

INTEGRATIVE LITERATURE REVIEW ARTICLE

THE SCIENTIFIC PRODUCTION ON RESILIENCE IN NURSING A PRODUÇÃO CIENTÍFICA SOBRE RESILIÊNCIA NA ENFERMAGEM LA PRODUCCIÓN CIENTÍFICA SOBRE RESILIENCIA EN LA ENFERMERÍA

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ABSTRACT

Objective: to analyze the scientific production about resilience in Nursing. Method: this is a bibliographic, descriptive, integrative review type study. The research was carried out in national journals, published between the years 2009 and 2018, with a search on the CAPES Periodicals Portal, the LILACS database, the VHL and the SciELO Virtual Library. It is reported that the inclusion criteria were: scientific articles of empirical research, in Portuguese language. Data was analyzed in a manner described after presentation in figures. Results: a total of 308 articles were found and six were included for the final sample of the study. It is understood that the absence of resilience in Nursing is a risk factor that exerts a negative influence on the psychic and physical health of the nursing professional. It was observed that the search for individual support (religious and psychological), collective (interpersonal relations) and identification of the key factor of the problem, contribute to the increase of resilience. Conclusion: the shortage in the production on the subject in the last ten years was noticed as well as the absence of quantitative studies that presented predictors of resilience in Nursing. Studies are needed that relate the construct resilience as a dependent variable of other dimensions such as vocation. *Descriptors*: Nursing; Nurses; Ocupations; Resilience, Psychological; Research; Education.

RESUMO

Objetivo: analisar a produção científica acerca da resiliência em Enfermagem. Método: trata-se um estudo bibliográfico, descritivo, tipo revisão integrativa. Realizou-se a pesquisa em periódicos nacionais, publicados entre os anos de 2009 a 2018, com busca no Portal de Periódicos CAPES, na base de dados LILACS, na BVS e na Biblioteca Virtual SciELO. Informa-se que os critérios de inclusão foram: artigos científicos de pesquisa empírica, em língua portuguesa. Analisaram-se os dados de forma descrita após apresentação em figuras. Resultados: encontrou-se um total de 308 artigos e seis foram incluídos para a amostra final do estudo. Entende-se que a ausência de resiliência na Enfermagem é um fator de risco que exerce influência negativa na saúde psíquica e física do profissional enfermeiro. Observou-se que, a busca por apoio individual (religioso e psicológico), coletivo (relações interpessoais) e a identificação do fator chave do problema, contribuem para o aumento de resiliência. *Conclusão*: percebeu-se a escassez na produção sobre o tema nos últimos dez anos bem como a ausência de estudos quantitativos que apresentassem preditores de resiliência na Enfermagem. Fazem-se necessários estudos que relacionem o construto resiliência como variável dependente de outras dimensões como a vocação. Descritores: Enfermagem; Enfermeiras e Enfermeiros; Ocupações; Resiliência Psicológica; Pesquisa; Educação.

RESUMEN

Objetivo: analizar la producción científica acerca de la resiliencia en Enfermería. Método: se trata de un estudio bibliográfico, descriptivo, tipo revisión integrativa. Se realizó la investigación en periódicos nacionales, publicados entre los años 2009 a 2018, con búsqueda en el Portal de Periódicos CAPES, en la base de datos LILACS, en la BVS y en la Biblioteca Virtual SciELO. Le informamos de que los criterios de inclusión fueron: artículos científicos de investigación empírica, en portugués. Se analizaron los datos de forma descrita después de presentación en figuras. Resultados: se encontró un total de 308 artículos y seis fueron incluidos para la muestra final del estudio. Se entiende que la ausencia de resiliencia en la Enfermería es un factor de riesgo que ejerce influencia negativa en la salud psíquica y física del profesional enfermero. Se observó que, la búsqueda de apoyo individual (religioso y psicológico), colectivo (relaciones interpersonales) y la identificación del factor clave del problema, contribuyen al aumento de la resiliencia. Conclusión: se percibió la escasez en la producción sobre el tema en los últimos diez años así como la ausencia de estudios cuantitativos que presentaran predictores de resiliencia en la Enfermería. Se hacen necesarios estudios que relacionen el constructo resiliencia como variable dependiente de otras dimensiones como la vocación. Descriptores: Enfermería; Enfermeros; Ocupaciones; Resiliencia Psicológica; Investigación; Educación.

