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TOPIC. Concept analysis of resilience.

PURPOSE. To analyze the concept of resilience and provide a definition of resilience that is contextually independent of specific age-related groups or populations.

SOURCES. Published literature.

conclusions. Resilience is being increasingly studied in innovative ways among diverse populations. The broadly accepted definition of the term, however, has evolved through literature related specifically to children and adolescents. This concept analysis can provide a fundamental definition of resilience that is derived from the evolution of the term but broadly supports contemporary applications. Resilience researchers can apply this definition when exploring the possibility of resilience-based interventions.

Search terms: Concept analysis, resilience

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he term "resilience" often conjures the phrase "children are so resilient" and with good cause. The origins of the concept of resilience stem from the early psychiatric literature that examined children who appeared to be invulnerable to adverse life situations. Over time, the term "invulnerable" was replaced by the term "resilience," and a new area of theory and research was born. Resilience, the ability to bounce back or cope successfully despite substantial adversity (Rutter, 1985), has received significant attention from various domains. In light of this, a concept analysis is necessary to clarify the defining attributes, antecedents, and consequences of the term (Walker & Avant, 2005). Additionally, a concept analysis will contribute to the delineation of resilience in terms of its contemporary conceptualizations. Originally, resilience was referred to as a personality trait whereas over the past decade or two resilience has been redefined as a dynamic, modifiable process (Luthar, Cicchetti, & Becker, 2000). This latter definition allows for the development of resilience-based interventions and the ability to empirically study the outcomes of such interventions.

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The advantage of concept analysis is that it results in current theoretical and operational definitions for

use in theory and research (Walker & Avant, 2005). Concepts are not static. They change as quickly as new knowledge is generated and often are open to the interpretation of the analysts (Walker & Avant). Therefore, concept analysis is applicable and relevant to terms that have been used across disciplines, for long or short periods of time, and in emerging and evolving areas of research. The following analysis of resilience will be conducted using the Walker and Avant method. The method was chosen for its ease of use and straightforward approach. The key procedures in a concept analysis include identifying all uses of the concept; determining the defining attributes, antecedents, and consequences; identifying a model case and additional cases that exemplify various aspects of the concept; and defining the empirical referents of the concept.

Uses of the Concept

The Merriam-Webster Dictionary (2002) defines resilience as "an ability to recover from or adjust easily to change or misfortune" (p. 596), and the online, unabridged American Heritage Dictionary (2005) defines it as "the ability to recover quickly from illness, depression, change, or misfortune; buoyancy; the property of a material that enables it to resume its original shape or position after being bent, stretched, or compressed; elasticity." WordNet.com, a word defining Web site, adds "the occurrence of rebounding or springing back," and CancerWEB's online medical dictionary defines resilience as "energy (per unit of volume) released upon unloading; springiness." A consistent theme among the dictionary definitions is a sense of recovery and rebounding despite adversity or change.

A review of the literature revealed a variety of disciplines that utilize the term "resilience." For example, it is commonly used in the literature pertaining to ecology and conditions of the environment, microbiology, and studies involving cellular regeneration, materials processing, and different aspects of engineering, business, and economics, such as the stock market and

corporate resilience. To narrow the search, the focus was shifted to human resilience and the processes that humans experience in relation to resilience. The majority of the literature was found in the disciplines of psychology and psychiatry and was described primarily by qualitative approaches to understanding resilience in children. Nursing and medicine have also studied and written about resilience in specific specialty areas that include mental health, posttraumatic stress disorder (PTSD), breast cancer survivors, eating disorders, aging and the elderly, and cardiac stent placement patients, to name a few.

Synthesis of the Literature

For the purpose of this analysis, the goal was to locate articles and information that were not laden with rich contextual or age-specific components. The objective was to strip the concept to its purest form and understand the concept's evolution from a term applied almost solely to children and the study of resilient youth, to a concept broader in scope that is applicable to people of any age who have experienced significant adversity or stress and seek enhanced resilience to cope with the disruptive life event or challenge.

The terms "invulnerable" and "invincible" were once used interchangeably to describe the concept that is now known as resilience. Anthony (1974) used the term "invulnerable" to label children who did well despite multiple risks. This term was misleading because it implied that risk evasion, and hence invulnerability, were absolute and unchanging (Luthar et al., 2000). As research evolved, it became clear that this was not the case and that individuals' respond to different circumstances with varying degrees of resilience and vulnerability (Luthar et al.; Waller, 2001). Thus, the term "resilient" came to encompass those once referred to as "invulnerable" (Luthar et al.).

