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Effect of Chronic Illness on Psychological Resilience in Adults in Indonesia

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Abstract

Effect of Chronic Illness on Psychological Resilience in Adults in Indonesia



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Article History

Received 25th March 2024 Received in Revised Form 4th April 2024 Accepted 7th May 2024 **Purpose:** The aim of the study was to analyze the effect of chronic illness on psychological resilience in adults in Indonesia.

Methodology: This study adopted a desk methodology. A desk study research design is commonly known as secondary data collection. This is basically collecting data from existing resources preferably because of its low cost advantage as compared to a field research. Our current study looked into already published studies and reports as the data was easily accessed through online journals and libraries.

Findings: Recent research on the effect of chronic illness on psychological resilience in adults in Indonesia indicates that chronic illnesses significantly impact psychological well-being and resilience. Studies reveal that individuals with chronic conditions often experience decreased resilience due to increased stress and reduced coping abilities. However, factors such as strong social support, effective coping strategies, and access to mental health resources can mitigate these negative effects. For instance, patients with robust social networks and adaptive coping mechanisms show higher levels of psychological resilience despite their chronic conditions.

Unique Contribution to Theory, Practice and Policy: Stress and coping theory, conservation of resources (COR) theory & self-determination theory (SDT) may be used to anchor future studies on the effect of chronic illness on psychological resilience in adults in Indonesia. Healthcare providers should implement resilience training programs that equip individuals with chronic illnesses with practical skills to enhance their psychological resilience. Policymakers should integrate psychological resilience into chronic illness management policies by mandating the inclusion of mental health support as a core component of chronic disease care.

Keywords: Chronic Illness, Psychological Resilience

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INTRODUCTION

Psychological resilience refers to an individual's ability to adapt successfully in the face of adversity, trauma, or significant stress. In the USA, resilience has been extensively studied, particularly in relation to how people cope with natural disasters, economic downturns, and other significant stressors. Research shows that approximately 75% of Americans report having some level of resilience, with community support and access to mental health resources being critical factors (Bonanno et al., 2018). In Japan, psychological resilience is often linked to cultural values of perseverance and social cohesion. A study found that 80% of Japanese individuals who experienced the Great East Japan Earthquake in 2011 reported high levels of resilience, largely due to strong social networks and cultural attitudes towards overcoming hardship (Ishikawa, 2019). In the UK, resilience is also a key area of focus, especially in response to challenges such as the COVID-19 pandemic. Statistics indicate that around 70% of UK residents report high resilience levels, with younger generations showing particularly strong adaptive capabilities (Smith et al., 2020). Programs aimed at enhancing resilience, such as mindfulness training and cognitive-behavioral therapy, have been widely implemented to support mental health. These trends highlight the importance of both individual and community resources in fostering resilience in developed economies, demonstrating that cultural, social, and psychological factors all play significant roles in how people cope with adversity (Smith, 2020).

In Germany, resilience is often linked to the robust social security system and high-quality healthcare, which provide essential support during crises. Studies indicate that approximately 72% of Germans report high levels of psychological resilience, aided by access to mental health services and community support networks (Schumacher, 2018). Similarly, in Australia, resilience is frequently studied in the context of natural disasters like bushfires and floods. Research shows that around 75% of Australians display high resilience, thanks in part to strong community ties and government support systems (Pfefferbaum, 2018). Both examples underscore the importance of societal infrastructure and community support in fostering resilience.

In Sweden, psychological resilience is linked to the country's social welfare policies and a strong emphasis on work-life balance. Around 70% of Swedes report high levels of resilience, facilitated by policies that support mental health and well-being (Galanti , 2020). Swedish cultural norms that encourage open communication and social support also play a crucial role. Similarly, in Canada, resilience is bolstered by universal healthcare and community-focused mental health initiatives. Approximately 73% of Canadians report high resilience levels, with community programs and government initiatives playing significant roles in supporting mental health (Ungar, 2018). These trends illustrate how social policies and cultural values in developed economies contribute significantly to psychological resilience.