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INTRODUCTION

It is known that the health area differs from because of its particularities specificities, 1 as situations of stress and anxiety, and nurses deal directly with the suffering of the other, which increases the risk of occupational diseases.² In addition to the particularities and specificities of the Nursing area, it is possible to mention the presence of violence at work, occupational burnout and illness in Nursing, 1 which leads to a high level of medical licenses.

It should be emphasized that in the Nursing profession, "the nurse performs functions aimed at the recovery of patients with the objective of improving the physical, mental and emotional health possible, as well as the preservation of their spiritual and social well-being", guiding with self-care, concomitantly with their support network to prevent disease and damage.3 It also aims to "recover the person assisted in the shortest possible time, providing support and, both in life and in the process of dying, respecting their beliefs, values and religion".3

Thus, the importance of nurses' resilience to daily care³⁻⁸ is infused, such that nurses with increased resilience develop an competence in the ability to communicate, analyze and obtain knowledge related to the health practices of each individual, for example.³ It is observed, on the other hand, that the lack or the weakening of the resilience cause the illness, the expenditure of energy by the worker, since he can not exteriorize the emotions in the work environment, justifying the high stress index.4

It is known that the word resilience comes from physics, which means the ability of a material to absorb energy without suffering "plastic or permanent" deformation, that is, it is the "property by which the energy stored in a deformed body is returned when it ceases the stress causing an elastic deformation ".9 Thus, by applying the concept of resilience, health care possibilities that actually reach the subjects involved9 and, in other words, resilience is the ability to return to an earlier state, that is, elasticity and capacity to recovery. 10

It is believed, therefore, that the interest in the study on resilience in Nursing is of great importance, although there are few studies on the subject.11 A significant work in the form of a bibliometric review on resilience in the Brazilian context¹¹ was corroborated by the importance of this research and, according to the eligibility and exclusion criteria, with a cut between the years 2001 and 2016, only 14 articles were found, of which only three belonged to the Nursing area. It is emphasized that the three articles (Nursing) were published in Psychology journals.

This study aims to fill a gap in the Nursing area, in the form of an integrative review, to "resilience in Nursing" through search with specific controlled descriptors found in DeCS12 (resilience, Nursing and Nursing), crusaders with the Boolean logical operator "AND", in order to obtain the largest number of articles related to the research question of this work.

The objective of this study is to analyze the scientific production about Nursing resilience through an integrative review of the national literature 13-4 made in the main databases 15-7 in the last ten years.

OBJECTIVE

• To analyze the scientific production about resilience in Nursing in national journals in the last ten years.

METHOD

It is a descriptive bibliographical study, type integrative review guided by six recommended, in accordance with methodological rigor¹³: 1) identification and selection of the guiding question of research; 2) determination of the inclusion and exclusion criteria of the studies according to the sampling criteria; 3) definition of information to be extracted categorization of the studies; 4) analysis and critical evaluation of the selected studies, extracted and included in the integrative review; 5) interpretation of the results obtained and 6) presentation of the review with the synthesis of the knowledge produced.14

It is recommended, through the integrative review method, the construction of a research question, using the definition and description of PICOS¹⁸ where the "P" defines the population, context and / or problem situation; the "I" defines the intervention of interest and the "C", if necessary, a comparison intervention, in the case of clinical research; the "O" is the desired or undesired result of what is intended and the "S", the type of study. 18 In this way, the PICOS strategy was used to identify the theme and the selection of the research question: "What has been published about Nursing resilience in national production?".

