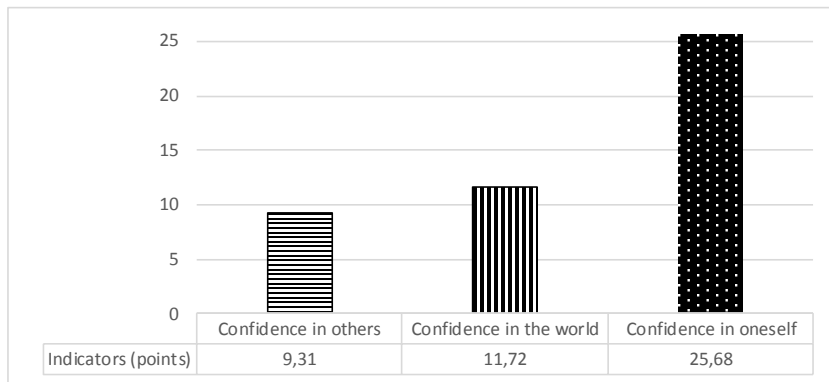
Let's move on to the analysis of the results of the study, in particular, the features of the manifestation of patient's trust in a doctor.

In order to study the manifestation of patients' trust in doctors, we used the "Methodology for assessing the individual's trust / distrust in other people" (Савченко, Петренко, & Тімакова, 2022) – the "trust in others" and "trust in the world" scales. The results obtained by the method are presented in Fig. 1.

According to the "Confidence in others" scale, the numerical indicators are 9.31 points, which corresponds to the high level of trust. High values on the scale indicate that a person is able to form stable positive relationship with other people, interact with others constructively in specific situations. A person is confident in other people, able to rely on them in the process of interaction. The position of a person can be characterized as pliable, oriented towards an interaction partner.

In the context of the patient's confidence in a doctor, a high level of trust is reflected in a patient's openness to communication with a doctor, his willingness to share important information about his situation and openness about his problems and

symptoms. A patient believes in a doctor's professionalism and competence, trusts in choosing the optimal treatment and making important medical decisions. A high level of trust affects the effectiveness of cooperation between a patient and a doctor, which in turn contributes to the improvement of treatment results and satisfaction of both parties.



**Fig. 1. Indicators of respondents' confidence manifestation**

According to the "Confidence in the World" scale, indicators were recorded within the average level of manifestation (11.72 points). This means that people under research generally positively perceive the world around them, understand values, and are tolerant of the existence of different patterns of behavior. At the same time, they can demonstrate a critical attitude towards world events, showing fears and apprehensions, which prevents them from showing activity and initiative.

So, according to the diagnostic data, patients show a high level of trust in doctors.

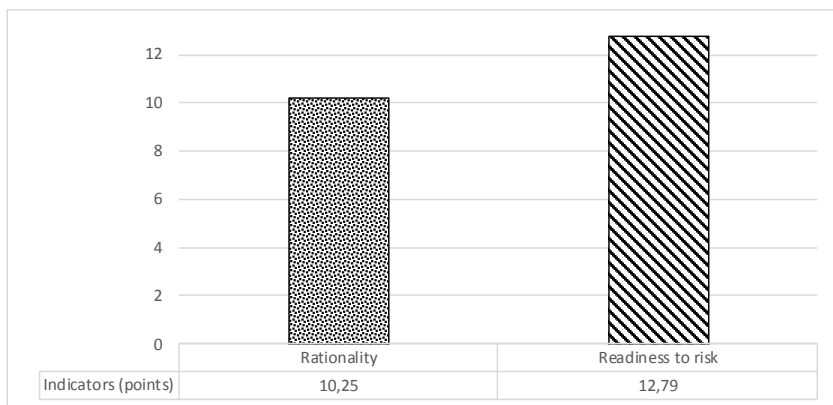
Let's consider the results of the study on the psychological conditions for the development of trust in a "doctor-patient" system.

In order to study self-confidence in patients, we used the "Methodology for assessing trust / mistrust of an individual towards other people" – the "self-confidence" scale (Fig. 1).



