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Review article

Resilience as a strategy for struggling against challenges related to the nursing profession

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ABSTRACT

Stressors, such as work overload, role conflicts, lack of time, lack of self-care, poor job-related interpersonal relationships, feeling powerless to provide quality care, struggling with competing demands, death, conflict with doctors, peers and supervisors, and inadequate emotional preparation, can be negative, stressful, traumatic, or difficult situations or episodes of hardship for nurses. Situations or episodes of these types can also cause both physical and mental problems, such as fatigue, irritability, lack of concentration, unhappiness, depressive sensation, depersonalization, and emotional exhaustion. Despite all of these challenges, resilience enables nurses to cope with their work environment and to maintain healthy and stable psychological functioning. The aim of this review is to describe the concept of resilience, explain characteristics with which it is related and outline interventions to increase the resilience of nurses.

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1. Introduction

“Rising patient acuity, rapid assessments and discharges, and increased service use by clients mean that nurses are dealing with sicker people who are likely to have multiple conditions that may complicate both the treatment and the recovery. These pressures can lead to work-role overload and burnout.”¹ The problems related to workplace adversity can be negative, stressful, traumatic, resulting in difficult situations or episodes of hardship for nurses.² Despite all of these challenges, resilience enables nurses to cope with their work environment and to maintain healthy and stable psychological functioning.³ Resilience is the ability to bounce back or cope successfully despite substantial adversity.⁴ Resilient nurses would learn to overcome these difficulties and develop better coping mechanisms to address stress through exposure to difficult working situations and environments.⁵ Therefore, this study aims to give insight on the definition of resilience and its characteristics, its meaning for nursing and how resilience of nursing professionals might be improved within nurse clinicians, nurse managers, and nurse educators nurses.

2. Definition of resilience

The notion of resilience comes from Latin “resilire” and is defined as the skill to overcome/become adapted to highly difficult circumstances.^{4,6,7} Resilience is mentioned as a developmental process as much as an individual characteristic.^{8,9} Moreover, resilience is also defined as the survival of an individual from a disease or a loss, and the skill to survive.^{10,11} No matter which one of these definitions, in order to recognize that there is resilience, a difficult event would have occurred, and the individual became adapted to this event.⁷

Resilience research has first focused on children, youth and families.¹² In these studies, the aim was to grasp and explore the agents contributing to the health of vulnerable children and youth, as well as individual, familial and social agents and developmental processes. Several conclusions have been drawn regarding resilience. First, there are certain characteristics that contribute to the success of children who are born and raised in disadvantaged circumstances. These developmental results that are better than expected address resilience. Second, the ability to cope well under stress is also addressed by resilience. Third, resilience may be a very positive influence that contributes to recovery from trauma. Therefore, it is possible to propose that resilience is related to post-traumatic growth and development.

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Masten and Obradovic¹³ stated that resilience could be defined as being related to every type of word which is a positive component of the process for adapting to difficulties. Studies carried out accordingly have tried to define resilience mostly with dealing with stress, competence, emotional intelligence, optimism, sense of humor, patience, tolerance, belief and self-esteem.^{8,9,14–17} It was also mentioned that cognitive and problem-oriented coping skills are important precursors of resilience.¹⁸

Earvolino-Ramirez⁴ attempted to define resilience with several characteristics for us to understand it better. These characteristics include positive relationships or social support the individual has the individual's flexibility, aim or expectations in life, positive self-esteem or self-efficacy and sense of humor. In addition to these characteristics, Fadardi et al.¹⁹ mentioned that since resilient individuals have better mental health and self-regulatory skills, with higher self-respect, they have more family support and less risky orientations such as drug use.

Resilience is a protective factor and consists of certain characteristics, such as a sense of carrying on, enduring values, problem-solving, appreciation for interaction with others and comfort with some degree of aloneness.²⁰ A different source defined resilience as an individual's not feeling alone while going through a hard time in life, accepting the situation, being able to go for his/her own choice among limited choices, and seeing this as an opportunity to get better chances, being hopeful, spiritual, optimistic and faithful, making sense of his/her life, and having meaningful relationships.¹¹

Another source defined resilience as selfhood, flexibility, faith, self-confidence and creativity, empathic and humanistic approach, and developed insight about responsibilities and roles, good physical health to contribute to mental wellness, good social network, and hobbies.⁶ Another characteristic of resilience is an inner energy or life power to help an individual to persist.⁹

It is possible to conclude the following on resilience after reviewing definitions given the above: resilience could be defined in different ways for different environments with some of its constant characteristics, in such a way that it is possible to define resilience in disease, natural disaster, war, education, business life and daily life. No matter what we define as a difficult circumstance, what matters is that the sick or resilient individual's effort to recover or adapt, not to lose his/her faith and hope, to be able to use social support resources in that difficult circumstance, to have spiritual values and an aim in life. Thus, it is possible to discuss resilience.