It should be noted that, for the primary analysis, a specific form was developed to facilitate the characterization of the articles of the sample and defined as inclusion criteria: articles of empirical research, available in full in the Portuguese language, published between the years of 2009 to 2018 (last ten years). Theses, dissertations, editorials, articles of opinion and those that did not have relation with the resilience in the Nursing were excluded. They were consulted in the Portal of Periodicals CAPES¹⁵ and the databases LILACS, BVS¹⁶ and in the Virtual

Library SciELO¹⁷ in the period of March of 2019. It was chosen this timeline with the intention of investigating the most recent studies on the subject resilience in Nursing.

The controlled descriptors found in the DeCS¹¹ were used (Science and Health Descriptors) resilience, Nursing and Nursing, crossing them with the Boolean logical operator "AND" to obtain the largest number of articles related to the research question. It is noteworthy that the search was performed independently by two pairs (two researchers) and, after a comparison of the divergent results obtained, the results analysis was carried out to obtain consensus and / or exclusion by dissent.

It should be emphasized that, in this work, the strategies regarding the analysis of articles, reading and interpretation, in an exhaustive way, as well as in the final synthesis of the content of the studies and in the completion of the instruments of integrative review. ¹⁸ In order to clarify the understanding, figures were elaborated on the results found in order to answer the guiding question and the purpose of the study. The ethical aspects were respected, ¹⁹ referencing the authors in this integrative review.

A total of 308 articles were identified, according to the flowchart of the method of searching and selecting the studies adapted from PRISMA⁹, being: n = 211 (CAPES periodicals) and n = 97 (LILACS / BVS), during the search of the scientific bases. Of these, 302 were excluded because they did not meet the inclusion criteria during screening: n = 208 (CAPES periodicals) and n = 94 (LILACS / BVS). Exclusions, in eligibility, were given as follows: n = 196 (because they did not fit the scope of the study); n = 3 (because they are not of Brazilian population); n = 1 (because it is a theoretical article) and n = 2 (article in duplicate), ending with n = 302 excluded articles. In the discussion presented, we selected six articles included in the study, according to figure 1 adapted from the PRISMA model.²⁰

The data was collected in a specific instrument containing the following variables: location (database); authors; magazine; year publication; Qualis of journals (Classification of journals in the quadrennium 2013-2016); ²¹, level of evidence, theme of the article; goals; methods; sample; results and conclusions, in order to strengthen the analysis process. The discussion of the results is then presented in a descriptive and comparative manner, based on the literature relevant to the subject addressed, in order to meet the objective of this study as well as the analysis process.

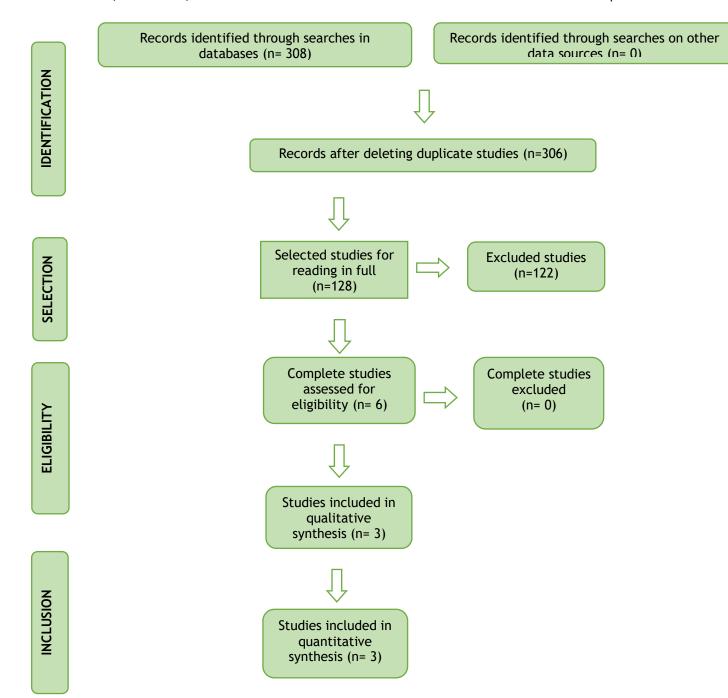


Figure 1. Flowchart of the study selection. São Bernardo do Campo (SP), Brazil, 2019.

