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PRACTICE PAPER

Emotional Resilience in the Helping Professions and how it can be Enhanced

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Abstract

This paper provides an overview of research that has examined the benefits of emotional resilience for the wellbeing and employability of helping professionals such as social workers, nurses and midwives. It outlines the competencies that have been associated with emotional resilience (such as emotional literacy, reflective ability, appropriate empathy and social competence) and considers how they have the potential to help people to cope with the emotional demands inherent in the helping professions. Some evidence-based strategies are highlighted to help academic staff develop an 'emotional curriculum' to foster emotional resilience in students training for the helping professions.

Keywords: stress, resilience, helping professionals, education, emotional intelligence, reflection, mindfulness, coaching, supervision

Setting the scene

A body of research indicates that working in the 'helping professions' is emotionally demanding. An international study of nurses conducted by Aiken *et al.* (2012) reported that 42% of the sample described themselves as 'burned out'. Several studies of social workers have found higher levels of work-related stress and burnout than many other occupational groups (Lloyd *et al.* 2002, Johnson *et al.* 2005, Collins 2008). Moreover, secondary trauma and compassion fatigue are commonly found amongst helping professionals (Adams *et al.* 2006). Studies of helping professionals

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have highlighted a number of work-related stressors, both in relation to their role and the wider organisational context (Coyle *et al.* 2005, Jennings 2008). Managing situations of complexity and uncertainty, lack of control and support, and interactions with service users that evoke strong emotional reactions are considered to be particularly challenging (Muncer *et al.* 2001, van Heutgen 2011).

Work-related stress has a negative impact on employees that is wide-ranging. As well as the psychological health problems already highlighted, stress has been associated with impaired performance, physical illness, high turnover and sickness absence (Kinman & Jones 2001). Retention and continuity of care is of particular concern, as many helping professionals are leaving jobs such as nursing and social work for careers that are less emotionally demanding (Barak *et al.* 2001, DePanfilis & Zlotnik 2008). This is highlighted by Curtis *et al.* (2009) whereby the average time spent in the social work profession was estimated to be less than eight years, with work-related stress being one of the most common reasons for leaving. The need to address sources of stress in healthcare environments has also been highlighted in order to tackle a shortfall in recruitment and retention (McVicar 2003).

High levels of work-related stress and burnout have been found in trainee helping professionals as well as qualified staff (Deary *et al.* 2003, Jack & Donnellan 2010, Kinman & Grant 2011). Indeed, there is some evidence that the training period can be more stressful than qualified practice (Tobin & Carson 1994). The conflicting demands of being a student and an emerging professional can be particularly distressing (Pearcey & Elliott 2004). There is also evidence that many students feel ill-prepared for the realities of practice, which can engender psychological and physical health problems (Collins 2008, Jimenez *et al.* 2010, Clements *et al.* 2013). Strong emotional reactions to placement experiences can also diminish self-confidence and perceptions of professional effectiveness during post-qualification which can result in attrition (Jack & Donnellan 2010). The stress experienced by students training for the helping professions is likely to be exacerbated by a reluctance to disclose that they are experiencing difficulties (Barlow & Hall 2007, Wilks & Spivey 2010). Despite these known problems, however, the curriculum for helping professionals tends to place little emphasis on developing effective stress management and self-care strategies to protect personal wellbeing (Radey & Figley 2007).

Although undoubtedly stressful, it should be acknowledged that the majority of helping

professionals enjoy their work and find it deeply satisfying (Stalker *et al.* 2007, Collins 2008, Mealer *et al.* 2012). Gaining insight into why some people who experience high levels of stress at work not only fail to burn out, but may even flourish has clear potential to inform the development of interventions to enhance wellbeing more generally. Those who educate and train helping professionals are responsible for creating positive learning environments to prepare students for the realities and challenges of practice and ensuring their sustained employability. There is a growing recognition that introducing strategies to enhance emotional resilience during pre-qualifying training can help achieve this aim. Indeed, there have been recent calls for emotional resilience to be an intrinsic part of the training of nurses (Corrin 2013), midwives (McDonald *et al.* 2012) and social workers (Grant & Kinman 2012). The importance of resilience has also been recognised by professional associations such as the College of Social Work (2012) which requires students to be able to “take steps to manage and promote their own safety, health, wellbeing and emotional resilience” by the end of their qualifying course.

