

# Engagement and Coping Toward Resiliency: The Harmonizing Matrix between Student Nurses' Engagement, Successful Nurses' Coping, and Experienced Nurses' Resiliency

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## Abstract

Students are excited and committed to learning nursing practice and becoming a nurse. This article reflects on the contributions and complications of nursing student engagement. It then describes the complexity involved in coping, as nursing is a complex, emotional, and importantly, a caring profession. Subsequently, resiliency is elaborated upon as it relates to its development within nursing. Resiliency is the key to maintaining caring nurses and quality care within the challenging healthcare environment.

## Introduction

Student nurses are excited and committed to 'learning the practice' and becoming a 'nurse'. Nursing is complex with many foundational aspects to learn. Additionally, many diverse population nuances need to be known to manage the socio-cultural-economic patient specific needs when providing patient care. These various facets take time and effort to understand and then include into clinical practice and care judgements. Efforts should be made to support this growth and maturity for sound quality nursing practice.

Components of the process include engagement within their 'soon' to be profession. This engagement effort starts with warm and supportive welcoming for new nursing students. The supplies, background information, locations, resources, and all components needed for nursing education are certainly diverse; and sometimes students easily get overwhelmed with their educational experience. This education is designed to be developmental, with increasing depth as time progresses. Student nurses are engaged with this education and their learning pathway is set toward the preparation of generalist practitioners.

These 'registered nurse generalist practitioners' have not historically been educated and prepared emotionally and mentally to be resilient. They have been 'sent out to practice nursing' with minimal support to 'make it' or leave. In some settings where older nurses still 'eat their young' (see if new nurses can provide care on their own without support) really are destructive to new staff. This is no longer the 'new nurse orientation style' of the 2010s. New nurses can opt into residency programs or supportive rotational programs to assist them with necessary content and experiential knowledge and learning they did not receive in their formal education. This style of entering practice provides the *necessary* support for students to acclimate with less stress and subsequent distress with their new jobs.

Today's nurse educators need to know more about:

- How to maintain the students' sense of engagement,
- How to provide and demonstrate numerous positive coping methods, and
- How to guide students toward developing resiliency.

This will better prepare students as they graduate to continue their engagement presence and cope positively within their complex environments. With this engagement-coping-resiliency knowledge, students will certainly be on their way to developing strong resiliency characteristics and be more adaptive to their complex and demanding work environments.

## Background of Engagement

The definitions for key terms are identified below.

**Student engagement** is defined as,

"A positive psychological state in students while studying. Engagement concentrates on the cognitive and affective motivation of involvement with work tasks over long periods" [1].

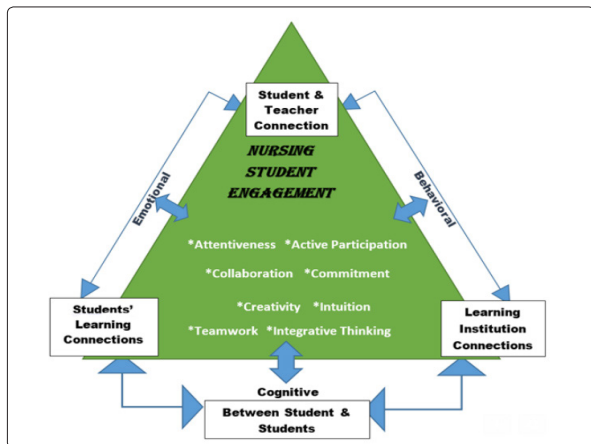
Nursing students exist within a complex student environment. Students are learning to properly level both their patient and colleague emotional approaches to become more mature, functional, quality registered nurses. This journey can be enjoyable if there is positive support provided during the nursing learning.

The issues with over-engagement, negative peer criticism, and quick burnout are related to the lack of supportive responses from significant others. In this negative instance with any of these factors, the students can become more functional (task focused) with less emotional attachment. The goal of students' experiences is to *not have* these negative responses to their encounters within nursing

education. Additionally, students can be over-committed or over-engaged, which is destructive because they are over-extending themselves. However, in the instance of students over-engaging, it is better to have them *not pull back too much and have them be or appear to be disengaged with their interactions, as caring is a fundamental component of nursing*. Thus *constructive engagement, or appropriate levels of caring engagement*, are required to create positive, constructive, working patient and colleague relationships.

