Resilience-building Inquiry Among High Professional Profile Nurses: A Descriptive Qualitative Study

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Abstract

Nurses experience stress and face adversities during their professional career, which is a leading cause of professional dropouts and nursing shortage around the globe. Resilience among nurses has an important role in overcoming adversities and facing professional challenges. Nurses learn to cope with challenges and develop resilience through professional experience. This study aimed to explore the resilience-building process among high professional profile nurses working as clinical and educational experts in a semi-government institute. The study employed a descriptive qualitative design and was conducted from January 2019 to July 2019 after the IRB approval. Purposive sampling was used to recruit study participants. Data was collected through semi-structured interviews until the data saturation point was reached. Interviews were audio-recorded and transcribed verbatim. Thematic analysis was done to analyze the data. Study findings revealed that nurses develop resilience during their professional career in three main phases: challenges and stresses faced during their nursing career, coping process utilization, and capacity building. These phases are supported by motivation and professional commitment. The core theme was the resilience-building among nurses during their nursing careers. It was concluded that Pakistani nurses are managing those stresses that have been resolved in developed countries. Moreover, there is less external motivation to work in nursing and the majority of the nurses are motivated through self-realization and self-motivational strategies. Additionally, the important pillars of resilience-building are family support, toughening up, spirituality, self-motivation, and commitment. Thus, to avoid stress and burnout among nurses it is important to train them to be resilient. Therefore, resilience among nurses should be strengthened and developed through resilience-building interventions.

Keywords: Resilience-building, inquiry, high professional profile, qualitative study.

1. Introduction

Healthcare is a challenging profession where healthcare professionals including doctors, nurses, and medical and nursing students, remain at risk of developing stress and burnout (1–3). Nurses are a vulnerable group of health professionals, as they work in highly complex and uncertain situations, face uncertainty, and experience role conflict during professional practice, causing them to experience burnout and leading to professional dropout. Burnout among nurses seems to influence their job satisfaction and professional commitment and growth (4,5). Those nurses who stay in the profession and progress with their careers are considered resilient nurses. They learn strategies to cope with adversities and overcome professional challenges with their professional experience (6–9). Resilience has been defined for over two hundred years in different contexts; Webster in 1824 provided the first definition of resilience as "the ability of a stressed body to recover from adversity or adjust easily to misfortune and change" (10). Moreover, resilience is a psychological construct that emerged from positive psychology (11,12); it has been discussed in literature both ways; as a process and outcome (13,14). Northeast Resiliency Consortium has defined resilience as an individual's persistent development and application of knowledge, skills, and resources that effectively help one to successfully adapt to environmental changes and overcome adversities (15). Resilience is the ability of the individual to bounce back or cope successfully despite adverse circumstances (16). However, literature revealed that after almost four decades of research on resilience in different contexts, there is still a lack of scientific agreement on the nature of resilience-building process (13,17,18) which is most probably because of the dynamic and context-specific nature of the resilience-building phenomenon. Moreover, there is a need to explore resilience-building among nurses for a better understanding of the phenomenon and to develop further teaching and learning strategy to strengthen the resilience of novice nurses (19). Thus, this study intended to explore the resilience-building process among high professional

profile nurses working as clinical and educational experts in a semi-government institute.

2. Methodology

2.1. Exploratory Descriptive Qualitative Study Design

A descriptive qualitative design was used in this study supported by Sandelowski (2010) (20).

2.2. Participants

This study was conducted in a semi-government nursing college and its allied hospital. Eligibility criteria for participation were (a) registered nurses working in managerial, administrative, and teaching positions, (b) professional experience of more than 20 years, and (c) willing to participate in the study. Purposive sampling technique was used to recruit the participants (21–23).

2.3. Data Collection

Semi-structured interview guide was used as a data collection tool. Face-to face-interviews were conducted to explore resilience-building among nurses during their professional careers.

Participants were contacted via telephone and asked for consent to participate in the study. The time and venue of the interview were decided according to their comfort zone. Most of the interviews were conducted in participants' offices; each interview was audio recorded. Interviews were taken in the language preferred by the participants, five participants agreed on the English language and the rest agreed with Urdu. Data saturation was achieved at the 5th interview. Three more interviews were conducted to ensure accuracy in data saturation. Thus, the sample size of this study was eight high professional profile nurses from semi-government nursing college and allied hospital of Rawalpindi.

2.4. Data analysis

The thematic analysis was carried out following the five steps of Creswell and Creswell (2012): 1. Organization and preparation 2. Reading of all the data, 3. Coding the data (In vivo coding and conceptual coding), 4. Generation of categories, 5. Presentation of sub-themes and main theme (22). All recorded interviews were listened to 2 times, one by one. Then each interview was transcribed on the Microsoft word. All transcribed interviews were read 2-3 times to get familiarity and insight of content. In-vivo coding followed by conceptual coding was done. Then categories were made and sub-themes and core theme was identified.