What is emotional resilience and how can it be enhanced?

Emotional resilience is a complex and multi-faceted construct (Grant & Kinman 2013). A wide range of definitions can be found in the literature, but most reflect the ability to ‘recover’ from adversity, react appropriately, or ‘bounce back’ when life presents challenges. Resilience has most frequently been examined as a protective resource in children who have experienced major life changes, deprivation and stress (Haggerty *et al.* 1996). Research in occupational settings is still in its infancy, but some attempts have been made to examine the nature of resilience in helping professionals (Kinman & Grant 2011, Adamson *et al.* 2012, Stephens 2013). Of particular importance to educators and training professionals is the growing evidence that resilience is not an innate, fixed characteristic, but can be developed through carefully targeted interventions (McAllister & McKinnon 2008, McDonald *et al.* 2012, Beddoe *et al.* 2013). Emotional resilience may be a particularly important quality for helping professionals, as it can help them adapt positively to stressful working conditions, manage emotional demands, foster effective coping strategies, improve wellbeing and enhance professional growth (Morrison 2007, Collins 2008, McDonald *et al.* 2012, Stephens 2013).

Research conducted by the authors of this paper has explored the ways in which trainee and qualified social workers, and those who educate

them, conceptualise resilience, why they think it is important, and how they believe this quality may be enhanced (Grant & Kinman 2013, Grant *et al.* 2013b). The findings indicate that personal representations of resilience are extremely varied and the concept is believed to encompass a wide range of skills and abilities. This questions the widely-held notion that resilience is simply an ability to bounce back after adversity. In order to develop interventions to enhance resilience in helping professionals, it is vital to gain insight into the competencies that underpin it and the strategies that can be used to enhance it using a rigorous, evidence-based approach.

Table 1 reports a range of attributes associated with emotional resilience in helping professionals emerging from a review of the literature associated with. According to Chen (2010), resilient nurses are reflective, optimistic and socially competent; they also possess good problem-solving skills and have a sense of purpose. A programme of research conducted with social workers (Kinman & Grant 2011, Grant & Kinman 2012) found that resilient practitioners are those who have well-developed reflective skills, social confidence, flexible coping styles, strong social support networks and an effective work–life balance. Moreover, this research has found that resilient social workers are able to demonstrate ‘accurate empathy’: that is, they can build compassionate relationships with service users without becoming emotionally over-involved and emotionally distressed.

Training resilient professionals

As discussed, a wide range of factors have been associated with resilience. Research findings have highlighted several competencies as having strong potential to enhance resilience in students training for the helping profession (Kinman & Grant 2011,

Grant & Kinman 2012). This paper discusses four competencies that are likely to be particularly helpful in training students to become resilient professionals: reflective ability, emotional intelligence, social confidence and social support.

Reflective ability

Enhanced reflective skills have been associated with improved practice in a wide range of helping contexts (Mann *et al.* 2009). Reflecting on personal strengths and limitations can foster many of the competencies associated with resilience that have been outlined previously; particularly improvements in self-awareness and enhanced coping and problem-solving skills. Research conducted by Kinman & Grant (2011) found that social work students who were better able to reflect on their practice, consider their personal motivations and explore the nature and impact of their empathic interactions with service users, were not only more resilient but reported higher levels of psychological wellbeing.