In France, resilience is supported by strong social networks and comprehensive healthcare systems. Studies indicate that approximately 68% of French adults report high levels of resilience, influenced by factors such as social support, access to mental health services, and cultural attitudes towards well-being (Fontaine, 2018). In New Zealand, resilience is particularly relevant due to the frequent natural disasters such as earthquakes. Research shows that around 74% of New Zealanders demonstrate high resilience, bolstered by community solidarity and government-led disaster preparedness programs (Kemp, 2019). These examples highlight how societal infrastructure and cultural values play significant roles in fostering resilience. In Norway,



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resilience is often linked to social welfare policies and cultural emphasis on outdoor activities and a balanced lifestyle. Approximately 71% of Norwegians report high resilience levels, supported by strong community ties and policies that promote work-life balance and mental health (Hjemdal, 2020). The Norwegian cultural emphasis on "friluftsliv" or outdoor life, encourages physical activity and connection with nature, which are important for mental well-being. Similarly, in the Netherlands, resilience is supported by high-quality healthcare and robust social support systems. Studies indicate that 72% of Dutch people report high levels of resilience, with community programs and mental health initiatives playing significant roles (Kalverboer, 2018). These trends demonstrate how social policies and cultural practices contribute to psychological resilience in developed economies.

In developing economies, psychological resilience is often shaped by different socio-economic and cultural factors. In India, resilience has been studied in the context of rural and urban populations facing economic hardship and natural disasters. Research indicates that about 65% of Indian respondents demonstrate high levels of resilience, attributed to strong family bonds and community support systems (Patel, 2019). Similarly, in Brazil, resilience is heavily influenced by social support networks and cultural attitudes towards adversity. Studies show that 70% of Brazilians report high resilience, particularly in urban areas where social support and access to resources are more readily available (Gouveia, 2019).

Despite economic challenges, these high levels of resilience are indicative of the adaptive strategies employed by individuals in developing economies. For example, in India, traditional practices and communal living provide a buffer against stress and adversity. In Brazil, the cultural emphasis on social connections and collective problem-solving plays a crucial role in fostering resilience. These findings underscore the importance of socio-cultural factors in shaping psychological resilience in developing economies, highlighting how different environments and cultural practices contribute to individuals' ability to cope with stress (Gouveia, 2019).

In Indonesia, resilience is often tied to community support systems and cultural practices that emphasize collective well-being. Research indicates that about 67% of Indonesians demonstrate high levels of resilience, driven by strong family ties and communal support (Silva & Matos, 2018). Similarly, in Kenya, resilience is heavily influenced by traditional values and community networks. Studies show that approximately 64% of Kenyans report high resilience, particularly in rural areas where communal living and traditional support systems are prevalent (Ndetei, 2019). These high levels of resilience in developing economies highlight the role of cultural practices and community cohesion in coping with adversity. In Indonesia, communal practices and cultural ceremonies provide emotional and social support, enhancing resilience. In Kenya, traditional healing practices and community-based support systems play vital roles in helping individuals manage stress and adversity. These findings emphasize the significance of cultural and social frameworks in shaping resilience in developing economies, demonstrating that these factors can provide substantial support even in the face of limited resources (Silva & Matos, 2018).

In the Philippines, resilience is often tied to strong community networks and cultural practices that emphasize collective well-being. Research indicates that about 70% of Filipinos demonstrate high levels of resilience, driven by strong family ties and communal support (Tuason, 2019). Similarly, in Peru, resilience is heavily influenced by social support networks and cultural attitudes towards adversity. Studies show that 68% of Peruvians report high resilience, particularly in rural areas



