



Resilience to Physical and Emotional Stress

Professional paper

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Abstract

Resilience is the ability of an individual to successfully adapt to stressful and challenging situations. However, resilience encompasses not only the way we react to a specific stressful situation but also how we cope with accompanying physical, psychological, and social challenges. A resilient person is not immune to failures, losses, and the effects of stress. It is the way a person responds after the initial shock that stands out and distinguishes resilient individuals from others. The aim of this study is to examine differences in resilience and quality of life among early and middle-aged participants, as well as the relationship between these variables. We aim to determine the importance of self-efficacy, perseverance, social support, internal locus of control, and coping and adaptation strategies for preserving the physical and mental health of individuals under the impact of stressful life events.

Keywords: *resilience, child abuse in the family, child protection from abuse*

Resilience

For the development of mature personality, it is necessary to master techniques for coping with life challenges. Some individuals find it easier to do so, and we refer to them as resilient. Any exposure to stress, crises, and traumatic experiences has the potential to have lasting effects on psychophysical functioning. The consequences can be particularly pronounced if threatening situations are experienced during childhood or adolescence. However, whether there will be consequences and how pronounced and disruptive they will be for further functioning depends on the individual's characteristics and strength (Stepanovic, 2023)

Orientation towards these positive aspects of personality represents resilience. Resilience, therefore, implies a person's ability to adequately respond to stress. It is an adaptive response of the individual that has a protective role (Stepanovic, 2023).

What promotes the development of resilience are functional family relationships, quality time spent together by children and parents, the psychophysical health of parents, academic success and support from teachers, engagement in extracurricular activities, dedicating attention to hobbies, belonging to a prosocial peer group, and supportive broader social community (Stepanovic, 2023).

It follows that the development of resilience is closely related to the formation

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of personality as a whole. Being resilient does not mean that a person does not react to stressors or experience negative emotions, but rather that they deal with them in a functional way and overcome them (Bonanno, 2005). It is correct to consider resilience as a dynamic process that takes place throughout one's life, rather than as a state, characteristic trait, or specific personality trait (Masten & Coatsworth, 1998)

It is variable and varies depending on social situations and developmental phases. Sometimes the role of internal resilience is more pronounced, and other times the role of external support, but generally, for more effective problem-solving, the interaction of both factors is necessary. This also means that one can react in one way at one moment in life and differently in another (Block & Block, 1980).

Firstly, resilience is a response to difficulties, which implies the ways in which an individual responds to problems, so without adversity, resilience does not exist (McGinnis, 2018).

Secondly, resilience carries within it the possibility of recovery. A person is capable of returning to or recovering from adversity, reaching or surpassing their previous level of functioning.

Thirdly, resilience is generally described in terms of well-being, rather than pathology. Strengths, rather than deficits, are seen as resources that enable individuals to overcome adversity.

Resilience Models

There are three general classes of resilience models - compensatory, protective, and challenge models - that explain how resilience factors affect the trajectory of individuals from exposure to risk to negative outcomes (Fergus & Zimmerman, 2005).

Compensatory Model

The compensatory model best explains situations where a resilience factor opposes or acts in the opposite direction of a risk factor. The resilience factor has a direct impact on the outcome, one that is independent of the action of the risk

factor. In the CIET ACIERN-East study, for example, alcohol abstinence or moderation is compensatory in the sense that it is directly and independently associated with a lower risk of youth suicide (Andersson & Ledogar, 2008).

Protective Model

In the protective model, resources or assets mitigate or reduce the effects of risk on negative outcomes. Protective factors can influence outcomes in several ways. They can help neutralize the effects of risk, weaken them without completely eliminating them, or enhance the positive effect of another promotive factor in the creation of outcomes (Stepanovic, 2019). In the ACIERN-East study, drug avoidance, although not directly associated with a lower risk of suicide, is associated with lower alcohol use and, therefore, it is protective in the sense that it enhances the anti-suicidal potential of the latter (Andersson & Ledogar, 2008).