According to the obtained data, the self-confidence of patients appears at an average level, with a tendency to high (25.68 points). This may indicate that respondents generally trust in their feelings, experiences, memory, and logical conclusions. At the same time, they may sometimes have doubts about their own competence, do not always believe in their own strength, significance or value. They usually demonstrate a sufficient level of self-acceptance, making a sense of protection, security, allows them to express their feelings and thoughts openly, act confidently, counting on the understanding and support of others. The position of a personality can be characterized as receptive to one's own needs, values and beliefs, but at the same time sufficiently pliable in relation to the interaction partner.

In the context of our research, we note that trust in oneself can significantly affect confidence in other people (in our case, in a doctor). When a personality believes in his abilities, his own competence and worth, he or she tends to trust other people more often.



**Fig. 2. Personal decision-making factors**

Self-confidence can create a foundation for interacting with others based on mutual respect and understanding. In addition, people with high level of self-confidence usually have less fear

of rejection or deterioration of relationships with others because they are confident in their own worth regardless of the reactions of others. This can contribute to the establishment of deeper and longer-term relationships with other people.

The next condition for the development of the patient's trust in a doctor is the willingness to take risks. Diagnostic data are presented in Fig. 2.

According to the "Rationality" scale, the indicators were recorded within a high level of manifestation (10.25 points out of 12 possible). Subjective rationality indicates the readiness to think about one's decisions and act with a possibility of full orientation in a situation that can characterize various, in particular, risky decisions of the subject.

Subjective rationality in the development of interpersonal trust (in the context of our study – in the "doctor-patient" system) is reflected in the way in which people evaluate and make decisions about trusting other people. It assumes that a person takes into account his/her own beliefs, experiences, emotions and contextual factors when forming their trust.

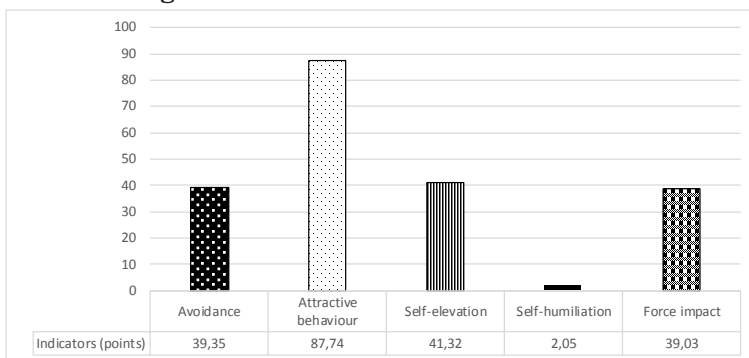
Indicators on the "Readiness to risk" scale also correspond to a high level of manifestation (12.79 points out of 13 possible). Personal readiness for risk is a property of self-regulation that allows a person to make decisions and act in situations of uncertainty. Like an individual characteristic, this readiness also involves the subject's assessment of his past experience (from the point of view of the feeling "I am taking a risk", the effectiveness of his actions in situations of chance, the ability to rely on somebody without sufficient orientation in a situation, etc.).

Risk appetite in the context of interpersonal trust refers to the extent to which a person is willing to take a certain risk when establishing trust in another person. This may be connected with the level of confidence that mutual trust will bring more benefits than possible risk. People with a high willingness to take risks may be ready to adapt to changes in relationships and cooperation even if there is some risk of failure or betrayal; they may be

more inclined to try out new patterns of interaction and ways of communicating, even if this entails some risk.

Therefore, in the studied patients, the willingness to take risks in interpersonal communication is manifested at a high level.

Another condition for the development of trust in the “doctor-patient” system is the effectiveness of the self-presentation strategy of doctors in communication. The results of diagnostics are shown in Fig. 3.



**Fig. 3. Self-presentation strategies of doctors**

The self-presentation strategy of “Avoidance” is expressed in the examined doctors at a lower than average level (39.35 points). This strategy involves trying to avoid vulnerability or a negative impression by avoiding topics or situations that might evoke such feelings. The main idea behind this strategy is to avoid revealing flaws or weaknesses to other people.

The doctor’s self-presentation strategy of “Avoidance” can manifest itself in refusing to answer unpleasant questions from patients, avoiding unpopular procedures or treatments, avoiding discussions about possible health problems, maintaining a positive impression of oneself in front of patients, avoiding topics or circumstances that may put his authority at a disadvantage.