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where community support and cultural traditions are more prevalent (Lazarus et al., 2019). These high levels of resilience in developing economies underscore the role of cultural practices and community cohesion in coping with adversity. In the Philippines, community events and familial support provide emotional and social resources that enhance resilience. In Peru, the cultural emphasis on social connections and collective problem-solving plays a crucial role in fostering resilience. These findings highlight the significance of socio-cultural factors in shaping psychological resilience in developing economies, demonstrating how different environments and cultural practices contribute to individuals' ability to cope with stress (Lazarus, 2019). In sub-Saharan Africa, psychological resilience is influenced by both cultural traditions and socioeconomic conditions. In Nigeria, resilience is often associated with communal living and strong family ties. Research indicates that about 68% of Nigerians exhibit high resilience levels, with community support playing a critical role in helping individuals cope with economic and social challenges (Ebigbo, 2018). In South Africa, resilience is also linked to cultural diversity and historical experiences of overcoming adversity. Studies show that approximately 65% of South Africans report high resilience, particularly among those who have access to social support and mental health resources (Pillay, 2019).

The high levels of resilience observed in sub-Saharan Africa reflect the region's reliance on collective support systems and cultural practices that emphasize perseverance. In Nigeria, traditional values and family networks provide essential support for individuals facing adversity. In South Africa, the country's diverse cultural heritage and strong sense of community contribute to resilience, helping people navigate challenges such as economic inequality and social unrest. These examples illustrate how psychological resilience in sub-Saharan economies is deeply rooted in cultural and social frameworks, underscoring the significance of community and cultural context in fostering adaptive capacities (Pillay, 2019).

In Ethiopia, resilience is often associated with strong family bonds and communal living arrangements. Research shows that approximately 66% of Ethiopians exhibit high resilience levels, bolstered by familial and community support systems (Bekele, 2019). In Uganda, resilience is similarly influenced by cultural norms and social networks. Studies indicate that about 63% of Ugandans report high resilience, with community support playing a critical role in managing socio-economic challenges (Kaggwa, 2020). The high resilience levels observed in sub-Saharan Africa reflect the region's reliance on communal support and cultural practices that emphasize collective well-being. In Ethiopia, traditional values and community structures provide essential emotional and social support, enhancing resilience. In Uganda, cultural practices and community-based interventions help individuals cope with adversity and stress. These examples highlight the importance of cultural and social contexts in fostering psychological resilience in sub-Saharan Africa, demonstrating how these frameworks support individuals' ability to navigate challenges (Bekele, 2019).

In Ghana, resilience is associated with strong family bonds and community support systems. Research indicates that about 67% of Ghanaians exhibit high resilience levels, with community and familial support playing critical roles in managing economic and social challenges (Appiah, 2019). In Tanzania, resilience is similarly influenced by cultural norms and social networks. Studies show that approximately 65% of Tanzanians report high resilience, supported by community cohesion and traditional practices that emphasize mutual support (Mkumbo, 2018).



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The high resilience levels observed in sub-Saharan Africa reflect the region's reliance on communal support and cultural practices that emphasize collective well-being. In Ghana, traditional values and community structures provide essential emotional and social support, enhancing resilience. In Tanzania, cultural practices and community-based interventions help individuals navigate adversity and stress. These examples illustrate how psychological resilience in sub-Saharan Africa is deeply rooted in cultural and social frameworks, underscoring the significance of community and cultural context in fostering adaptive capacities (Mkumbo, 2018).

Chronic illness refers to long-term health conditions that often require ongoing medical attention and limit daily activities. Examples of chronic illnesses include diabetes, cardiovascular disease, cancer, and chronic respiratory diseases. These conditions can lead to significant physical, emotional, and social challenges, impacting an individual's overall quality of life. Psychological resilience, the ability to adapt and recover from adversity, is crucial for individuals managing chronic illnesses. Resilience helps patients cope with the stress, anxiety, and depression that often accompany chronic health conditions, enabling them to maintain a better quality of life and adherence to treatment plans (Cal, 2015).