Engagement can be complicated. There are necessarily various engagement levels, depending on the patient and goals of care and caring. It takes time and frequent mentored reflection to learn *how to properly balance* their sense of engagement. As experienced nurses know, there are certain interactions with specific patients and their immediate needs that are best managed with an ‘appropriate’ engagement approach. The level of engagement offered should suit the patient’s current needs toward their ongoing healing pathway. Engagement with colleagues is necessarily on a professional level, and on a personal level, key preceptors and mentors would require different and more intense engagement and depths of favored influence.

Engagement involves many aspects of quality nursing behaviors and care. These aspects include: attentiveness, active participation, commitment, intuition, collaboration, teamwork, creativity, and integrative thinking (Figure 1).



**Figure 1:** Nursing Student Engagement Multidimensional Network (Hudson & Carrasco, 2015, expanded by Hudson, 2018) [2].

### Nursing Coping Complexities

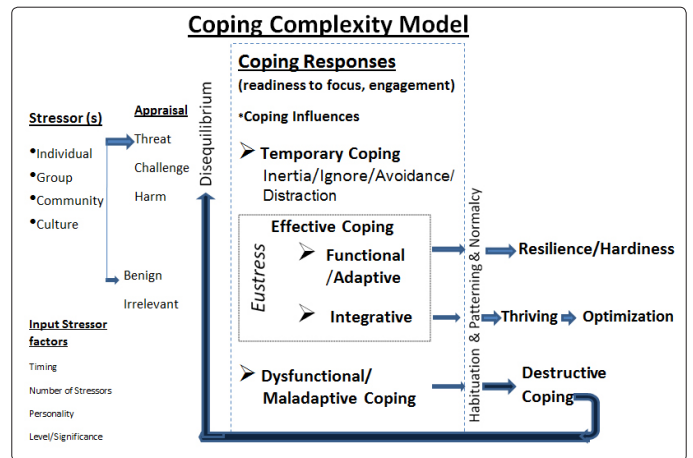
As students develop and are under a lot of pressure due to extensive workload and time constraints, their skills in coping can vary for diverse reasons. Coping is defined as, “Constantly changing cognitive and behavioral efforts to manage specific external and/or internal demands that are appraised as taxing or exceeding the resources of the person” [3].

Student can respond to their stressors (which have various intensities) in many ways. Stress responses can be classified as temporary, effective, or dysfunctional coping [4]. When enough stressors have repeatedly demonstrated *positive* coping effectiveness, the appearance of resiliency arises.

“The more we understand a person’s coping styles and variations

when they face stressors, the better we may be able to position the coping style toward more positive outcomes” [4].

Coping can be described as a multifaceted, complex phenomenon involving stressors, numerous influencing factors, and various responses [4]. A coping complexity model [4] outlines both good and poor decision-making and the likely outcomes for each. Coping is certainly influenced by a large number of factors (coping influences) which play into the complexity of decision making. These factors involving sociocultural, emotional, cognitive, and physical influences are outlined within this model, see figure 2.



**Figure 2:** Coping Complexity Model

**Coping Influences Table:**

<u>Sociocultural</u>	<u>Emotional</u>	<u>Cognitive</u>	<u>Physical</u>
<ul style="list-style-type: none"> <li>Seek Support</li> <li>Relationships</li> <li>Role Models</li> <li>Appearance</li> <li>Personality</li> <li>Finances</li> </ul>	<ul style="list-style-type: none"> <li>Self-Efficacy</li> <li>Determination</li> <li>Motivation</li> <li>Anxiety</li> <li>Calmness</li> <li>Emotional Intelligence</li> <li>Spirituality</li> </ul>	<ul style="list-style-type: none"> <li>Clarity</li> <li>Awareness</li> <li>Intuition</li> <li>Intelligence</li> <li>Problem Solving</li> <li>Reflection</li> <li>Resourcefulness</li> </ul>	<ul style="list-style-type: none"> <li>Strength</li> <li>Wellness</li> <li>Sleep/Rest</li> <li>Diet</li> <li>Drugs</li> <li>Illness</li> </ul>

All coping influences play into the ‘type of response’ a person generates, where previous experience and ones’ self-image play a part.

