

**Apprehending the Concept of Resilience:
A Psychological Perspective on Resilience in Daily Life**

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Abstract

Resilience, a vital key to life, is referenced by many but has no single, applicable-to-all definition. This paper compares definitions of resilience and identifies a number of protective factors that contribute to resilience. The difficulties of operationally defining resilience and the challenges of applying a single resilience definition to all people groups are then addressed. This paper also covers different strategies for developing resilience, as well as examining the benefits, generalizability, and limitations of the resilience techniques proposed by one particular study. Lastly, this paper discusses several real-life instances where resilience practices have been applied. Resilience, whether it is potential, a process, a choice, an outcome, or all of the preceding, is needed to successfully adapt to and grapple with adversity -- and emerge victoriously.

Descriptions and Factors of Resilience

Resilience, a trait crucial to survival, is chiefly characterized as the phenomenon of “bouncing back”, yet this construct is considerably more complex than just “coping well”. Resilience distinctly differs from the average recovery (Mancini & Bonanno, 2006) since this phenomenon is not only “bouncing back”; it is springing off of adversity to a higher point than before the hardship. The American Psychological Association (APA) (2012) identified resilience as “the process of adapting well in the face of adversity, trauma, tragedy, threats, or significant sources of stress” (p. 2). The APA further elaborated by stating that “becoming more resilient not only helps you get through difficult circumstances, it also empowers you to grow and even improve your life along the way.” Pooley and Cohen (2010) defined resilience as “the potential to exhibit resourcefulness by using available internal and external recourses in response to different contextual and developmental challenges” (p. 1). The above definitions identified resilience as a process; however, Masten (2001), emphasizing the outcome, proposed that “resilience refers to a class of phenomena characterized by good outcomes in spite of serious threats to adaptation or development” (p. 2). In a recent interview, Masten expanded on the aspect of the interaction of nature and nurture in resilience, stating that resilience is “a combination of the capacity that human beings have as part of their heritage, but also what they learn through experience and education and good nurturing” (Mills, n.d., p. 2). Resilience, a result of the interplay between environmental and genetic factors, is not only “bouncing back”; it is the potential to face and triumph over hardship, the process of successfully adapting in the face of adversity, and the outcome of not only having adjusted well but of actually thriving and flourishing as a result of challenging circumstances.

Although resilience is advantageous to all, resilience studies tend to focus on children, as they are in one of the most vulnerable stages of life. Psychologists have identified several “protective factors” in children that can contribute to resilience. Protective factors are components in and around a child that equip the child with motivation and coping skills to battle difficult situations (Gunnestad, 2006). Gunnestad goes on to group the protective factors into three categories: network factors (support from friends and family), abilities and skills (internal support), and meanings, values, and faith (n.d). Yoon et al. (2020) have also identified five factors of resilience: “(a) surviving; (b) thriving; (c) perseverance; (d) reconciling and integrating traumatic experiences into healthy identity development; and (e) advocating for self” (p. 4). These studies indicate that there are environmental as well as internal factors that promote resilience in an individual.

Resilience is difficult to operationally define since every psychologist measures and tests this phenomenon differently. Some psychologists view resilience mostly as a process while others see it as an outcome. The approach tends to determine which aspects of resilience are measured: aspects such as indicators, purpose, when (long-term or short-term), and for whom (individuals or communities) (Asadzadeh et al., 2017). It is also difficult to judge if the outcome of an individual’s development after severe trials is “good” enough for the individual to be considered resilient (Masten, 2001).

However, according to Masten (2001), two main models of assessing resilience have been developed. The first model is the statistical, variable-focused approach as one that uses statistical analysis to test for connections between the individual and the environment, risk, and outcome after adversity. Masten explained that this approach is useful for finding correlations in data, but that in

the statistical point of view, one loses sight of the patterns in the real lives of real people; one loses a perspective of the whole. On the other end of the spectrum, the person-focused approach compares two groups of people to observe the differences between resilient and non-resilient individuals (Masten, 2001). However, Masten does note that this approach is not generalizable to a larger population, and, generally speaking, no low-risk groups are included in studies.

Having a single, applicable-to-all definition of resilience is considerably difficult since the definition and measures of this construct must be applied to many different people groups, who are all facing diverse types of adversity. Culture and society greatly influence the development of resilience, and so there need to be multiple definitions of resilience to fully encompass the scope of human strength (Gunnestad, 2006). Gunnestad continues by saying that “the different elements in a culture contribute to resilience according to how important that specific factor is in each culture” (p. 10). He then describes an example of differing definitions of family (a resilience factor): In Southern Africa, extended family (parents, uncles, aunts, grandparents, etc.) plays a significant role in a child’s upbringing, while to Norwegians, it is the immediate family (parents and siblings) that is most important.