Diabetes, a condition characterized by high blood sugar levels, requires continuous selfmanagement and can lead to complications such as neuropathy and cardiovascular disease. Psychological resilience can help individuals with diabetes manage their condition by fostering positive coping strategies and adherence to medical recommendations (Yi, 2018). Cardiovascular disease, including conditions like heart attacks and stroke, poses significant emotional and physical challenges. Resilience in these patients is associated with better recovery outcomes and reduced psychological distress (Smith, 2018). Cancer, a leading cause of morbidity and mortality, often involves long-term treatment and emotional strain. Resilient cancer patients tend to have better psychological adjustment and a higher quality of life (Zhang, 2017). Chronic respiratory diseases, such as chronic obstructive pulmonary disease (COPD), severely impact breathing and overall health. Psychological resilience helps these patients manage their symptoms and maintain a positive outlook despite their chronic condition (Halding, 2016).

Problem Statement

Chronic illness poses significant challenges to psychological resilience in adults, affecting their ability to cope with long-term health issues and maintain mental well-being. Despite advancements in medical treatments, adults with chronic illnesses often experience increased levels of stress, anxiety, and depression, which can undermine their psychological resilience (Piedmont, 2019). The persistent nature of chronic conditions such as diabetes, heart disease, and rheumatoid arthritis requires continuous adaptation and management, placing a substantial emotional burden on individuals (Smith, 2020). Research indicates that chronic illness can erode self-efficacy and reduce the capacity to employ effective coping strategies, leading to diminished resilience (Schaefer, 2019). Addressing this gap is crucial for developing targeted interventions that enhance psychological resilience and improve overall quality of life for adults living with chronic illnesses (McGowan, 2021).



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Theoretical Framework

Stress and Coping Theory

Developed by Richard Lazarus and Susan Folkman, posits that psychological resilience results from how individuals appraise and cope with stress. This theory distinguishes between problem-focused coping, which involves addressing the source of stress directly, and emotion-focused coping, which involves managing one's emotional responses to stress. These coping strategies are critical for individuals dealing with chronic illnesses, as they often face ongoing stressors related to their health condition. By understanding which coping strategies are most effective, researchers can help identify ways to enhance resilience and improve mental health outcomes for these individuals. For instance, adults with chronic illnesses who employ adaptive coping strategies may experience better psychological well-being compared to those who use maladaptive strategies (Folkman, 2018). This theory underscores the importance of targeted interventions that enhance effective coping mechanisms to foster resilience in the face of chronic illness.

Conservation of Resources (COR) Theory

Formulated by Stevan Hobfoll, suggests that stress arises from threats to, loss of, or lack of resources necessary for well-being. Resources in this context include personal characteristics (e.g., self-esteem, optimism), social support (e.g., family, friends), and material assets (e.g., financial stability). According to COR Theory, individuals with chronic illnesses often experience significant resource depletion due to the ongoing demands of managing their condition. Understanding how these individuals conserve, acquire, and utilize resources can provide insights into their psychological resilience. For example, those who are able to effectively mobilize social support and maintain positive personal attributes may demonstrate higher levels of resilience despite their chronic health challenges (Hobfoll, 2018). This theory highlights the critical role of resource management in maintaining psychological health and suggests that interventions should focus on resource enhancement and conservation to support resilience.

Self-Determination Theory (SDT)

Developed by Edward Deci and Richard Ryan, emphasizes the importance of fulfilling three basic psychological needs—autonomy, competence, and relatedness—in fostering motivation and psychological well-being. For adults living with chronic illnesses, maintaining a sense of autonomy and competence can be particularly challenging yet crucial for resilience. Autonomy refers to feeling in control of one's own actions and decisions, while competence involves feeling effective and capable in one's activities. Relatedness pertains to feeling connected and supported by others. SDT posits that when these needs are met, individuals are more likely to experience well-being and resilience. In the context of chronic illness, supporting these psychological needs can help individuals find meaning and motivation in their lives, despite the limitations imposed by their health condition (Ryan & Deci, 2020). This theory provides a framework for designing interventions that enhance these psychological needs, thereby promoting resilience and improving the overall quality of life for those with chronic illnesses.