It is reported that for the definition of the level of evidence, the recommendations of the validated criteria were followed, being: I - systematic reviews or Meta-analysis; II - randomized, controlled study; III - controlled clinical trial without randomization; IV - case-control or cohort; V - systematic review of qualitative or descriptive studies; VI - qualitative or descriptive study; VII - expert opinion or consensus.

RESULTS

Databases	Author, Journal, Year, Qualis CAPES	Article theme	Objectives
ID 1 CAPES	Belanciere, Beluci, Silva, Gasparelo. Estudos de Psicologia. 2010. A1. Nível de Evidência VI.	Resilience in Nursing Workers ⁴	To investigate the level of resilience of Nursing workers, aiming to weaknesses and strengths of this professional in the face of the adversities to which he is subjected.
Method and sample		Results and Conclusions	

Method and sample

It is reported that 229 workers participated (among nurses and nursing auxiliaries of the public health network), with 90.4% of the participants belonging to the female gender. It is shown that for the data collection, a sociodemographic data sheet and the Resilience Coefficient Questionnaire were used, with a quantitative methodology. It should be emphasized that the interpretations were followed by those recommended by the authors (percentage: below average, average and above average).

Santos, Moreira. Ciência & Saúde Coletiva. 2013. A2. Psico. Nível de ID 2 LILACS/BVS Evidência VI.

Method and sample

It is reported that the research was qualitative, and had as participants 20 Nursing professionals who work in the Pediatrics of a hospital in Rio de Janeiro. It is shown that the production of the data occurred from the application of the resilience scale (56 subjects to identify the high scores, that is, more resilient). It should be noted that of these, 37 were eligible for the individual interview, ending with 20 subjects for the semistructured with a view to achieving theoretical saturation for pre-categories or new categories. It should be emphasized that the technical analysis of the collected material was based on the adaptation of the Bardin Content Analysis.

Santos, Barreto. Rev ID3 Enferm UERJ. 2014. B1. LILACS/BVS Nível de Evidência VI.

Method and sample

It is reported that it was a qualitative research with 12 adolescents hospitalized in the municipal maternity of Rio de Janeiro using the narrative method of life. It shows that the data collection took place in February 2008. It is note that the narratives were submitted to thematic analysis. It is reported that the sample was composed of daughters of married parents, separated, who lived and did not live with the stepfather, were unaware of their biological father or were raised by grandparents.

ID 4 **CAPES**

Sousa, Araújo. Psicologia: Ciência e Profissão. 2015. A2. Nível de Evidência VI.

Method and Sample

It was observed that the majority of the participants, in the factor of regulation of emotions, is below average, denoting weakness in this dimension. Note that in the impulse control factor, most are above average. In the other factors (optimism, causal analysis, empathy, self-efficacy and exposure), the average is the majority. It was concluded that the excessive control of impulses and the difficulty in the regulation of the emotions cause a great expenditure of energy by the worker, since he can not externalize his emotions, especially in the work environment,

Resilience and death: the professional nursing facing the care of children and adolescents in the process of finitude of life 5

which justifies the high stress index.

To analyze the resilience of the nursing team in the care of children and adolescents with chronic illness, which includes dealing with their finitude.