### Development of Resiliency

The subsequent and (somewhat simultaneous – on a junior level) development of resiliency takes time, effort, and sound decision making. Resilience is defined as, “The ability to become strong, healthy, or successful again after something bad happens; an ability to recover from or adjust to misfortune or change” [5].

*When motivated students, soon to be graduated nurses, start working in the complex and stressful medical field, resilience is certainly necessary for successful, ongoing, long-term coping. Without this strength, overwhelmed and disheartened nurses turn to stress relieving drinking, drugs, weight gain, and other destructive coping behaviors. Additionally, nurses can ‘drop out’ of constructive caring, and possibly, nursing all together. Versus when resilience is present, nurses stay in nursing, provide ethical and supportive nursing care, in addition to maintain the sense of caring for themselves. A nurse that takes care of themselves is more likely to provide a higher quality care for others.*

A sound understanding of these three concepts - engagement, coping, and resilience - and their interconnectedness can assist to mentally prepare educators toward 'best practice' student education. This can be accomplished by providing:

- Overarching personal support,
- Emotional and cognitive growth, and
- Ensure purposefully directed care environments in which students (future nurses) can be successful.

This effort towards developing stronger resiliency takes time and persistence to accomplish.

### Toward the Resiliency Journey

Students come to university settings with motivation and engagement in anticipation for their learning. Hopefully, they develop positive relationships with peers and their instructors. Engagement is usually maintained when the courses are engaging and create excellent rapport between those involved with the course. Engaged students are found to be self-sufficient, enthusiastic, and motivated to do well. They care to correct their errors to be more aligned with what is being taught. The three identified and confirmed factors strongly linked to student engagement are vigor, dedication and absorption [6].

Studies have consistently demonstrated that team-based learning does enhance student engagement and can prepare them for practice by using actual practice-like situations [7, 8]. Therefore active simulation skills lab activities and active classroom learning via problem solving and/or group work are highly desirable for students. The team building of group assignments, assists with enhancing feelings of engagement with the class (and future nursing unit dynamics).

The learning outcomes are better when there are higher levels of engagement. Important critical thinking can be developed when group discussions are utilized. In group discussions, feedback can be provided between participants to create the best response for a given situation, which requires active thinking and analyzing other's responses. This critical thinking is absolutely necessary for higher thinking versus memorization. Memorized data can be forgotten or misinterpreted, and is not 'necessarily' necessary in today's environment with numerous resources available for information of very high accuracy and quality.

Students learning to double check their information is additionally important for today's care decisions. This is why it is important to have reliable resources, with sound back-up systems, within healthcare settings. A care provider can only be as good as the resources and expertise readily available and attentive around them, as teams are required for complicated decision-making within today's healthcare settings. *When those within the environment are engaged with the patient and committed to high quality care, better outcomes result, including increases in patient and family satisfaction.*

On-line learning is transitioning into nursing education quite rapidly. The most recent changes to on-line learning have brought better satisfaction and engagement when they have a synchronous platform versus an asynchronous platform [9, 10].

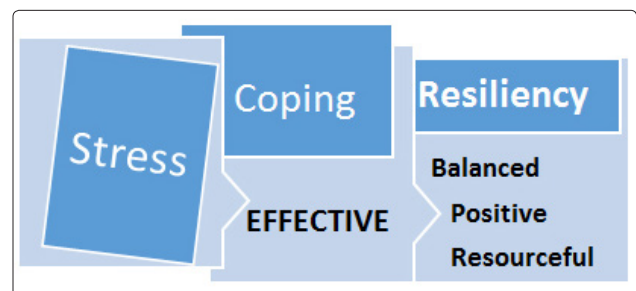
Being engaged with the patients, colleagues, and the environment can temper negativity when stress is occurring. Stress is a constant within a nursing clinical environment due to patients' instability or

condition changes, significant other issues, situational variations, and/or variations in personnel involved with the care. Managing stress well is critical for a nurses' survival. Highly engaged nurses are better decision makers and cope well within their healthcare environments. Maintaining highly engaged nurses should be a focused goal for nursing management. This can be assisted by things like self-scheduling, shared governance models for administration, and other equalizers within the work setting.