The strategy of self-presentation “Attractive behavior” is expressed in doctors at a high level (87.74 points), and it can

include a number of actions and properties aimed at creating a positive impression on patients and improving communication with them. The main features of this strategy include: showing compassion and understanding to patients, showing that he is interested in their well-being; positive communication: a doctor uses politeness, tone of voice and body language that contribute to creating a positive and friendly impression; professional appearance: a doctor takes care of his appearance, which strengthens the impression of his competence and professionalism; positive mood and energy; openness to communication: the doctor shows openness and willingness to listen to patients, taking into account their wishes and discussing possible treatment options.

The strategy of self-presentation "Self-elevation" is expressed in doctors at an average level (41.32 points), and involves focusing attention on one's achievements, competence and professional qualities in order to create a positive impression of oneself among patients and colleagues. The main features of this strategy include: highlighting achievements (a doctor talks about his achievements actively in the field of medicine, scientific research, participation in conferences, publications, etc.); demonstration of expertise (a doctor acts as an expert in his field, providing professional advice and recommendations to patients); presentation of professional qualifications; creating an impression of authority.

The self-presentation strategy "Self-humiliation" is manifested in the subjects at a low level (2.05 points), and consists in an effort to reduce one's own importance, competence or authority in front of patients or colleagues. This strategy can be used in order to perceive a doctor as more friendly and unpretentious. The main features of this strategy include: modesty (a doctor avoids emphasizing his achievements, experience or professional qualities); expressing uncertainty (a doctor may express doubts about his ability to help a patient or solve a problem); emphasizing imperfections (a doctor emphasizes his weaknesses or failures, which can create the impression of low competence);

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expressing gratitude for help; avoiding the use of authority.

The strategy of self-presentation “Power influence” is manifested in the studied doctors at a level below the average one (39.03 points), and involves the use of authority, status and power to achieve certain goals or control over patients or colleagues. The main features of this strategy include: an authoritarian approach (a doctor acts as an authoritative figure who demands submission and obedience from patients or colleagues); control (a doctor uses his status and power to control the treatment process, decision-making, or patient behavior); manipulation (a doctor can use various manipulative techniques, such as intimidation or distortion of facts, to achieve his goals); status enhancement (emphasis on one’s professional competence and status).

In order to verify the assumption that the development of trust in the “doctor-patient” system is determined by a complex of psychological conditions, a correlation analysis was conducted according to K. Pearson. In the course of the mathematical and statistical analysis of the data, we calculated the correlation coefficients between the indicator of the patient’s trust in a doctor (the variable “trust in others”) and the specified conditions for the development of trust.

According to the obtained data, the variable “trust in others” has significant correlations with the following variables:

– “self-confidence” ( $r=0.681$ ;  $p\leq 0.01$ ). This means that the higher the patient’s confidence in himself, the higher his confidence in the doctor is. If the patient believes in his own abilities and knows how to make decisions about his health, he may also be more inclined to trust the doctor, because he feels more confident in his own abilities regarding decision-making;

– “readiness to risk” ( $r=0.573$ ;  $p\leq 0.01$ ). This means that the more a person is ready to take risks, the greater the interpersonal trust is. A patient who believes in the professionalism of his physician may be more inclined to trust him in making decisions involving risk, such as choosing medical procedures or treatments;

– “attractive behavior” ( $r=0.745$ ;  $p\leq 0.01$ ). That is, if the doctor behaves in a professional, friendly and empathetic manner, this can make him more attractive to the patient, and he will be more inclined to trust him. In addition, if a doctor communicates effectively with a patient, explaining medical information clearly and politely, it can increase the patient’s trust;

– “self-elevation” ( $r=0.343$ ;  $p\leq 0.01$ ). This means that a doctor’s self-aggrandizement strategy can have a positive effect on the patient’s trust in him, contributing to the creation of a positive impression, increasing confidence in a doctor and his treatment, as well as reducing the patient’s anxiety and restlessness;

– “power influence” ( $r=-0.586$ ;  $p\leq 0.01$ ). Such data indicate an inverse relationship between the doctor’s self-presentation strategy of “power influence” and the development of patient’s trust (the more power influence – the less trust). The use of power influence on a patient can lead to the patient’s feeling that his opinion is not taken into account or does not matter. Power influence can lead to a decrease in a patients trust in a hospital and doctor’s recommendations: if a patient feels that a doctor is trying to impose his will or use force, this can violate the trust in the professionalism and ethics of a doctor.