In clinical contexts, the process of reflection has been found to help nurses and midwives tackle seemingly intractable difficulties and foster resilient behaviours (Edward & Hercelinskyj 2007, McDonald *et al.* 2012). Well developed reflective abilities have also been found to underpin emotional literacy and accurate empathy in helping professionals, as well as facilitating supportive interpersonal relationships that can buffer workplace stress (Ruch 2007, Grant 2013). Developing reflective ability, therefore, has strong potential to enhance emotional resilience as well as foster the competencies that underpin it.

Emotional intelligence

Emotional intelligence or the ability to “motivate oneself and persist in the face of frustrations: to

Table 1 Attributes associated with resilient individuals.

Attribute	Source
Good support networks.	Kevern & Webb 2004, McAllister & McKinnon 2008, Tusaie & Dyer 2004.
Accurate empathy.	Kinman & Grant 2011, Grant & Kinman 2012, Chen 2010.
Reflective ability.	Chen 2010, Kinman & Grant 2011, Edward & Hercelinskyj 2007, McDonald <i>et al.</i> 2012.
Optimism.	Chen 2010, Collins 2008, Bright 1997.
Emotional intelligence/literacy.	Kinman & Grant 2011, Bright 1997.
Self-awareness.	Slaski & Cartwright 2003.
Self-efficacy.	Gillespie <i>et al.</i> 2007.
Social confidence.	Howe <i>et al.</i> 2012, McDonald <i>et al.</i> 2012, Pines <i>et al.</i> 2012.
Sense of humour.	Tugade & Fredrickson 2004.
Work–life balance.	Fouché & Martindale 2011, Jensen <i>et al.</i> 2008.

control impulse and delay gratification; to regulate one's moods and keep distress from swamping the ability to think; to empathise and to hope" (Goleman 1996, p34) is also a key component of emotional resilience. Emotional intelligence has both inter-personal aspects (i.e. social intelligence) as well as intra-personal elements (i.e. self-awareness). Inter-personal emotional intelligence helps people relate confidently and empathically to others, whereas intra-personal emotional intelligence allows people to gain insight into their emotional state, regulate their moods effectively, and build their emotional resources (Fredrickson 2001, Salovey *et al.* 2002). Significant relationships have been found between emotional intelligence and several positive outcomes such as physical and psychological health and life satisfaction (Salovey *et al.* 2002, Carmeli & Josman 2006, Mikolajczak *et al.* 2006). Moreover, emotionally intelligent people tend to be more psychologically flexible, optimistic, socially confident and co-operative, and possess superior problem-solving and decision-making skills (George 2000, Bonanno 2004).

Emotional intelligence is generally considered a key competence for helping professionals such as social workers (Howe 2008), nurses (Freshwater & Stickley 2004) and midwives (Byrom & Downe 2010). The important role played by emotional intelligence in enhancing the resilience and psychological wellbeing of helping professionals has been highlighted (Kinman & Grant 2011); it has been found to protect against burnout and compassion fatigue in different helping contexts (McQueen 2004, Killian 2008, Görgens-Ekermans & Brand 2012). More specifically, emotional intelligence will help employees to manage their own emotional reactions and those of others more effectively, and to recognise the potential impact of their personal emotional states on their problem-solving and decision-making abilities (Howe 2008). Emotional intelligence has also been found to underpin the development of 'accurate' empathy; as mentioned previously, this helps professionals build effective emotional boundaries enabling them to deliver compassionate, person-centred care and avoid over-involvement with service users or the development of cynical attitudes towards them (Grant 2013). Accurate empathy has also been found to protect against empathic distress and enhance psychological wellbeing more generally (Kinman & Grant 2011, Grant 2013).

Unlike general IQ, there is evidence that aspects of emotional intelligence can be developed through life experience and training (Fariselli *et al.* 2008). Incorporating strategies to enhance emotional intelligence into the curriculum is likely to yield many benefits for the wellbeing of helping

professionals as well as the service they provide. Like the other components of resilience discussed, emotional intelligence is a transferable skill that will help people manage their personal as well as their professional life.