2.5. Trustworthiness

To maintain rigor in the study, Lincolin & Guba's (1986) criteria for qualitative trustworthiness, including credibility, dependability, confirmability, transferability, and, authenticity were followed (24).

2.6. Ethical Considerations

American Psychological Association (APA) provides guidelines to be followed regarding ethical considerations and human rights during research work (25). This qualitative study followed the same to protect the human rights of the study participants. The Institutional Review Board approved the study. All participants were informed about the study and gave written consent to participate. Participation was voluntary and anonymous.

3. Study Findings

There were eight female nurses who participated in this study. The participants' work experience ranged from 21 years to 28 years of service in the nursing profession. Thematic analysis of the data identified one core theme: Resilience- building among nurses during their nursing career, and four sub-themes: challenges and stresses faced during nursing career, coping process utilization, motivation and professional commitment, and capacity building emerged. Detail description of the theme, subtheme, and categories is provided in table 1.

The main theme and sub-themes depict the process of resilience-building during the nursing career. Each of these is elaborated below:

3.1. Resilience-building among high professional profile nurses during their nursing career

During their professional career, nurses face different challenges and experience stresses related to their personal and professional life. To deal with these challenges and associated stressors, they learn to utilize coping processes in the form of self-processing and adaptive responses. By utilizing coping processes, they develop their capacity to overcome challenges and succeed in the profession. During this trajectory, motivation and professional commitment strengthen them to stay in the profession. The whole process of surviving and thriving in difficult situations build resilience among nurses during their professional career. Each phase of resilience-building is further explained by the elaboration of sub-themes as follows:

3.1.1. Challenges and stresses faced during the nursing career

Challenges and stressors faced by nurses during their professional career included personal problems, job problems and stress, interpersonal conflicts, professional challenges, and long and busy shifts which affected their personal and professional life. The majority of the participants expressed that nursing is a busy and tough profession; nurses have a lot of commitments and responsibilities that make them rough and tough. They have to cope with situations very fast, mostly they have to respond in a short time with professional precision and accuracy.

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Table 1: List of the theme, sub-themes, and categories.

Theme	Sub-themes	Categories
Resilience-building process among high professional profile nurses during their nursing career	Challenges and stresses faced during the nursing career	Personal problems Professional stresses On job problems Demanding profession Interpersonal conflicts Long and busy shifts
	Coping process utilization	Self-regulation Developing competence Seeking help Behavioral modification Emotional toughness Socialization Spirituality
	Motivation and professional commitment	Family Support Internal satisfaction Passion and commitment Self- motivation
	Capacity building	Professional grooming Leadership Teamwork Professional competence Time management Confidence Emotional intelligence

As one nurse articulated: *I faced many obstacles. Most importantly, I encountered a tough and busy routine. During my training, I was used to spend most of my time with my patients and for my studies. But as I got married, I faced difficulty in managing my time and other important tasks. Most of the time, it was a challenge for me to manage home and work together"* (P1).

Moreover, participants discussed professional problems including lack of appreciation, professional realization, professional identity, professional support, monetary benefits, and growth opportunities. As one participant verbalized:*"There is so much injustice; we face it in the form of pay and benefits and other job opportunities. Pay and benefits are not as we deserve. Lack of respect in this profession. Job description and division of labor are not justified. Unjustified job structure and lack of Inter-professional cooperation are big problems…many times during my career I got demotivated from all these facts"* (P2).

Another nurse said:*"I can say that nursing is a tough job, it demands a high level of professional commitment and sacrifices. Nurses have to perform long hours of shift duties and despite all their effort are less recognized and appreciated"* (P5).

3.1.2. Coping process utilization

Professional growth along with work responsibilities and personal commitments was very tough for the nurses. Participants reported that they manage professional and personal challenges by learning to cope with them. The coping resources utilized by these nurses were support of the family and friends, self-regulation, self-motivation, developing competence, seeking help, behavioral modification and learning to handle emotions, and effective socialization.

As one nurse articulated: *"Whenever I felt myself emotionally exhausted, I used to go to my colleagues; they always gave me support to cope with problems. When I faced the death of my husband I was mentally and physically very weak, and I decided to leave the job. But my seniors supported me to carry my job"* (P1).

Similarly, another nurse stated: *"Believe me, in this profession only those individuals can survive who have a strong personality, who have encountered traumas in their lives and that made them rough and tough. Do you know, we can't enjoy a job in this profession; we have to give a lot and in return, we have no regard, appreciation, and acknowledgement by the management and society. This is a big source of stress"* (P4).