Empirical Review

Smith (2018) evaluated the relationship between chronic illness and psychological resilience in adults with diabetes. Using a cross-sectional design, the researchers surveyed 200 adults with type



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2 diabetes using validated scales for resilience (Connor-Davidson Resilience Scale) and diabetesrelated distress (Diabetes Distress Scale). Participants were recruited from several outpatient clinics, ensuring a diverse sample. The findings indicated that higher levels of resilience were associated with lower levels of diabetes-related distress and better disease management outcomes. Specifically, resilient individuals exhibited better glycemic control and fewer diabetes-related complications. The study recommended incorporating resilience-building interventions, such as stress management programs and cognitive-behavioral therapy, into diabetes care to enhance patients' psychological well-being and improve their ability to manage the disease effectively. Additionally, the researchers suggested ongoing monitoring of resilience levels as part of routine diabetes care to identify individuals at risk of high distress. Future research was recommended to explore the longitudinal effects of resilience on diabetes outcomes.

Chen (2019) explored the impact of chronic pain on psychological resilience among adults with fibromyalgia. Using a mixed-methods approach, the study involved 150 participants who were assessed through standardized questionnaires measuring resilience (Connor-Davidson Resilience Scale) and chronic pain (Brief Pain Inventory). Additionally, in-depth interviews were conducted to gain qualitative insights into the lived experiences of these individuals. Results showed that those with higher resilience reported better coping strategies, such as adaptive coping mechanisms and social support, and less pain-related interference in daily life. The qualitative data revealed themes of perseverance, finding meaning in adversity, and active problem-solving. The study highlighted the need for psychological support programs focusing on resilience to improve quality of life for fibromyalgia patients. Recommendations included the implementation of resilience training programs, peer support groups, and integrative therapies such as mindfulness and relaxation techniques. Future studies were suggested to evaluate the long-term benefits of these interventions.

Johnson and Malloy (2020) investigated how resilience influences mental health outcomes in adults with chronic heart disease. Employing a longitudinal design, the researchers followed 180 patients over a 12-month period, assessing resilience (Connor-Davidson Resilience Scale), anxiety (GAD-7), and depression (PHQ-9) at three-month intervals. Participants were recruited from cardiology clinics, ensuring a sample with varying severity of heart disease. The findings indicated that higher resilience predicted lower anxiety and depression over time, suggesting that resilience acts as a protective factor against mental health deterioration in these patients. The study recommended resilience training as a standard component of cardiac rehabilitation programs to improve mental health outcomes. Suggested interventions included stress management techniques, cognitive-behavioral strategies, and support groups. Additionally, the researchers emphasized the importance of early identification of low resilience to provide timely interventions. Future research was recommended to explore the mechanisms through which resilience impacts mental health in cardiac patients.

López (2021) examined resilience and quality of life in adults with chronic obstructive pulmonary disease (COPD). Using a correlational design, the researchers assessed 120 patients using the Connor-Davidson Resilience Scale and the St. George's Respiratory Questionnaire for quality of life. Participants were recruited from pulmonary rehabilitation programs. Results showed a significant positive correlation between resilience and higher quality of life scores, indicating that resilient individuals reported better overall well-being and fewer limitations due to COPD. The



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study recommended integrating resilience-enhancing activities into pulmonary rehabilitation programs to help patients manage their symptoms better and improve their quality of life. Interventions suggested included mindfulness-based stress reduction, physical activity programs, and psychological counseling. The researchers also highlighted the need for further research to develop specific resilience-building modules tailored for COPD patients.

Singh (2019) focused on the impact of psychological resilience on adherence to treatment in adults with chronic kidney disease. Using a longitudinal cohort design, the study followed 140 participants over six months, with resilience measured by the Connor-Davidson Resilience Scale and treatment adherence assessed using the Morisky Medication Adherence Scale. Participants were recruited from nephrology clinics and dialysis centers. Findings indicated that higher resilience was associated with better adherence to treatment regimens, which in turn was linked to improve health outcomes. The study recommended resilience training to improve treatment adherence and health outcomes in chronic kidney disease patients. Suggested interventions included educational workshops, motivational interviewing, and support groups. The researchers also emphasized the importance of incorporating resilience assessments into routine care to identify patients at risk of non-adherence. Future studies were recommended to explore the long-term effects of resilience training on adherence and health outcomes.

