Resilience in Adult Cancer Care: An Integrative Literature Review

Manuela Eicher, MScN, PhD, Martin Matzka, Mag., Catherine Dubey, MScN, and Kate White, RN, PhD

he concept of resilience may fundamentally be understood as describing the individual process of facing significant adversity or the adaptation to it (Fletcher & Sarkar, 2013; Herrman et al., 2011). Assisting the individual in the dynamic, ongoing process of adaptation to adversity is an essential tenet of nursing practice that has been recognized by nursing theorists (Szanton & Gill, 2010). Resilience may be a crucial concept for cancer nursing, integrating physical as well as psychosocial care (Grafton, Gillespie, & Henderson, 2010).

The study of resilience within nursing began in the mid- to late 1980s and primarily centered on children and adolescents (Haase, 2009). This concept developed concurrently across several fields, including epidemiology, trauma studies, social work (Atkinson, Martin, & Rankin, 2009), psychology, and psychiatry (Bonanno, 2004; Bonanno, Westphal, & Mancini, 2011; Herrman et al., 2011; Masten, 2001, 2007; Masten & Obradovic, 2006; Rutter, 2006, 2012). Early studies on resilience focused on response behavior of children/adolescents indicating adaptation (e.g., academic achievement, cultural age expectations, adaptive behavior) in the face of developmental threats (e.g., maltreatment, low socioeconomic status, and parental mental illness). This early work conceived resilience as an individual trait attributed to an extraordinary inner strength and limited to some remarkable individuals (Masten, 2001). Today, resilience is understood as a commonly encountered phenomenon among individuals facing adversity (Bonanno, 2004; Masten, 2001; Rutter, 2006) resulting from basic human adaptational systems (Masten, 2001).

Within pediatrics, a developmental perspective (Masten, 2001, 2007; Masten & Obradovic, 2006) was readily adopted to promote resilience and well-being among survivors and their families (Landier, Leonard, & Ruccione, 2013). This led to the development of elaborate

Problem Identification: In cancer care, empirical research and theory development on resilience has primarily been the domain of pediatric settings. This article aims to (a) describe current scientific perspectives on the concept of resilience, (b) summarize quantitative research on resilience in adult cancer care, and (c) identify implications for cancer nursing.

Literature Search: An integrative literature review using PubMed, CINAHL®, and PsycINFO databases was performed and full-text, peer-reviewed articles published since 2003 were included.

Data Evaluation: To summarize quantitative research, 252 articles were retrieved yielding 29 eligible studies, of which 11 articles were evaluated and synthesized. Appropriate articles were reviewed and data were extracted and tabulated for synthesis.

Synthesis: Resilience is a dynamic process of facing adversity related to a cancer experience. It may be facilitated through nursing interventions after people affected by cancer have been confronted with the significant adversity posed by diagnosis, treatment, (long-term) symptoms, and distress.

Conclusions: Resilience in adult cancer care is an underresearched area. Studies confirm the association with improved health outcomes (e.g., psychological well-being, mental and physical health).

Implications for Research: Resilience is an important issue for adult cancer care. Researchers must carefully define a conceptual framework for developing nursing interventions aimed at furthering resilience in adult cancer care.

Key Words: resilience; supportive care; integrative review; oncology nursing

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models of resilience for pediatric oncology nursing, such as the Adolescent Resilience Model, to guide interventions and help adolescents face their cancer experiences (Haase, 2004; Haase, Kintner, Monahan, & Robb, 2013). Resilience in pediatric cancer research