Therefore, during the correlation analysis, the assumption that the development of confidence in the “doctor-patient” system is determined by the complex of psychological conditions (self-confidence, readiness to take risks, the effectiveness of the strategy of self-presentation in communication) was confirmed.

## Conclusions

The article presents the results of an empirical study of the features of confidence manifestation and the psychological conditions of its development in the “doctor-patient” system. An effective model of interaction between a doctor and a patient assumes the presence of trust as one of the main aspects of this cooperation, as it contributes to effective treatment, cooperation and psychological comfort of all participants. On the basis of

theoretical analysis, a set of psychological conditions contributing to the development of trust in the “doctor-patient” system is substantiated. These conditions include self-confidence, the effectiveness of the self-presentation strategy in communication, and the willingness to take risks. The peculiarities of the patient’s confidence in a doctor were empirically investigated. According to diagnostic data, patients show a high level of confidence in doctors: the subjects under research are able to form stable positive relationships with other people, interact constructively with others in specific situations, they are confident in other people, and are able to rely on them in the process of interaction. The psychological conditions for the development of trust in the “doctor-patient” system were empirically investigated. According to the data obtained, the self-confidence of patients appears at an average level: in general, they trust their feelings, experiences, logical conclusions, but, at the same time, they may sometimes have doubts about their own competence, they do not always believe in their own strength, significance or value. It was established that the studied patients had a high level of willingness to take risks in interpersonal communication, that is, they are ready to take a certain risk, establishing trust in another person. Peculiarities of self-presentation among doctors have been studied. Among the doctors under research, the strategy of “Attractive behavior” is dominant. In the course of the correlation analysis, the assumption of the development of trust in the “doctor-patient” system being determined by the complex of psychological conditions (self-confidence, readiness to take risks, the effectiveness of the strategy of self-presentation in communication) was confirmed.

We see the promising development of the scientific issue in further research on the development of trust in the “doctor-patient” system, taking into account specific medical specializations.

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**Шевченко Наталія, Софілканич Михайло. Особливості прояву довіри та психологічних умов її розвитку в системі «лікар – пацієнт».**

**Мета статті** – презентувати результати емпіричного дослідження особливостей прояву довіри та психологічних умов її розвитку в системі «лікар – пацієнт».

**Методи дослідження.** Емпіричні: для вивчення прояву довіри пацієнта до лікаря – «Методика оцінки довіри / недовіри особистості до інших людей» (адапт. О. Савченко, В. Петренко,); з метою дослідження здатності до ризику в міжособистісному спілкуванні – методика «Особистісні чинники прийняття рішень»; для виявлення стратегій самопрезентації лікарів – методика «Стратегії самопрезентації» (С. Лі, Б. Квінслі); математико-статистичні методи обробки даних.

**Результати дослідження.** Встановлено, що пацієнти проявляють високий рівень довіри до лікарів: досліджувані здатні формувати стійкі позитивні відносини з іншими людьми, конструктивно взаємодіяти з іншими в конкретних ситуаціях, впевнені в інших людях, здатні покластися на них в процесі взаємодії. Емпірично досліджено психологічні умови розвитку довіри в системі «лікар – пацієнт». Згідно з отриманими даними, довіра до себе пацієнтів проявляється на середньому рівні: в цілому довіряють своїм відчуттям, переживанням, логічним висновкам, але, водночас, можуть іноді мати сумніви у власній компетентності, не завжди вірять в свої власні сили, значимість, цінність. Встановлено, що в досліджуваних пацієнтів готовність до ризику в міжособистісному спілкуванні проявляється на високому рівні, тобто вони готові брати на себе певний ризик, встановлюючи довіру до іншої особи. Досліджено особливості самопрезентації в лікарів. В досліджуваних лікарів домінуючою є стратегія «Атрактивна поведінка».

**Висновок.** За результатами дослідження припущення про те, що розвиток довіри в системі «лікар – пацієнт» зумовлюється комплексом психологічних умов (довіра до себе, готовність до ризику, ефективність стратегії самопрезентації в спілкуванні) було підтверджено.

**Ключові слова:** довіра, міжособистісна довіра, довіра до себе, самопрезентація, готовність до ризику, система «лікар – пацієнт».

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