Results and Conclusions

It should be emphasized that in the analysis of data, both individual and group interviews, the relationship between professional resilience and the management / care of the process of dying of children and adolescents stood out. It is noted that child and adolescent care in the process of finitude triggers responses related to the theme of resilience in search of outlets that oscillate between individual responses (religious and psychological support) and the search for incipient collective support based on relationships personal. It was concluded that the theme should be considered as strategic for professional health training: support of the collective environment and assume, inside and in the environment, the management practices humanization (in the hospital environment).

Ability of resilience in adolescents: the look of Nursing 6

Identify how adolescents use resilience mechanisms in adverse situations; to analyze the resilience capacity of adolescents and their contribution to the practice of Nursing.

Results and Conclusions

Parents' quarrels, sexual violence, physical assaults, and unstructured family have been defined as producing sequels, among them, low self-esteem. It is important to emphasize the importance of the theoretical contribution of the resilience framework, its applicability in Nursing care to adolescents in adverse situations, helping them to recover their self-esteem from the empowerment of this clientele. It is concluded that the dialogic relationship between adolescents and nurses strengthens the resilience and reduces the vulnerability of the victims, as well as contributes to the practice of Nursing resilience, as well as the applicability in care.

Occupational stress and Research on stress and resilience among health professionals 7

resilience among professionals in this area.

Results and Conclusions

It is reported that the collection was organized in two stages: a) online survey, with 92 professionals of different categories, through the application of sociodemographic and occupational questionnaire, Job Stress Scale and Resilience Inventory and b) two face-to- totaling six nursing professionals. The data were submitted to exploratory statistical analysis (search for significant differences in sociodemographic questionnaire), significant differences in the intensities in the Job Stress Scale and the reports (focus groups), the Thematic Content Analysis.

ID 5 **CAPES**

Rocha, Gaioli, Camelo, Mininel, Vegro. Rev Bras Enferm. 2016. A2. Nível de Evidência VI.

Method and Sample

It is reported that a quantitative survey was conducted between November 2013 and May 2014 with convenience sampling of 56 Nursing workers. It is shown that for the data collection, the Brazilian Instrument for Assessment of Organizational Culture (IBACO) and the Resilience Scale (RS) were used. It should be emphasized that the Statistical Package for Social Science (SPSS), version 16.0; the results were presented through descriptive statistics. Note that, in addition, the Pearson (r) and Spearman (rs) correlation tests were performed to verify the correlation between each category of IBACO and RS, and a significance level of 5% (p≤0 , 05). It is reported that some means of the categories did not present a normal distribution.

ID 6 LILACS/BVS

Maia, Souza, Sória, Costa. Revista de Enfermagem. 2017. B2. Nível de Evidência VI.

Method and Sample

It is reported that this was a descriptive, qualitative approach, with the production of data from Quest_Resilience, which determines the resilience condition from eight Determining Belief Models (DBMs). It is shown that the research scenario was the Clinical and Surgical units of a federal hospital (RJ). It is noted that the subjects of the study are professional nurses that met the following criteria: working in the Medical Clinic or Surgical unit for over a year; be over 18 years of age; be able to respond to online data collection; sign the Free and Informed Consent Term.

It should be noted that the main risk factors found: working on a shift and having more than one employment relationship. It is noted that the social support dimension constituted a more significant protection factor. It is detailed that the Nursing technicians represented the most vulnerable category. It is reported that more than half of the participants showed control over work activity and low occupational stress. It is reported that among the indicators of resilience, we highlight: satisfaction at work; emotional competence; empathy and tenacity and innovation. It is suggested that future research evaluate the effectiveness of interventions aimed at strengthening and developing factors associated with resilience, as well as the reduction of the stress experienced in health work.