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Moreover, a nurse talked about building social and positive working relations relevent to resilience building. This explains that nurses build socialization to become resilient as this gives them strength and ability to overcome challenges:

"I always had good relations with my team members. I enjoyed my work. My team supported me very much and we always worked with unity and harmony" (P3).

Another nurse similarly emphasized socialization at the workplace as a way to get support and help from others to cope with challenges: *"Some seniors and colleagues were good with me, and they supported me very much. Whenever I felt stressed, I used to go to them and discuss my problem, and they supported me very much. You can say that I have also received support from my family and friends during my professional journey"* (P7).

Participants also talked about the importance of spiritual health for resilience-building among nurses. Most value was given to spiritual beliefs and faith in God. Participants discussed the role of their spiritual beliefs in their motivation and personal strength. According to them, a positive approach towards life, building strengths, and believing in God for help in difficult situations give strength to cope with adversities. One participant expressed: *"Face your problems with a positive approach. Believe in Allah and have faith in Him. I have a strong belief that what I have achieved during my professional career all was the blessing of my God"* (P8).

3.1.3. Capacity building

Nurses, during their professional career learn different skills, including leadership and management, teamwork, time management, handling conflicts, and learn emotional intelligence. These skills improve their confidence, and professional grooming and enhance their capacity as a person and professional. It is extracted from participants' narration that nurses need to prepare themselves to meet the needs of their patients. They should upgrade their professional competencies; this would strengthen them. As one nurse mentioned:

"Nurses should try to develop self-control and tolerance towards stressors. They should support each other and
believe that this is not about individual success, but it is about team success. They should work hard and study honestly towards their patients and their profession. Develop strong relationships with each other give respect to each other and accept challenges

to be a strong person" (P5).

Another nurse added: *"I think you should try to remain happy. Improve your education, improve your skills, explore yourself and overcome your negativities"* (P8).

Similarly, one nurse articulated: *"I think with as time passes and you get into the professional life, you develop certain behaviors that help you stay happy and healthy. Like, I learned assertiveness, leadership, and team management. I also used to go for a walk to relieve my stress and different other activities that strengthen you"* (P4).

Likewise, one nurse stated: *"According to me, nurses should develop professional knowledge and competence and update their skills. Develop interpersonal skills and leadership qualities. Our patients have high expectations with us, so we need to meet these expectations by developing professional knowledge and competence"* (P3).

3.1.4. Motivation and professional commitment

According to the participants, internal satisfaction and respect from patients were the sources of motivation and professional commitment throughout their professional career, which kept them motivated to continue the nursing profession despite difficulties and hardships. Much value was given to the hope for the future, internal satisfaction for serving humanity, internal motivation, and self-commitment. As one of the participants stated after working in clinical and serving with patients, she got inspired by nursing philosophy and realized that it is a noble work. She got internal satisfaction by providing comfort and care to the needed one.

As she said: *"Well, believe me, the nursing profession has rewarded me in whole my life. I received appreciation from my patients, I always received love and respect from my patients. They used to wait for my shift and asked other nurses when Asma would come on duty. This gave me inner satisfaction and energy to work with dedication. I always felt very satisfied after my clinical days"* (P1).

Likewise, another participant verbalized: *"Most important thing that kept me motivated was honesty; it was towards my profession, my patients, and my obligations. I was honest with my seniors, colleagues, and patients. Another thing that contributed to my success was a professional commitment; as I decided to serve humanity, I always remained ready to help my patients"* (P7).