Social confidence

Social confidence, assertiveness, and well developed communication and conflict resolution skills are essential qualities in helping professionals: they have also been associated with emotional resilience in this working context (Howe *et al.* 2012, McDonald *et al.* 2012, Pines *et al.* 2012). It is often assumed that people entering the helping professions already possess highly developed social skills, so the curriculum tends not to focus on developing these competencies further (Morrison 2005). Nonetheless, studies of social work, nursing and midwifery students indicate that levels of social competence vary considerably highlighting the need for more training (Timmins & McCabe 2005, Grant & Kinman 2012, Pines *et al.* 2012).

Well-developed social skills have many positive implications for helping professionals. The findings of a study of nursing students conducted by Jackson *et al.* (2011) revealed that the students who managed stress more successfully during placements were those who possessed the self-assurance to challenge and resist poor clinical practice. These skills enabled students to endure hostile work behaviours and manage conflict appropriately which, in turn, enhanced their emotional resilience. Unsurprisingly, confidence in social situations has also been found to enhance the quality of working relationships and help people forge effective social support networks (Montes-Berges & Augusto 2007). Being socially competent is, therefore, a key quality for those in the helping professions and one that should be promoted in the curriculum.

Social support

It is generally agreed that social support is one of the most important mechanisms by which helping professionals can build their resilience (Collins 2008, Jensen *et al.* 2008, Wilks & Spivey 2010). It has long been known that people who have more supportive relationships tend to experience less stress and be more physically and psychologically healthy (Sarason *et al.* 1985). Support from a wide social network can also foster feelings of social connectedness and empathy which are important resources for helping professionals. On the other hand, a lack of social support can engender feelings of social alienation as well as depression, anxiety and burnout (Eskin 2003, Sundin *et al.* 2007, Li *et al.* 2012).

Support from lecturers, practice educators and mentors is vital to help students develop their academic, practical and emotional competencies. There is evidence that mutually supportive relationships with peers within educational settings can be particularly beneficial, as they can help students to develop a 'community of learning' which enhances their ability to cope with stress as well as enhance their academic and practical skills (Kevern & Webb 2004). Peer support can also help students develop a professional identity and increase their commitment to the job role, which has the potential to improve retention (Clements *et al.* 2013). In the practice setting, a supportive work environment and social support from colleagues, in particular, have also been found to protect helping professionals against burnout and compassion fatigue (Boscarino *et al.* 2004, Jenkins & Elliott 2004). Increasing opportunities to forge mutually supportive relationships with peers can have many benefits and should be encouraged in the curriculum.

How can emotional resilience be enhanced?

The concept of emotional resilience embraces the knowledge, personal qualities and skills required for a sustained and successful career in social work (Kinman & Grant 2011) and nursing and midwifery (McDonald *et al.* 2012) as well as other helping professions. An awareness of the ways in which emotional resilience can be fostered is likely to help professionals thrive in their career rather than merely survive, and make a positive contribution to the lives of patients and clients.

The need to develop evidence-based interventions to enhance resilience amongst trainee and qualified helping professionals has been widely emphasised (Glass 2007, Hodges *et al.* 2008, McAllister & McKinnon 2008). Training opportunities are required in order to nurture reflective learning, emotional literacy, empathy and self-awareness, provide supportive supervision, and facilitate the development of compassionate relationships (Freshwater & Stickley 2004, Grant & Kinman 2012, McDonald *et al.* 2012, Beddoe *et al.* 2013). Although these competencies may already feature to some extent in the qualifying curricula of some institutions, they may not focus sufficiently on the development of emotional resilience (Grant & Kinman 2013). The evidence-based strategies that are discussed under the following headings have strong potential to enhance self-care and resilience: reflective practice, supervision, peer coaching, mindfulness and experiential learning.