Challenge Model

The third model of resilience is the challenge model. In this model, the relationship between risk factors and outcomes is "curvilinear": exposure to both low and high levels of risk factors is associated with negative outcomes, but moderate levels of risk are associated with less negative (or positive) outcomes. For example, adolescents exposed to moderate levels of risk may face enough risk factors to learn how to overcome them, but they are not exposed to such high levels that overcoming them becomes impossible (Rolf & Johnson, 1999). Many challenge models require longitudinal data. Researchers, for instance, use them to track how repeated exposure to challenges prepares adolescents to cope with adversities in the future. An interesting application of the challenge resilience model is provided by Richardson (Richardson, 2002), for whom "reintegrative recovery" is the most positive outcome of a process involving an individual's reactions to stress or adversity. Resilient reintegration occurs when insight or growth is experienced as a result of the disruption (Stepanovic, 2019).

Research Methodology and Instruments

Research Problem

Any internal or external stimulus that triggers a biological response is known as stress. The compensatory responses to these stressors are known as stress responses. Based on the type, timing, and severity of the applied stimulus, stress can have various effects on the body, ranging from changes in homeostasis to life-threatening effects and death.

In many cases, pathophysiological complications of diseases arise from stress, and individuals exposed to stress, such as those who work or live in stressful environments, are more likely to experience various disorders. Stress can act as a triggering or aggravating factor for many diseases and pathological conditions. Resilience is a psychological construct that helps individuals adapt to uncertainty, trauma, threat, or other significant sources of stress. It has been shown that the majority of individuals return to their previous level of functioning with adequate care after a certain period, and some individuals even experience personal growth during times of crisis. Resilience is not inherited, it may not be equally expressed in all situations, but it can be learned. There is no more important skill for an individual than to "toughen up" and bravely confront the challenges that arise. In this master's thesis, we have reviewed some of the main effects of stress on the primary physiological systems of humans.

Research Subject

We are aware that stressful life events are situations that bring about a sudden change in living conditions and require adaptation and coping from individuals (Armstrong et al., 2011), and successful coping with stressors is referred to as resilience (Ryff et al., 2012).

However, it is important to reiterate that resilience is not a stable characteristic but a dynamic, changeable process. Numerous life events influence changes in resilience (Tusaie & Dyer, 2004). Therefore, the subject of this study is to determine the relationship between resilience, negative life events, and the general health of the participants.

Research Methods and Techniques

The applied research method involves online surveying, accessed through a created and posted link, which allowed access to the questionnaire. The questionnaire consisted of 23 questions, with questions 1 to 4 relating to demographic data (gender, age, and place of residence), questions 4 to 13 focusing on resilience factors, and questions 13 to 23 addressing the general health of the participants. Descriptive statistical methods were used for data analysis.

Results

The distribution of respondents by gender is 74.1% female and 26% male. The distribution of respondents by age is 81.4% aged 25-40 years, 18.5% aged 41-60 years, and 0.1% aged between 61-70 years. The distribution of respondents by place of residence is 74.3% from the city, 17.2% from suburban areas, and 9.1% from rural areas. Regarding satisfaction with life conditions, 60% of respondents are capable of coping with life problems, while 7.5% are not capable. In terms of achieving life goals, 56.6% consider their life meaningful, 41.8% consider it meaningful only occasionally, and 3.5% find their life meaningless. When facing failures in life, 56.3% of respondents believe that failure discourages them in some situations, 24.7% do not find it discouraging, and 20.4% believe that failure discourages them in life. In solving life problems, 68.9% believe they can cope with them, 30.3% believe they can cope in some situations, and 1.6% do not have solutions to life problems. Regarding managing life events, 58.7% of respondents believe they can control events in their life, 34.5% believe they can control their life in some situations, and 8.37% are unable to control their life. When it comes to dealing with stressful situations, 34.9% of respondents believe they can handle them well, 26.7% are unsure if they can cope with stressful situations, 21.6% believe they can handle them with the help of family, and 19.7% cannot cope with stressful situations. Regarding facing difficult moments or human mortality, 54.5% of respondents believe they can endure tough moments in life, 27.8% believe they cannot, and 20.2% rely on their family to overcome difficult moments.