Resilience, a complex construct characterized as a process and an outcome, is not just the concept of adapting well; it is also characterized as thriving after overcoming adversity. Strengthened by environmental or internal protective factors, resilience is difficult to operationally define since each psychologist uses different measures to assess its development. No single definition of resilience applies to all people groups because of the diverse types of adversity each group is facing, yet resilience is found and utilized in all nationalities, cultures, and races. Human strength knows no limits; it has neither racial boundaries, ethnic confines, nor cultural restrictions.

Developing Resilience

The quality of resilience may be fostered by genetic or environmental factors, but resilience can also be developed -- built over time as experiences interact with personalities -- and is quite common (Masten, 2001; “How to Help Families and Staff Build Resilience During the COVID-19 Outbreak,” n.d). Resilience “does not come from rare and special qualities, but from the everyday magic of ordinary, normative human resources in the minds, brains, and bodies of children, in their families and relationships, and in their communities” (Masten, 2001, p. 9). The process of becoming resilient usually involves deep emotional pain and distress. However, resilience is not just adapting -- it also entails personal growth (“Building Your Resilience,” 2012). According to Masten (2001), individuals are not considered resilient if they were never exposed to significant risks; only through the weight of adversity can people learn how to “bounce back”. Thus the most significant threats to the development of resilience are the ones that hinder the systems responsible for adaptation such as cognition, emotion regulation, motivation to learn, etc. (Masten 2001). Because culture and society play a remarkable role in developing an individual’s identity and strength, they also greatly influence resilience development (Gunnestad, 2006).

Many different approaches are taken to develop resilience in different circumstances. Nursing students are advised to build resilience through self-reflection and problem-based learning (Chen, 2011, p. 2). Harris et al. (2019) propose that the resilience of schizophrenic and/or suicidal people stems from understanding their experiences, finding reasons to live, actively maintaining relationships, and engaging in “normal” activities. According to the American Psychological Association, the four keys to resilience are connection, wellness, healthy thinking, and meaning. Relationships and community are also emphasized; health, mindfulness, and daily routines are

advised; a hopeful outlook and accepting change are necessary; actively helping others and working toward goals are strongly encouraged (“Building Your Resilience,” 2012). Keeping up with one’s social life and creating new routines are important as well (“Coping & Practicing Resilience During COVID-19,” 2021). Resilience can be developed in many diverse ways, but a common theme underlies all the resilience-building techniques; that of asserting control over one’s life, at least in the areas where one can.

Yoon et al. (2020) suggest, based on a study of the practitioners’ definitions of maltreated children’s resilience, that daily routine, seeking help, and mentally moving forward are essential for abused children to “bounce back” and recover from trauma or abuse. However, Yoon et al. admit that the results of their study are not generalizable to the wider population of practitioners, since the study only included practitioners of two agencies in one county of a Midwestern state who volunteered. Also, the majority of participants were Caucasian females, and only a small range of professional roles was included in the sample (e.g. therapists, clinical supervisor, nurse, etc.) Lastly, the study did not cover how the definitions given by the practitioners impacted interactions with patients.

As was just exemplified, an overall, general list of resilience-building strategies is difficult to generalize to all people groups. It follows that techniques for developing resilience are much more effective when directed specifically towards a group. That is not to say that general resilience techniques are not worthwhile or efficacious; they are true, to an extent. However, resilience development strategies are most fruitful when created with a target group in mind.

Applying Resilience

Resilience is needed in all aspects of life, especially in the current situation with the COVID-19 pandemic. As interest in the concept and applications of resilience grows, psychologists are increasingly implementing resilience practices in various aspects of society. For example, public administration has recently begun inserting resilience thinking in policies and such. Currently, federal efforts are often aimed at improving the resilience of both the natural and built systems that provide services to society, such as energy, transportation, healthcare, etc. (Larkin et al., 2015).

According to Duit (2015), there are two main definitions of resilience in public administration: the first views resilience as a societal function (e.g. water supply, healthcare services, etc.) and the second approach sees resilience as the structure of public administration. Duit also proposed several lessons to increase resilience thinking in public administration, including exploring multiple models of resilience rather than focusing on a single approach, considering possible trade-offs between resilience and other traits, and moving beyond disaster management with resilience techniques, among others. Not to say the administration has not addressed resilience practices at all: the increasing attention given to resilience in urban policy has greatly promoted anticipation of what-if events and “foresight and preparedness” (Coaffee, 2013, p. 3).