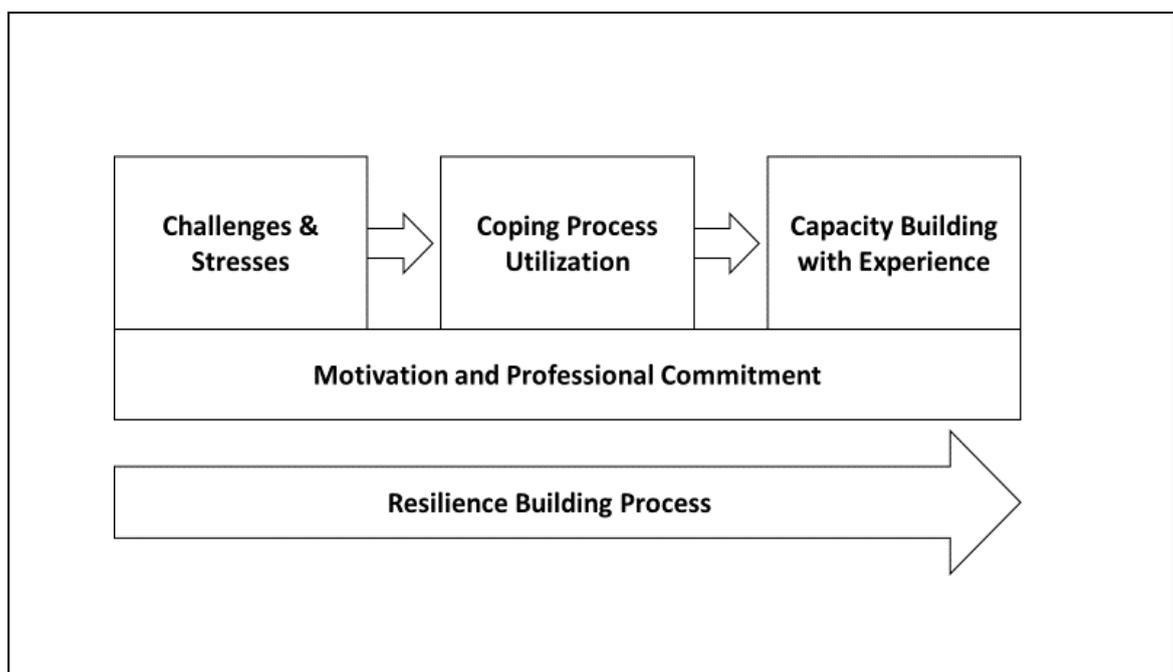The resilience-building process is depicted in figure 1:

4. Discussion

This present study was intended to explore the resilience-building process among high professional profile nurses working as clinical and educational experts in a semi-

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government institute. The study was guided by one research question: how do high professional profile nurses build resilience during their professional career. One core theme and four sub-themes were identified to answer the research question.

Study findings revealed that nurses perceived nursing as a stressful profession and much value was given to the professional challenges and stresses causing job dissatisfaction and burnout. Yu-fang Guo and others found similar results among nurses in previously conducted studies (2,26–28). Study participants also emphasized their abilities to gain trust, relationship building, optimism, honesty, harmony, self-control, commitment, motivation, realization, regulation, sharing of feelings, and interpersonal skills as part of their coping resources. Similar concepts were highlighted in a study by Hart (2014) that nurses need to build personal resources to keep them motivated and energetic; positive emotions can help nurses to boost themselves for personal resources of psychological well-being (16). Moreover, participants narrated that nursing is a busy and tough profession and nurses need to learn adaptive behaviors and modifications to become resilient and to get success in their professional career. These findings are consistent with Edward et.al (2016) that nurses build resilience when they pass through toughing-up scenarios. Nurses also learn behavioral modification for physical and mental well-being and coping with stress (14). Additionally, study participants

emphasized the need for socialization in the workplace as a way to transfer positive emotions to each other and to get support to cope with professional challenges. Similar findings were reported by Hudgins (2016) that socialization promotes positive emotions and enhances nurses' ability to think creatively to overcome professional challenges (6). Study participants also narrated that nurses need to prepare themselves to meet the needs of their patients. They should upgrade their professional competencies to strengthen them and enhance their resources. Nurses should build their self-control and emotional regulation to overcome stress and become resilient. Different capacity-building areas were also identified by the participants that can be used to design a resilience-building intervention for nursing professionals to strengthen their resilience. Important capacity-building areas for becoming resilient are professional grooming, leadership building, teamwork abilities, and promoting professional competence through knowledge and skills. These findings are consistent with the finding of (29–31). Similarly, according to Yousoff (2017), resilience can be taught to healthcare professionals through different teaching strategies like study modules, workshops, and mental wellbeing exercises (32).

Fig 1: Resilience-building process among nurses during their professional career

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It is noteworthy the study findings reflected that, because of less social recognition, lack of appreciation, and deficiency of nursing leaders in the country, nursing is very difficult in Pakistan. Nurses gave more value to their spiritual beliefs for their strength and coping with adversities than the organization's support. Study findings revealed that spirituality among Pakistani nurses is an important predictor of being resilient and fighting the challenges. This is why these nurses are self-motivated to serve their patients and remain committed to their job responsibilities.

5. Conclusion and Recommendations

Based on study findings, it is concluded that Pakistani nurses are encountering stress that has been resolved in developed countries. There is less external motivation to work in nursing and the majority of the nurses are motivated through self-realization and self-motivational strategies. Additionally, the important pillars of resilience-building are family support toughening up, spirituality, self-motivation, and commitment. It is a matter of concern that nurses are not being taught or trained for self-control, emotional intelligence, socialization, relationship management, and conflict resolution. However, they learn these skills after facing challenges and stresses at their workplace. Therefore, to avoid stress and burnout among nurses it is important to train them to be resilient. This can be done by developing their stress management and interpersonal skill, capacity-building traits, and emotional intelligence. Thus, resilience among nurses should be strengthened or developed through resilience-building interventions.

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