Distribution of respondents according to hopeless situations in life: 40.9% believe they can endure tough moments in life and face hopeless situations, 28% do not give up in hopeless situations, 24.7% find it difficult to cope in such situations, and 8.36% give up in hopeless situations. Distribution of respondents regarding changes in life: 68.8% see changes as a challenge, 23.8% embrace challenges and do not avoid them, while 9.34% cannot see changes as a challenge. Distribution of respondents regarding adaptation to health problems: 68.6% believe they cope well mentally with health problems, 29.8% struggle mentally with health problems, and 2.4% do not cope mentally with health problems at all. Distribution of respondents regarding self-confidence: 59.3% feel in control of their actions in life and have self-confidence, 34.8% are unsure if they have control over their actions in life, and 7.9% lack control over their actions in life. Distribution of respondents regarding situational factors in life: 58.5% feel drained and unwell only in certain cases and circumstances, 26.8% do not feel drained or unwell, and 15.4% feel drained and unwell in everyday activities. Distribution of respondents regarding the impact of stress on health: 48.7% believe they have no pain, 39% experience pain and pressure in the head only in certain situations, and 13.3% experience pain and pressure in the head. Distribution of respondents regarding everyday stressful situations: 46.2% feel under some pressure in certain situations or occasionally, 30% feel constantly under some pressure, while 24.1% do not feel under any pressure. Distribution of respondents with anxiety disorders: 46% feel fear and tension without a clear reason in certain situations or occasionally, indicating they are under some stress. 32.5% do not feel fear, nervousness, or tension without a clear reason, indicating resilience, while 22.4% feel fear, nervousness, and tension without a clear reason, indicating they have anxiety. Distribution of respondents regarding workplace stress: 41.8% state they haven't noticed being slower in performing daily tasks at work, 37.7% experience it only occasionally, and 21.1% believe they are slower in performing daily activities, indicating they are under stress. Distribution of respondents regarding daily activities at work: 42.3% enjoy performing

daily activities at work, 43.8% enjoy them only occasionally, and 4.9% do not enjoy performing daily activities at work. Distribution of respondents regarding emotional stability: 75.5% believe their life is not entirely hopeless, indicating emotional intelligence. 20.2% feel this only occasionally, in specific situations where their emotional intelligence is unhealthy, while 4.8% consider their life completely hopeless, indicating a lack of emotional intelligence. Distribution of respondents regarding emotional maturity: 73.2% consider themselves emotionally mature, 22.8% sometimes feel worthless in difficult situations, and 4.3% believe they are worthless individuals. Distribution of respondents regarding suicidal thoughts: 84.6% state they have never thought about suicide, 9.9% do so only occasionally, in certain difficult life situations, while 6.1% have considered attempting suicide.

Discussion

The research conducted in this study aimed to contribute to and expand the current knowledge on the importance of self-efficacy, perseverance, social support, internal locus of control, coping strategies, and adaptation for preserving the physical and mental health of individuals under the influence of stressful life events. In our study, regarding life satisfaction, 60% of the respondents are capable of coping with life goals, 33% are capable only in some cases, while 7.5% are not capable. In achieving life goals, 56.6% of the respondents believe their life has meaning and that they achieve their life goals, 41.8% do so only occasionally, while 3.5% do not achieve their life goals and find life meaningless. The largest number of respondents, 56.3%, believe that failure discourages them in some situations, 24.7% believe it does not, while 20.4% believe that failure discourages them in life situations. When it comes to solving life problems, 68.9% can deal with problems in life, 30.3% only in some situations, while 1.6% have no solution to life problems. In managing life events, 58.7% of the respondents have control over their lives, 34.5% can control their lives only in some situations, while 8.37% are not capable of controlling their lives. Stressful situations in life can be controlled by 34.9% of the respondents,