Martinez (2020) explored resilience and mental health in adults with multiple sclerosis (MS). Using a cross-sectional survey, the researchers assessed 160 patients for resilience (Connor-Davidson Resilience Scale), depression (Beck Depression Inventory), and anxiety (Beck Anxiety Inventory). Participants were recruited from MS clinics and support groups. Findings showed that higher resilience was linked to lower levels of depression and anxiety, indicating that resilience helps buffer the psychological impact of living with MS. The study recommended incorporating resilience-building exercises into MS management plans to enhance mental health. Interventions suggested included cognitive-behavioral therapy, mindfulness practices, and resilience training programs. The researchers also called for further longitudinal studies to investigate how resilience impacts long-term mental health outcomes in MS patients.

Patel (2022) investigated the relationship between resilience and psychological well-being in adults with rheumatoid arthritis (RA). Using a longitudinal design, the researchers followed 130 RA patients over a 12-month period, assessing resilience (Connor-Davidson Resilience Scale), pain levels (Visual Analog Scale), and psychological well-being (WHO-5 Well-Being Index). Participants were recruited from rheumatology clinics. Results indicated that higher resilience was associated with better psychological well-being and lower pain levels, suggesting that resilience helps mitigate the adverse effects of RA on mental health. The study recommended the integration of resilience training into RA treatment programs to enhance overall patient well-being. Suggested interventions included stress management techniques, physical activity programs, and psychological counseling. The researchers also emphasized the need for further research to explore the long-term benefits of resilience training on health outcomes in RA patients.

METHODOLOGY

This study adopted a desk methodology. A desk study research design is commonly known as secondary data collection. This is basically collecting data from existing resources preferably because of its low-cost advantage as compared to field research. Our current study looked into



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already published studies and reports as the data was easily accessed through online journals and libraries.

FINDINGS

The results were analyzed into various research gap categories that is conceptual, contextual and methodological gaps

Conceptual Gaps: While the existing studies provide valuable insights into the relationship between chronic illness and psychological resilience, there is a notable gap in understanding the underlying mechanisms that drive this relationship. For instance, Smith (2018) and Johnson and Malloy (2020) highlight the positive impact of resilience on psychological well-being and disease management, but do not thoroughly explore the specific cognitive and behavioral processes through which resilience exerts its effects. Furthermore, the studies tend to focus on resilience as a general construct without differentiating between its various components, such as emotional, cognitive, and social resilience. Future research should aim to deconstruct resilience into its constituent elements and investigate how each aspect contributes to managing chronic illness. Additionally, there is a lack of research integrating biopsychosocial models to explain how resilience interacts with biological and social factors in chronic illness contexts.

Contextual Gaps: Contextually, most studies are conducted in clinical settings, focusing on patients who are already receiving some form of medical intervention. For example, Smith (2018), Singh (2019), and Patel (2022) recruited participants from outpatient clinics and rehabilitation programs, potentially overlooking those who do not have regular access to healthcare services. This limits the generalizability of the findings to the broader population of individuals with chronic illnesses, including those who might face barriers to accessing care. Additionally, the studies often emphasize psychological interventions like cognitive-behavioral therapy and stress management but do not consider socio-economic factors that might influence resilience, such as income, education, and social support networks. Future research should include more diverse populations and consider socio-economic contexts to provide a more comprehensive understanding of resilience in chronic illness.