Werner and Smith (1982) conducted a landmark longitudinal study that followed the lives of 505 individuals born in 1955 on the Island of Kauai. The

Table 1. Protective Factors (by author)

Protective factors	Anthony	Benard	Garmezy	Masten	Rutter	Werner
Good natured, easy temperament		X		X	Χ	X
Positive relationship	X	X	Χ	Χ	X	X
Communicates effectively			X		X	
Sense of personal worthiness	X	X	X	X	X	X
Sense of control over fate	X	X	Χ			
Effective in work, play, love			X			
Positive social orientation	X		Χ	Χ	X	X
Assertive/asks for help	X		Χ			
Above average social intelligence			X		X	
Informal social support network	X		Χ		X	X
Ability to have close relationships	X		Χ		X	
Healthy expectations and needs			X			X
Uses talents to personal advantage			X	Χ	X	
Delays gratification	X		Χ		X	X
Internal locus of control	X		X		X	X
Flexible	X		X		X	X
Believes in her or his self-efficacy	X	X	X	X	X	X
Desires to improve			Χ			
Interpersonal sensitivity					X	X
Problem-solving ability	X		X		X	X
Decision-making ability	X		X			
Future oriented					X	X
Trust in others/hope for the future	X	X	X	X		
Sense of humor	X	X	Χ	X	X	X
Productive critical thinking skills	X		Χ	X	X	X
Manages range of emotions	X			X		
Adaptive distancing		X				
High expectations	Χ	Χ	Χ	Χ	X	Χ

researchers used a natural history method to document the lives of these individuals from birth until they approached their 40s. The findings from their study revealed provocative insights into the drastically different outcomes among individuals raised in similar environments. Of the children in the study that grew up in poverty or other adverse conditions (parental divorce, alcoholism, or mental illness), approximately two thirds eventually developed serious problems as adults. The other one third developed into competent, caring adults. The obvious question was why? The dissemination of these findings marks

the beginning of resilience research. The characteristics that all of the "resilient" individuals had in common as children and over the years came to be distinguished as protective factors (Johnson & Wiechelt, 2004).

Protective factors can be defined as specific attributes or situations that are necessary for the process of resilience to occur (Dyer & McGuinness, 1996). Many resilience researchers have compiled lists of protective factors from their studies (see Table 1). Rutter (1987), however, was quick to caution the meaningfulness of these factors. While he acknowledged that the

presence of protective factors is important in that they are "robust predictors" of resilience, he posed that it is the protective processes that are of greater value in determining approaches to enhancing resilience and thereby preventing negative outcomes (Rutter, 1987, 1993).

It is important to note that protective factors, although similar, do not qualify as critical attributes in the Walker and Avant (2005) method of concept analysis. Johnson and Wiechelt (2004) make the distinction clear by stating that protective factors are contextual, situational, and individual and lead to varying outcomes. Protective factors that are present or beneficial for one individual may not be present or beneficial for a similar individual. Additionally, the same protective factors that lead to healthy outcomes for one individual in one situation may not lead to healthy outcomes for the same individual in another situation (Johnson & Wiechelt).

In addition to discrepancies regarding the importance of protective factors versus protective processes, there is also confusion regarding the conceptualization of resilience as a personal trait versus a dynamic process (Luthar et al., 2000). This confusion is derived from the literature on ego-resiliency (Block & Block, 1980) that refers to personal characteristics of the individual as encompassing a set of traits reflecting general resourcefulness and sturdiness of character. Hence, the terms "ego-resiliency" and "resilience" differ on two dimensions (Luthar, 1996). First, "ego-resiliency is a personality characteristic of the individual, whereas resilience is a dynamic developmental process. Second, ego-resiliency does not presuppose exposure to substantial adversity, whereas resilience, by definition, does" (Luthar et al., p. 546).

Today, the focus in the literature appears to have shifted toward the derivation of resilience-based intervention and prevention programs (Johnson & Wiechelt, 2004; Luthar et al., 2000). This shift appears synonymous with what Wilkes (2002) has termed the "second generation of resilience research" and what Richardson (2002) describes as the "third wave of resilience inquiry." As resilience research has evolved,

many resilience scholars agree that based on the extant body of resilience work, it is appropriate to develop interventions (Luthar & Cicchetti, 2000).

Defining Attributes

Defining attributes are the characteristics of a concept that appear repeatedly in the literature and are consistently present when the concept occurs (Walker & Avant, 2005). The defining attributes for resilience were determined by comparing two sets of data. First, extensive lists of protective factors developed by prominent resilience researchers were examined and features common among the lists were tallied. Second, lists by resilience researchers that do not distinguish "protective factors" per se but have formulated characteristics consistently associated with the concept of resilience were cross-referenced.