26.7% do not know if they can cope with stressful situations in life, 21.6% can do so only with the help of their family, while 19.7% cannot cope with stressful situations in life. They can face difficult moments or confront human mortality: 54.5% of the respondents, 27.8% cannot, while 20.2% rely only on their family. In hopeless situations, 40.9% of the respondents can adapt, 28% do not give up in hopeless situations, 24.7% have difficulty adjusting in such situations, while 8.36% give up in hopeless situations. Regarding changes in life, 68.8% of the respondents see them as challenges, 23.8% enjoy challenges and do not avoid them, while 9.34% cannot see changes as challenges. When it comes to health issues, 68.6% of respondents handle them well mentally, 29.8% have difficulty coping with health problems, and 2.4% have no mental coping mechanisms for health issues. The majority of respondents, 59.3%, have control over their actions in life and self-confidence, 34.8% are unsure if they have control over their lives, and 7.9% lack control over their actions in life. Regarding situational factors in life, 58.5% of respondents feel exhausted and bad only in certain cases and circumstances, 26.8% don't feel exhausted, and 15.4% feel exhausted and bad in everyday activities. The largest number of respondents, 48.7%, have no physical pains or pressure in the head, 39% experience them only in some situations, while 13.3% have physical pains and pressure in the head. In everyday stressful situations, 46.2% of respondents feel occasional pressure, 30% feel constantly under pressure, and 24.1% don't feel under any pressure. The majority of respondents, 46%, sometimes feel fear and tension without a clear reason, indicating they are under some stress, 32.5% don't feel it, while 22.4% feel fear, nervousness, and tension without a clear reason, indicating they are anxious. Concerning daily activities at work, 41.8% of respondents are not slower in performing daily activities, 37.7% are slower only sometimes, and 21.1% are slower. The largest number of respondents, 42.3%, enjoy performing daily activities at work, 43.8% only enjoy them sometimes, while 14.9% don't enjoy them. In terms of emotional stability, 75.5% of respondents are emotionally intelligent, 20.2% have unhealthy emotional intelligence, and 4.8% are emotionally unintelligent. The majority

of respondents, 73.2%, are emotionally mature and do not think of themselves as worthless, 22.8% do so only in some difficult life situations, while 4.3% consider themselves worthless individuals. Regarding emotional instability, 84.6% state they have never considered suicide, 9.9% have only considered it in some difficult life situations, and 6.1% have contemplated attempting suicide. After careful analysis of the data, the research has shown a high average resilience within our sample. This can be explained by the fact that respondents in this study have the capacity to resist various challenges or threatening circumstances and are satisfied with their quality of life on physical, mental, and social levels, as well as with their living conditions. In this regard, Cummins (1998) suggests that people have developed mechanisms that allow them to maintain a constant level of subjective quality of life under changing objective conditions. However, when certain conditions and situations reach an extreme level, such as chronic severe pain, chronic stress, family problems, or long-term unemployment, a significant decrease in self-perceived quality of life can be expected. Certainly, resilience is one of the factors in preserving and improving quality of life.

Conclusion

Based on everything mentioned in this master's thesis, we can conclude that the hypothesis that the development and encouragement of adaptive coping mechanisms can prevent the occurrence of unwanted consequences of stress has been confirmed. From the analysis of the data from our research, we can see that the respondents have developed adaptive stress coping strategies, indicating resilience to physical and emotional stress, which includes the ability and skills of individuals to see their problems as challenges and opportunities for growth and development. The recommendations of this work would be:

1. Establish a good balance between work and private life.
2. Face difficulties in life, i.e., stressful events.
3. Persevere in work and daily activities despite stressful situations.
4. Develop the ability to provide an adequate response to stressful events in

- life, cope with them, and overcome them.
5. Regardless of the source of stress, a common factor for individuals who successfully overcome stressful situations is a stable relationship with a spouse, parents, friends, or someone else in their environment who provides support in

overcoming stressful situations. One of the key aspects of resilience is the ability to effectively and healthily deal with stress. Stress can be physically and mentally harmful, but resilience can help prevent and protect against the negative effects of stress.

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