According to Duit (2015), an ideal resilient public administration “consists of multiple organizational units in non-hierarchical networks with overlapping jurisdictions and cross-scale linkages; it has spare capacity to use in times of crisis; it relies on multiple types of knowledge (e.g. scientific and experience-based) and sources of information; it encourages stakeholder

participation, and it uses trial-and-error policy experiments and social learning to keep the policy system within a desirable stability domain” (p. 1). Hopefully, this excellent vision of the ideal resilient government will be soon fulfilled. However, public administration is gradually advancing towards that goal; they are currently aimed at improving the resilience of both the natural and built systems that provide services to society, such as energy, transportation, healthcare, etc. (Larkin et al., 2015).

Resilience development in rural areas is also important. According to case studies done by Knickel et al. (2017), resilience can be increased through sustainability. They suggest that the resilience of farmers, needed in today’s constantly changing and modernizing world, would be considerably strengthened through a mix of traditional farming methods and new technology. To further develop rural resilience, Knickel et al. (2017) also proposed producer organizations, healthy relationships with nearby cities, and creating farmers’ markets.

Resilience can be quite common among children in care, but it can also be further developed through achievement, involvement in events, and other such self-esteem-building activities (Gilligan 1999). Children in care may be ostracized by other children as a result of their different living situations, but if their resilience is developed as a result of this exclusion, it would give them a boost in life. Gilligan (1999) argued that the resilience of a child in care could be promoted through encouraging and developing the talents and interests of the child to build self-esteem. Hobbies and activities could help young people to find positive ways to experience life by giving them access to supportive mentors and/or friends, who would aid in resilience development through encouragement, personal attention, and deep conversations (Gilligan 1999).

Certain groups and situations require more resilience resources. For example, disaster situations are one of the most obvious places where resilience practices are needed due to the vastness of damage. Although disaster resilience can seem like a giant bubble spread over the calamity, it occurs locally, at the community level (Keim 2008). If different small resilience initiatives build relationships and share knowledge and support, that could strongly facilitate resilience practices on a larger scale (Baibarac, C., & Petrescu, D., 2017). But, despite the commonality of resilience in disaster situations, there are many different definitions and measures used by psychologists assessing resilience in a disaster area. Asadzadeh et al. (2017) have proposed an eight-step procedure to measure community disaster resilience: “theoretical comprehensiveness, indicator appropriateness, data transformation, multivariate assessment, weighting, aggregation, visualization, and validation” (Asadzadeh et al., 2017, p. 159). This procedure does not provide specific operational definitions and standards for measuring the resilience components, however. It cannot because each disaster situation is different, and each display of community resilience is unique.

Resilience practices would be especially effective among the elderly. Evidence indicates that the elderly already possess resilience since older adults report contentment and have a higher level of well-being than other age groups (Edwards et al., 2015). Although age has generally been viewed as undesirable, Madsen et al. (2019) suggest reframing the concept of aging positively so that older adults continue to live productive lives, build relationships, provide leadership, and feel a sense of belonging, resulting in a thriving community. Viewing these older, community-dwelling adults as assets and resources instead of burdens enhances the resilience of the elderly and their communities (Madsen et al., 2019). Therefore, hosting seminars all over the world directed at older

adults where psychologists present and explain ways to build and/or enhance resilience could be beneficial to the elderly, especially in the rapidly evolving world of today. Psychologists could explain ways to further develop resilience such as maintaining relationships and sustaining a sense of purpose (Edwards et al., 2015). The elderly need to deal with a variety of disruptions in their lives that can range from aches and pains to losing a spouse or loved one or being diagnosed with a disease or disability; having ample stores and knowledge of resilience practices would help the older adults to face adversity, flourish with a purpose, and adapt to a changing world.

Conclusion

Resilience, however, defined, is an abstract yet vital trait. Psychologists have a myriad of definitions, theories, and studies on it, but no one has yet produced a single, applicable-to-all definition of resilience since diverse people groups face varying types of adversity and thus display resilience in different ways. This construct is understood to be fostered by both environmental and genetic factors. However, it is possible to develop and enhance resilience through many different methods. The concept of resilience is increasingly drawing attention and being applied to many “real-world” circumstances such as community disaster situations and urban policy, yet it is quite common in everyday functioning. Interestingly, Sapountzaki (2007) asserts that resilience is only beneficial in certain circumstances and that confronting vulnerability to one risk could cause increased exposure to another risk. This is a valid point for psychologists to continue studying.

Resilience is a daily choice. For example, if one loses a child, every time one encounters a stimulus that triggers a memory of the child, one must choose whether to sink into depression or to rise above the grief. In this way, resilience is a process. Some days, one may lose the battle of “bouncing back”, but on other days, one could emerge triumphant over trauma and/or; it is the final

result that matters. Thus, resilience is also an outcome: losing the battle but winning the war.

Resilience, although difficult to pin down in one definition, is crucial to surviving, adapting to, and ultimately, triumphing over adversity. The human race continues and will continue, to draw on its neverending reservoir of strength. Resilience knows no limits.

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