Reflective practice

The key role played by reflective ability in supporting resilience has been noted previously; this enables professionals to explore the dynamics of their emotional reactions and their doubts, assumptions and beliefs, together with the ways in which they can impact on their wellbeing and practice. There are several techniques that could be utilised to enhance this key competency. Narrative writing has particular potential to facilitate reflection and enhance self-awareness, empathic reflection and reflective communication in helping professionals (Hodges *et al.* 2008, Bolton 2010). In particular, asking students to write a narrative from the client or patient's perspective, and sharing these reflections in small groups of peers, can increase communication skills, help engender appropriate empathy and improve professional practice (DasGupta & Charon 2004, Hurley & Linsley 2012). Encouraging narrative competence is, therefore, likely to be a particularly fruitful addition to the curriculum.

Supervision

Many trainee and qualified helping professionals develop their reflective learning through the process of supervision. According to Edward & Herculinskyj (2007), supervision provides a safe environment in which professionals can reflect on their practice and disclose and discuss their emotional reactions. These authors have also highlighted the important role that reflective supervision can play in helping students develop a flexible repertoire of problem-solving and coping styles and engender a goal-oriented perspective. As discussed, these competencies are all important foundations for resilience.

Group supervision has been found to be beneficial in helping trainee helping professionals manage academic and practice-related stress. A study by Arvidsson *et al.* (2008) evaluated the impact of group supervision sessions within the nursing curriculum. The sessions required the students to reflect on emotional reactions to their practice and how they related to the decisions and assessments they had undertaken. This was followed by feedback on the emotional and theoretical content of their reflection and a discussion of alternative courses of action. The intervention had a wide-ranging positive impact: students' self-confidence, sense of professional identity and motivation to learn were enhanced, as well as their ability to manage stress.

Although supervision has great potential to support and enhance resilience, many students are not fully prepared to utilise this resource effectively. Ensuring that supervision is utilised to best effect

requires an understanding of its purpose, awareness of the need to be adequately prepared, and a commitment to personal development. Encouraging students to develop the skills required to effectively prepare for reflective supervision or other supportive forums can help them maximise their benefits during training and subsequent professional practice.

Helping students to develop supportive relationships is an essential component for resilience. As well as emphasising the need for students to develop techniques to seek out effective support in practice, it is important for educators to enhance supportive structures within the curriculum. In their synthesis of the nursing education literature, McAllister & McKinnon (2008) propose that the ideal educational environment for supporting resilience is one that establishes effective social connection with peers and other adults, and incorporates positive role-modelling and coaching techniques.

Peer coaching

The development of a peer coaching scheme has strong potential to integrate important facets of resilience, such as social support, reflection and goal setting, into the curriculum. Peer coaching refers to a collaborative relationship which aims to enhance personal development by helping people identify personal strengths, promote self-awareness and develop reflective techniques (Goleman & Cherniss 2001, Gyllensten & Palmer 2005). There is also evidence that a brief peer coaching intervention can help students protect their psychological wellbeing during stressful periods (Short *et al.* 2010). Educators of helping professionals could use peer coaching techniques for personal development planning. Its strengths-focused philosophy has the potential to foster optimism and a positive outlook amongst students and help them develop action-orientated solutions to difficult situations, as well as develop strategies for self-care.

Mentoring programmes may also help students build resilience (Hodges *et al.* 2008), as they provide opportunities to gain support and enhance problem-solving capabilities. Sergeant & Laws-Chapman (2012) have evaluated a training and subsequent mentorship programme designed to support newly qualified nurses in their transition from students to qualified practitioners. The intervention was found to enhance stress-management skills and improve social relationships within the hospital; it also led to improvements in employees' self-awareness, empathy and communication skills. As such, mentoring has strong potential to support the development of emotional resilience and develop structures to

support trainee helping professionals as they move on to qualified practice.