3. Significance of resilience for nursing

Stress is a major concern in the nursing profession. Common stressors are work overload, role conflicts, experiences of aggression, lack of time, staffing issues, shift work, lack of self-care, poor job-related interpersonal relationships, feeling powerless to provide quality care, struggling with competing demands, ensuring excellent patient care, uncertainty concerning treatment, death and dying, conflict with doctors, peers and supervisors and inadequate emotional preparation.^{21–25} Nursing people with HIV/AIDS, vulnerable children and people who are terminally ill, and working in emergencies and oncology services might be depressive for nurses.^{25–29}

These depressive factors cause both physical and mental problems, such as fatigue, irritability, lack of concentration, unhappiness, depressive sensation, depersonalization and emotional exhaustion.^{23,28} Negative stress-related causes not only have an impact on nurses' wellness but also their caregiving to patients.³⁰ In this respect, it is possible to say that resilience is a protective agent with nurses' physical and mental wellbeing. Manzano-Garcia & Ayala-Calvo's study⁵ on 983 nurses revealed that resilience is an

important protective factor against emotional exhaustion. Furthermore, a source defines resilience as a supportive factor that helps nurses to adapt to their profession's difficult physical, mental and emotional nature.³¹

Factors such as balance in business life, hope, control, professional identity and clinical supervision contribute to nurses' resilience.³⁰ In another study, it was emphasized that resilience level of nurses was associated with characteristics such as hope, self-efficacy, control, coping and competence.³² The same study stated that age, experience, education level and years of work do not have a contributive influence on resilience.

There are other studies in the literature that investigated the relation of resilience to factors such as job satisfaction,³³ emotional exhaustion,⁵ post-traumatic stress disorder³ and burnout.³⁴ Based on the outcomes of these studies it is possible to say that positive social relationships, optimism, spirituality and having a resilient role-model has a positive impact on nurses' resilience level, while nurses with low resilience level experience more emotional exhaustion and job dissatisfaction.

It is also possible to define resilience as a protective factor besides being an individual characteristic that helps nurses struggle with their professional difficulties. Fig. 1 shows the levels of nurses' resilience, such as coping, optimism, self-efficacy, sense of humor, control, competence, hope and spirituality, which means that if a nurse holds abovementioned characteristics, she/he is resilient. These characteristics might contribute to deal with their depressive factors more efficiently, use their problem solving skills, not lose their control on events and adapt to depressive factors.

4. Research on improving nurse resilience

McDonald et al.³⁵ performed an educational intervention to improve nurses' and midwives' resilience, which came to the conclusion that their self-confidence, self-mindfulness, communication and problem solving skills were improved. Additionally, the same research revealed that educated nurses and midwives strengthen their relationships with their colleagues. McDonald et al.³⁶ applied a work-based educational intervention to nurses and midwives working in very busy clinics and aimed at helping them to maintain their resilience level. As a result, the attendants improved their self-confidence, self-awareness, boldness, and self-care.

Craigie et al.³⁷ applied a resilience intervention program to nurses in order to improve their emotional well-being and to lower their mercy exhaustion. They reported significant improvements in their mercy exhaustion, exhaustion, and stress levels. Maunder et al.³⁸ conducted a computer-based resilience training in order to prepare medical staff for influenza pandemic, which contributed positively to improve their self-confidence, self-efficacy, their coping methods and interpersonal problems.

Gerhart et al.³⁹ conducted an awareness based communication training in order to improve resilience of medical staff and found that cognitive fusion, depression symptoms, depersonalizations and post-traumatic stress findings decreased. Foureur et al.⁴⁰ approached the issue with a different point with the aim to improve resilience of nurses and midwives. The aim of this study was to improve their health and sense of coherence, while decreasing the level of depression, anxiety, and stress levels. At the end of the study, their health and sense of coherence increased, while their stress level decreased.

A different study integrated Stress Management and Resiliency Training (SMART) program into the usual orientation program, which is conducted for new nurses, nurses who switched to a different service, or nurses who have a new role in the establishment.⁴¹ At the end of this study, it was found that the SMART

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