A quality of bouncing back and moving on in life after adversity is present in resilience.

Rebounding/Reintegration

A quality of bouncing back and moving on in life after adversity is present in resilience. The term "rebounding" is found consistently in all aspects of resilience literature and it insinuates a positive direction or response. "Reintegration" is an expression found in the contemporary literature, which describes the process after disruption or adversity in which an individual wants to return to a regular routine or "get back to normal." They are ready to reintegrate or assimilate with the life they are familiar with; however, there is a readiness to do this in a positive or improved way (Flach, 1997).

High Expectancy/Self-Determination

High expectancy is a sense of purpose and achievement in life (Benard, 1991). This sense of purpose may be internal or external. For example, a person may become successful without overtly planning it or someone in their lives may impose high expectations on them with carefully orchestrated goals. Self-determination is a feeling that regardless of what the circumstances or barriers are in life, the individual will overcome the barriers and excel. Self-determination encompasses the concept of self-worth; not being overwhelmed by feelings of hopelessness or extreme challenge based on a strong internal belief that whatever life brings the individual will persevere (Benson, 1997; Garmezy, 1991; Masten, 1994; Rutter, 1987; Ryan & Deci, 2000; Werner & Smith, 1992).

Positive Relationships/Social Support

In studies with children, the presence of at least one healthy attachment to a significant adult is omnipresent when resilience is identified (Anthony, 1974; Garmezy, 1991; Luthar et al., 2000; Masten, 1994; Rutter, 1987; Werner & Smith, 1992). For adults, social support and meaningful relationships with at least one peer or family member are consistent with resilient outcomes (Flach, 1997: Richardson, 2002; Tusaie & Dyer, 2004). These relationships provide opportunities for communication and support and are important not only in their existence, but also within the context that the individual perceives them as being of healthy quality (Tusaie & Dyer).

Flexibility

The term "flexibility" captures the essence of adaptability, being able to roll with changes, being cooperative, amiable, and tolerant, and having an easy temperament. Across all resilience studies, variations of these qualities surface again and again (Blechman & Culhane, 1993; Garmezy, 1991; Luthar & Cicchetti,

2000; Masten, 1994; Richardson, 2002; Rutter, 1987; Werner & Smith, 1992).

Sense of Humor

The quality of having a sense of humor about life situations and about one's self is consistent across all resilience studies of all ages. Sense of humor plays an important role in the ability to make light of adversity, to enhance coping mechanisms, and to moderate the intensity of emotional reactions (Anthony, 1974; Benard, 1991; Garmezy, 1991; Masten, 1994; Richardson, 2002; Rutter, 1987; Werner & Smith, 1992; Wolin & Wolin, 1993).

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Self-Esteem/Self-Efficacy

The literature on the concepts of self-esteem and self-efficacy in relation to resilience is vast. Self-esteem and self-efficacy are attributed with many stages, forms, and levels of resilience. They are often credited with the answer to "why some people snap and others snap back." Self-esteem and self-efficacy are present in children and adults both innately and from mastery of previous experiences (Anthony, 1974; Benson, 1997; Flach, 1997; Garmezy, 1991; Luthar & Cicchetti, 2000; Masten, 1994; Richardson, 2002; Rutter, 1987; Werner & Smith, 1992).

Antecedents and Consequences

According to Walker and Avant (2005), defining the antecedents and consequences in a concept analysis is

often ignored or taken lightly, but may serve as a considerable tool in understanding the social contexts and how the concept is generally applied. Antecedents are the events or incidents that must occur prior to the occurrence of the concept and consequences are those events that occur as a result of the occurrence of the concept (Walker & Avant).

Antecedents

The main antecedent to resilience is adversity. Adversity is the single most notorious variable that distinguishes resilience from other social management processes or personality traits. Adversity is the feature that separates the concept of resilience from the personality trait of ego-resiliency (Luthar et al., 2000). Challenge, change, and disruption are all aspects of adversity that are noted before the process of resilience can occur. In their Resiliency Model, Richardson, Neiger, Jensen, and Kumpfer (1990) propose that individuals, reacting to disruptive life events, choose consciously or unconsciously to reintegrate. It is the disruption that allows an individual to learn or tap into resilient qualities and achieve resilient reintegration (Richardson, 2002).