Overall positive or effective coping is a result of the build-up of effective coping strategies and responses. When sound decisions are being made, the outcome appears as constructive, positive, and healthy. *Effective coping* is the overall goal, which will develop into one's sense of resiliency or hardiness.

If stress is overwhelming, and poor coping is apparent, poor decision-making will be occurring. The outcomes of this type of problem are never positive. This dysfunctional or maladaptive coping is destructive for the person and directly effects their environment. This debilitating coping leads to hostility, aggression, and/or depression. For example, many nurses become depressed due to the lack of 'power' within the patients' healing processes, which are beyond their control. Additionally, they can become depressed due to the repressive nature of some of their colleagues' or supervisors' behaviors. Multitasking, time constraints, lack of resources, and many other issues compromise nursing's effectiveness and the nurses' sense of mental wellness. Attention to unit dynamics and frequent change initiatives need to be closely monitored to ensure nurses are adjusting well and 'effectively coping' with the unit's changing requirements.

With focused efforts, including appropriate training in decision-making, stress management techniques, prioritizing, and positive coping strategies, nurses can become better at their daily coping and decision-making, which can lead to *resilience*. See Figure 3., Journey of Resiliency:



Resilience is actually quite diverse in its application. "Resilience is cultivated when nurses are able to frame their experiences contextually in environments with different, even competing moral systems while maintaining a healthy sense of commitment, control, and challenge" [11].

A resilient nurse is a quality caregiver and a well-rounded responder to the stressors within the healthcare environment. Resilient nurses develop skills and techniques to provide 'well though through' care which is excellent for the patient, the family, and the outcomes beneficial for all involved.

Resilient nurses employ various coping strategies as needed to obtain the desired situational outcomes. A common descriptor

of resiliency is persistence. Lachman (2016) supports both the following trait descriptors be developed to support resiliency: rebounding/reintegration, high expectancy/self-determination, positive relationships/social support, flexibility/adaptability, humor/making light of adversity, self-esteem/self-efficacy [12], and staying true to one's self, deeply held values guide judgments, consistent decisions with beliefs, can make unpopular decisions, can handle unpleasant feelings, and perseverance [13]. Lachman (2016) points out that when a situation cannot be resolved in a constructive positive manner, a distress, or moral residue representing a person's compromised self is present, and this risks *a loss of the person's moral integrity* [11]. With the loss of moral integrity, short cuts in care delivery are utilized, nurses are less tolerant of patients and other professionals' behaviors, and often become *more lazy* with their care delivery. This certainly positions patients at high risk for missed care, poor care decisions, and general apathy.

Resilience is complex and includes many descriptors. According to Earvolino-Ramirez's concept analysis [12] these resilience descriptors are explained, as outlined here:

1. *“Rebounding/reintegration-* a quality of bouncing back and moving on in life after adversity is present, and reintegration as a desire to return to a normal routine in an improved way.
2. *High expectancy/self-determination-* having a sense of purpose in life and an internal belief an individual will persevere no matter what life brings
3. *Positive relationships/social support-* presence of at least one social support and meaningful relationship with one significant adult
4. *Flexibility-* adaptability, ability to 'roll with the punches', be accepting, with an easy temperament
5. *Sense of humor, making light of one's circumstance-* being able to make light of adversity and the intensity of emotional reactions, and
6. *Self-esteem/self-efficacy.”*

Resilience is developed and encouraged by reframing moral decisions in a positive healthy context. Being positive, constructive, and productive in work settings ensures quality care is supported. And importantly, one's 'peace and wholeness' is preserved. Caring for others experiencing illness and loss is one of the most challenging and rewarding careers. Building important nursing coping and resiliency skills is vital to the preservation of nurses' ethics, self-respect, and integrity when dealing with others.

Overall, these three features are intertwined and work together: engagement, coping, and resilience. Key facets are outlined below:

Engagement	→	Positive Coping	→	Resilience
*Emotional		*Functional		*Persistence
*Behavioral		*Adaptive		*Reintegration
*Cognitive		*Integrative		*Self-efficacy

As more is understood about these features which are developed, exhibited, and exposed, during nursing education and nursing care, the strategies developed to strengthen each will become part of the integral matrix for 'sound, ethical, and caring' nursing practice.