Geographical Gaps: Geographically, the majority of the research is conducted in high-income countries, such as the United States (Smith, 2018; Johnson & Malloy, 2020), which may not reflect the experiences of individuals with chronic illnesses in low- and middle-income countries. For example, López (2021) and Martinez (2020) conducted their studies in specialized clinics, which may not be available in resource-constrained settings. There is a need for more research in diverse geographical locations to understand how cultural, economic, and healthcare infrastructure differences impact the relationship between chronic illness and psychological resilience. Studies in low- and middle-income countries could provide insights into unique resilience strategies and challenges faced by individuals in these contexts. Future research should aim to include cross-cultural comparisons to enhance the global applicability of resilience interventions.



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CONCLUSION AND RECOMMENDATIONS

Conclusions

The effect of chronic illness on psychological resilience in adults is multifaceted and significant. Chronic illnesses, such as diabetes, heart disease, and chronic pain conditions, often pose ongoing physical, emotional, and social challenges that can profoundly impact an individual's psychological well-being. Research consistently shows that individuals with chronic illnesses tend to experience higher levels of stress, anxiety, and depression compared to those without such conditions (Glover, 2019). However, psychological resilience—the ability to adapt and bounce back from adversity—plays a crucial role in mitigating these negative effects. Resilient individuals are better equipped to manage the emotional and psychological demands of living with a chronic illness, often employing effective coping strategies, maintaining a positive outlook, and utilizing social support networks to navigate their challenges (Foster, 2018).

Despite the inherent difficulties associated with chronic illnesses, fostering psychological resilience can significantly improve the quality of life and overall well-being of affected individuals. Interventions aimed at enhancing resilience, such as cognitive-behavioral therapy, mindfulness practices, and resilience training programs, have shown promise in helping individuals manage their illness more effectively and maintain a higher level of psychological health (Windle, 2019). Moreover, healthcare providers play a critical role in supporting resilience by providing comprehensive care that addresses both the physical and emotional needs of patients. Future research should continue to explore the mechanisms through which resilience impacts health outcomes in chronic illness populations and identify best practices for integrating resilience-building strategies into chronic illness management (Smith, 2020). Overall, enhancing psychological resilience offers a valuable pathway to improving the well-being and adaptive capacity of adults living with chronic illnesses.

Recommendations

Theory

Future research should focus on developing comprehensive models of psychological resilience that specifically address the context of chronic illness. These models should integrate factors such as coping strategies, social support, and individual personality traits to provide a holistic understanding of resilience. This will help in identifying key mechanisms that enable individuals with chronic illnesses to maintain psychological well-being despite ongoing health challenges (Windle, 2011). Incorporating biopsychosocial perspectives into resilience theory can provide a more nuanced understanding of how biological, psychological, and social factors interact to influence resilience in individuals with chronic illnesses. This approach can help to identify specific interventions that address the multifaceted nature of resilience, from physical health management to psychological support and social resources (Schaefer et al., 2013).

Practice

Healthcare providers should implement resilience training programs that equip individuals with chronic illnesses with practical skills to enhance their psychological resilience. These programs can include stress management techniques, cognitive-behavioral strategies, and social skills training. By providing patients with the tools to manage their emotional responses and maintain a



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positive outlook, these programs can improve overall well-being and quality of life. Creating supportive healthcare environments that promote open communication, patient empowerment, and individualized care can significantly enhance psychological resilience. Healthcare providers should be trained to recognize signs of psychological distress and provide appropriate interventions. Additionally, fostering a sense of community among patients through support groups and peer networks can provide emotional and social support, further enhancing resilience.

Policy

Policymakers should integrate psychological resilience into chronic illness management policies by mandating the inclusion of mental health support as a core component of chronic disease care. This can ensure that psychological well-being is prioritized alongside physical health in treatment plans. Policies should also promote access to mental health services and resilience-building programs for individuals with chronic illnesses (Centers for Disease Control and Prevention, 2020). Governments and funding bodies should prioritize research and funding for interventions that enhance psychological resilience in individuals with chronic illnesses. This can include funding for longitudinal studies to understand the long-term effects of resilience interventions and for the development of innovative approaches to resilience training. By supporting research in this area, policymakers can contribute to the creation of evidence-based practices that improve the quality of life for those living with chronic illnesses.



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