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Consequences

The significant outcomes or consequences of resilience are effective coping, mastery, and positive

adaptation. There has been some theoretical discord among scholars in this particular area regarding the level of coping, mastery, and adaptation. For example, Tolan (1996) has stipulated that an individual must excel in multiple domains to be considered resilient. Whereas Luthar (1991) and Luthar, Doernberger, and Zigler (1993) have required excellence in one salient sphere with at least average performance in all other areas. Regardless of the degree of these consequences, their presence is a consistent outcome of the concept of resilience. Effective coping is best described as effectively managing the adversity one is faced with in order to function at an optimal level. "Mastery," a term found frequently in the self-efficacy literature, is defined as possessing great skill or knowledge; and positive adaptation occurs when an individual is rebounding or recovering from a disruptive or adverse event and the recovery is beneficial or effective.

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Model Case

A model case is an example of the concept that demonstrates all of the defining attributes (Walker & Avant, 2005). Sara was the youngest of four children raised in a dysfunctional family environment. Her father was an alcoholic and her mother was physically and verbally abusive. After years of fighting and yelling, Sara's parents ended up in a bitter and protracted divorce. Sara's needs were a low priority in the family chaos. Sara was a chubby baby, who turned into a chubby kid, who turned to food for most of her comfort.

Despite her expanding waistline and often being the subject of cruel teasing, Sara knew she was smart as a whip and could always rely on her sense of humor to get her out of a tough situation.

Sara had one best friend who lived down the street; her name was Jenny. Sara and Jenny shared everything: they conspired to grow up and have fantastic lives. Sara was going to become a pediatrician and help sick children, get married, and have a perfect house with three kids. Meanwhile Sara's family continued to spiral down. They had stopped going to church, dropped out of the social functions they used to attend, and lost contact with family friends. Sara often found herself home alone or left at school until early evening, forgotten by her parents. Nonetheless, she did not bother to complain, tried to stay out of her parent's way, and generally took everything in stride. She dreamed of the day she would be off to college and medical school working hard to become a doctor.

Sara grew up in that environment until she was 17. She did go off to college with a full academic scholarship. Once there she joined Jenny Craig, lost 60 pounds during her freshman year, and went on to enjoy social events and make new friends. She is a happy, practicing pediatrician today.

Additional Cases

Examining cases that are not at all like the concept of interest or are very similar to the concept of interest is an additional method for narrowing the defining attributes in a concept analysis (Walker & Avant, 2005). Following are examples of a contrary case and a related case.

Contrary Case

Diane is a woman who was married at 19 to an older man who was abusive and domineering. Although her life with him was hard, she was used to hardship, having been raised by an abusive mother and an alcoholic stepfather. Diane never went to

college, believing that she was not "college material." She worked as a secretary until she was married, then quit to take care of her husband. Over the course of her 18-year marriage Diane had three children. She did not have any close friends because her husband did not want her to and she was a cranky shrew that nobody liked. She spoke infrequently with her parents and never truly bonded with her children. Diane turned out to be as abusive toward her children as her mother was toward her. Somehow after 18 years of marriage, Diane decided she had had enough. She ran off with a little money she had saved over the years. She believed she could work as a secretary again, but she was not very good at it, called in sick frequently, and was not pleasant to be around. She found herself with little money, living in a shabby single room, and going from job to job.

Diane met Joe, an engineer from a local company; she married him 3 months later. Joe was an average guy, he was not abusive, but he was a man of few words. Diane spent the next 15 years feeling isolated and miserable and, although she did not work, she never did anything to become self-sufficient or to improve herself. She never worked on repairing the relationships with her children. One day, Joe had a heart attack and died leaving her with only a car and a mortgage. At the age of 53, Diane was forced to sell the house, rent an apartment, and look for a job. She tried calling her kids for help but none of them would help her. She worked odd jobs and grew more and more bitter. A couple years later, Diane died from lung cancer; she had smoked cigarettes for 35 years.

Related Case

John grew up in a volatile environment. His mother suffered from bipolar disease but never took her medication. She experienced much more mania than depression, and throughout John's life his mother would show up frenetically at his school, social gatherings, or church affairs in wild attire with outrageous ideas. His father, although not abusive, was a raging

alcoholic and drank to escape from the reality of his life. John's family experienced great financial ups and downs, at times living lavishly when his father's business was flourishing, at other times having the cars repossessed from the front yard.

John went to private schools and often had more than most, but he also adapted to not knowing if he would be asked to leave boarding school for a semester because his tuition was not paid. He was amiable and developed friendships with classmates easily but was never really sure that he fit in. John started drinking at boarding school and drank all through the 6 years it took him to finish college. He graduated and decided to go to law school which, despite drinking heavily and creating enormous debt, he was able to finish in 3 years.