Mindfulness

Evidence is emerging from a range of professional contexts that mindfulness training can help employees manage work-related stress (Foureur *et al.* 2013). Mindfulness involves "paying attention in a particular way: on purpose, in the present moment, and non-judgmentally" (Kabat-Zinn 2004, p4). Mindfulness skills have also been found to enhance many of the competencies that underpin resilience, such as reflective ability, emotional intelligence and accurate empathy (Turner 2009, Bolton 2010). Studies of helping professionals also provide evidence that mindfulness can relieve compassion fatigue, burnout and vicarious trauma (Cunningham 2004, Thomas & Otis 2010, Kessen & Turner 2012, Hülshager *et al.* 2013).

Like peer coaching previously discussed, there is evidence that mindfulness techniques can have a positive impact even after short-term interventions. Mindfulness Based Stress Reduction (MBSR) is a technique developed by Kabat-Zinn (2003) that incorporates meditation, yoga and relaxation training. MBSR has been associated with enhanced levels of empathic self-awareness, self-compassion and emotional resilience in professions such as medicine, nursing and social work (Shapiro *et al.* 2007, Krasner *et al.* 2009, Pipe *et al.* 2009, Napoli & Bonifas 2011). A study of nursing students conducted by Beddoe & Murphy (2004) found that an eight-week MBSR course also resulted in reduced levels of empathic distress amongst participants. Acceptance and Commitment Therapy (ACT) (Hayes 1987) is a technique that harnesses the principles of mindfulness. When delivered in workplace settings, ACT has had some success in enhancing emotion regulation skills and reducing psychological distress and burnout (Lloyd *et al.* 2013). Incorporating mindfulness techniques such as MBSR and ACT into the initial training of helping professions is likely to have many benefits for the wellbeing of helping professionals and their patients or clients.

Experiential learning

Experiential learning can also enhance many of the competencies associated with emotional resilience. Case studies, role plays and simulated practice, for example, can be used to improve emotion regulation, reflective ability, emotional intelligence and empathy (Cunningham 2004, Gair 2011, Foster & McKenzie 2012). Work-based learning opportunities, or placements undertaken as part of training, can provide opportunities to help students develop the competencies that underpin

resilience. According to Clarke (2006), workplace learning (especially the use of case studies to facilitate dialogue and reflection) has particularly strong potential to enhance emotion management skills and the effective use of emotions to facilitate problem-solving and decision-making. As discussed, sound emotion management skills are key elements of emotional resilience and are essential in order to forge therapeutic relationships with service users. An experiential approach to enhancing emotional literacy has been recently developed by Grant *et al.* (2013a) where social work students listen to experienced social workers from different backgrounds and disciplines describing their personal emotional reactions to practice and the ways in which they have processed them to protect their personal wellbeing and to ensure their practice is not adversely affected. This is followed by a group discussion. Preliminary findings indicate that this experiential approach improves aspects of emotional intelligence, reflective ability and accurate empathy.

Conclusion

Although this paper focuses on the individual attributes associated with emotional resilience, it should be emphasised that organisations have a responsibility to protect the wellbeing of their employees. Even highly emotionally resilient

professionals will be unable to survive, let alone thrive, if they are not provided with adequate resources, sufficient job control and support, or role clarity. Educators need to prepare students for the realities of helping work and encourage them to be assertive in seeking out the support they require to protect their own wellbeing, and develop the confidence to advocate for working conditions to optimise the wellbeing of their patients and clients. Little is yet known about the features of resilient organisations or the ways in which they protect employees. Future research should consider this issue and ways in which these attributes can be developed in leaders and managers to safeguard the wellbeing of staff.

Developing emotional resilience for practice is a key skill that will enhance wellbeing, job satisfaction and retention in the helping professions. It is anticipated that workers who demonstrate the associated competencies discussed in this paper will have a long and fruitful career. Emphasis needs to be placed on the need for sustained emotional resilience and the development of creative, evidence-based strategies to enhance the competencies that underpin it at all stages of professional development. Adequate time and resources are required to support students in developing their own personal toolkit of strategies to help them flourish in their subsequent careers.

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