### How Can a Nurse Purposely Focus On and Develop Resiliency?

A starting point for resiliency would be *engagement*. Being engaged is feeling committed to ongoing learning efforts in order to make you

stronger in aspects which are important for you as a person and as an employee/worker/healer. Taking the time to learn correctly and thoroughly, can help to ensure decisions are being made with the correct background information. Ensuring you are prepared, open, and inquisitive are all good starting points toward engagement. The environment also must be conducive to positive and supportive learning.

The next step involved active experiential learning. These are opportunities to be placed in situations of stressfulness due to lack of knowledge, lack of time, or lack of preparedness, or other. This is when *coping mechanisms* come to fruition. A person desiring to have positive coping mechanisms will be thinking differently than a person with negative/destructive coping mechanisms. How to think about the problem- is it an overwhelming stressor or a large personal challenge? This sets the stage for healthy or harmful outcomes.

'To be well balanced, a diverse range of effective coping skills must be present. The availability of resources and supports must be available to assist as daily challenges appear. When stressors are faced, a better prepared and positively experienced person can maximize their reach for full potential and constructively respond to their various stressors' [4].

Developing these diverse positive coping skills occurs overtime, trial and error, mentored direction, directed from reading about problem solving, and other strategies. As good outcomes occur, nurses appropriately recall the previous utilizations to gain similar outcomes. This reinforces good practices and builds up the nurses' resourcefulness and expertise with problem solving.

Nursing students should start developing stronger coping skills in efforts toward refinement of strong nursing resilience. Resilience has been described as having seven components by Cross (2015) [14]. These include: using initiative, being creative, having humor, being moral, having insight, building strong relationships, and being independent [14]. Cross also mentioned using reflective practice, mindfulness, and peer support programs within nursing programs to enhance resiliency. Hwang and Shin (2018) recommend strengthening the nursing students' social-affective capabilities to enhance their resiliency. They identified student nurses as developing higher self-control because, 'they receive practical education in an urgent, unpredictable environment, unlike students of other majors.' They also report the students used colleagues to, 'act as a protective factor against the burdens of excessive learning and psychological demands.' These students were more successful if positive role models were present and they personally had higher satisfaction with their nursing major.

*Resilience* is developed from personal reflection and analysis, and learning the benefits or fallout from various decisions which were made. Group discussions, such as grand rounds where care decisions are discussed and expanded upon, and then corrections discussed for future similar situations are extremely useful. Well run staff meetings can be an avenue for stress and coping to be discussed with problem solving strategies initiated and monitored for nurses' overall wellbeing. The resiliency can become more apparent from ongoing reflective experiential learning. Certainly, also reading about and exposure to various topics related to stress, coping, and resilience can expand one's knowledge, which can be then applied to various future situations as they arise. This learning and self-reflection also

assists with developing better general coping skills and resiliency - in addition to - the specific issues being worked through.

Taking time away from and physically distancing from stressors can provide grounding and re-nourish one's sense of well-being. Being balanced with 'time at work and time away from work' is helpful for a maintaining balanced and a refreshed perspective. Physical activities, relaxing activities, peaceful presencing, and other means can increase your reserve as you eventually need to deal with the complex and troublesome healthcare work environment. Other organizational-wide areas to assist in strengthening resources toward better grounding and resiliency include conflict management classes, stress reduction classes, effective teamwork classes, zero tolerance classes, and other supportive initiatives [14]. Focusing on the development of positive coping and resiliency can align these characteristics to be highlighted and intentional, evolving, as the students are learning nursing.

## Conclusion

Nurses need to develop and maintain their engagement, coping strengths, and resiliency throughout their careers, as patients and colleagues will benefit from their utilization. These three components detail a strong path toward excellent nursing commitment and care. They bring improvements in outcomes and wellbeing *for all involved*. The nurses will greatly benefit from this purposeful psychological evolution toward a more *balanced and well-grounded perspective* as they participate in demanding care environments. Successful transitions to more resiliency will contribute toward the nurses' job satisfaction, joy, and more personal rewards of their positive work. And certainly, their performance at work will be '*jobs well done*'. Resiliency can be the strength and shield for nurses despite the various uncontrollable outcomes and negativity seen within many healthcare settings today.

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