John passed the bar on the first try but had difficulty holding down a job as an attorney. At 35 years old, John would frequently have his phone turned off, have his car repossessed, or get evicted from his apartment but he was always able to land on his feet. John had endured many struggles and rose above significant challenges in his life. He believed he was a good attorney and had come a long way. He had friends and the ability to laugh at himself. He lived his life the way he wanted and had no regrets.

Related Concept

A related concept is one that is similar to the concept being analyzed and may be mistaken for the concept itself. Defining a related concept will help clarify exactly what the concept being analyzed is and is not. Making the distinction between the related concept and the concept under analysis will minimize any further confusion between the terms.

Hardiness

"Hardiness" is defined in the *Merriam-Webster Dictionary* (2002) as "robust or able to withstand adverse conditions" (p. 325). Hardiness is the term that most

closely connotes resilience to many people. Unlike resilience, hardiness is a personality trait (Bonanno, 2004). Evidence suggests that hardiness may help buffer exposure to extreme stress (Kobasa, Maddi, & Kahn, 1982), but the central difference between resilience and hardiness is that resilience results in an improved or enhanced adaptive outcome, whereas hardiness allows individuals to endure significant adversity but there is not necessarily a positive change in outcome.

Empirical Referents

Determining the empirical referents for the defining attributes is the final step of a concept analysis (Walker & Avant, 2005). Empirical referents are the categories or groups of actual phenomena that, by their existence, demonstrate the occurrence of the concept itself (Walker & Avant). There are several published resilience instruments in existence. For the purpose of this paper, the Resilience Scale for Adults (RSA) was assessed and several key empirical referents were selected for discussion. The RSA is comprised of 37 items and five subscales that include personal competence, social competence, family coherence, social support, and personal structure (Friborg, Hjemdal, Rosenvinge, & Martinussen, 2003). The scale was developed largely based on the lists of protective factors developed by some of the preeminent resilience researchers over the past 20 years and was created specifically to measure the presence of these attributes (Friborg et al.).

Examples from the 37 items on the RSA that most closely correspond with the defining attributes determined in this concept analysis are shown in Table 2.

Implications for Future Theory, Research, and Practice

In describing the uses of concept analysis, Walker and Avant (2005) include implications for future theory, practice, and research. They state that concept

Table 2. Defining Attributes With Corresponding RSA Items (Friborg et al., 2003)

Defining attributes	Corresponding item from RSA	RSA subscales	
Rebounding/reintegration	I know that I succeed if I carry on	PC	
	No matter what happens I always find a solution	PC	
	I have realistic plans for the future	PC	
High expectancy/self-determination	I believe in my own abilities	PC	
	My future feels promising	PC	
	I work best when I reach for a goal	PS	
Positive relationships/social support	There are strong bonds in my family	FC	
	I have close friends/family members that care about me	SS	
	I always have someone who can help me when needed	SS	
Flexibility (easy temperament)	I easily establish new friends	SC	
	I enjoy being with other people	SC	
	It is important for me to be flexible in social circumstances	SC	
Sense of humor	It is easy for me to make other people laugh	SC	
	I easily laugh	SC	
Self-esteem/self-efficacy	Believing in myself helps me overcome difficult times	PC	
	I am pleased with myself	PC	
	I completely trust my judgments and decisions	PC	

RSA (Resilience Scale for Adults) Subscales: PC, personal competence; SC, social competence; FC, family coherence; SS, social support; PS, personal structure.

analysis will refine ambiguous terms, provide operational definitions with a clear theoretical base, facilitate instrument development, and enhance the development of nursing language (Walker & Avant).

Theory and Research

The study of resilience, although relatively new, does not lack a strong theoretical base or empirical research. According to Luthar et al. (2000), there are three major sets of developmental frameworks that are appropriate to guide resilience research. The trouble, however, is with the modifications made to these existing frameworks so that the revised constructs actually measure the specific adversity conditions being studied in resilience research (Luthar et al.). With respect to this concept analysis of resilience for theory development, the goal is to clearly establish the critical attributes that will in turn allow for them to be readily

distinguished. The considerations for future research include exploring the application of resilience-based interventions and the development of those interventions based on non-age-related attributes discerned through empirical research.

Practice

By studying resilience and exploring the possibilities of resilience-based interventions, practitioners from many fields can capitalize on unique opportunities for promoting positive adaptation. It is obvious from the review of the literature that there is a widespread and diverse body interested in investigating this endeavor. Conducting a concept analysis of resilience and clarifying the attributes, antecedents, consequences, and empirical referents of the term are simply contributions to the realization of these implications for future theory, research, and practice.

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