Organizational Culture of Psychiatric Hospital Workers 8

To analyze the organizational culture of a psychiatric hospital. and Resilience of Nursing Identify the resilience capacity of Nursing workers

Results and Conclusions

It is emphasized that the centralization of power and devaluation of workers are present, although they recognize that there is collaboration at work and practices aimed at improving the interpersonal relationship. It is reported that in relation to the resilience capacity, 50% of workers presented high degree and 42.9%, medium degree of resilience. Note that Pearson's (r) correlation tests revealed negative values between IBACO and RS domains, indicating that the lower the individuals' valuation in the institution, the greater their resilience capacity. It is concluded that the organizational values reflect the model of work organization in the institution, which devalues workers' needs and demands greater capacity of resilience.

The resilience of medical and surgical clinic nurses in their daily lives 3

resilience Map the of condition nurses working in the medical and surgical clinics of the Federal Hospital of Lagoa in daily care and discuss the conditions of nurses' resilience.

Results and Conclusions

In the DBM, it was found that 56% of the respondents had an excellent resilience condition, which is related to the nurses' ability to identify the factors of a problem that interfere with their behavior in the face of adversity. It is reported that DBMs optimism with life and sense of life had poor resilience in the face of stress, with behavior pattern for intolerance. It is concluded that Nursing professionals have a balanced intensity in their beliefs and need to develop and identify the causes of the adverse situation and to remain in a protective position.

Figure 2. Synthesis of publications included in the integrative review according to the database, author, journal, year, Qualis, theme, objectives, method, sample, results and conclusions. São Bernardo do Campo (SP), 2019. Brazil.

According to fuigure 2, six articles were publised between 2010 and 2017 being the years 2013, 2014, 2015, 2016 and 2017, respectively, Qualis A1, A2, B1, A2, A2 and B2, a factor that guarantees a high level of research carried out in the last decade (transversal section), in the Portal of Periodicals CAPES15 and in the databases LILACS, BVS16 and SciELO Virtual Library. 17

It is observed, as far as the characteristics of the study participants, that the reports in the

articles collected data with the objective of: investigating the level of resilience; to know weaknesses and strengths in the face of adversity;4 to analyze resilience in the care of children and adolescents with chronic disease before the finitude of life;5 narrative of life coming from adolescents in adverse situations and their mechanisms of resilience with the objective of contributing to the practice of Nursing;6 stress and resilience among health professionals;7 of the organizational culture analysis and

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resilience of workers⁸ and, finally, to map the resilience of nurses who work in medical and surgical clinics at Federal Hospital of Lago, as well as to discuss the conditions of resilience.³

There were two distinct categories, the first being, 3-5,7-8 the researchers analyzed the resilience present in Nursing professionals; in the second category, the researchers carried out the data collection of 12 adolescents hospitalized in maternity (RJ), using the narrative method of life, and the subjects were exposed to fights of the parents, sexual violence, physical aggressions and are members of unstructured families. It can be observed that the dialogic experiences were incorporated into nursing knowledge in order to contribute to the practice of resilience in Nursing, as well as care for the clientele in the context in which it is inserted.6 It is emphasized that the authors of this integrative review - during the analysis of the results to obtain consensus and / or exclusion by dissent - considered the contribution of the work (ID3).

It can also be observed that, in the six studies, the Free and Informed Consent Term (FICT) was used, and the six were submitted to Research Ethics Committees involving human beings (REC), according to Resolution 196/96, effective at the time, ⁴ and 466/2012,^{3,8} thus guaranteeing to participants, the withdrawal of their participation at any time.

It follows, therefore, from the considerations made in the field of results, for the discussion with the objective of answering the guiding question of the study (What has been published about Nursing resilience in national production?), As well as to synthesize the results obtained in this research in order to construct a body of knowledge ²¹⁻² with regard to what is intended.

DISCUSSION

The resilience of nursing workers is explained in the article (ID1), who investigated the weaknesses and strengths of these professionals in the face of the adversity to which they are subjected⁴, using sociodemographic instruments and the Resilience Coefficient Questionnaire-RQ -Test, that the respondents in the sample are in a worrying situation: 13.5% work more than 70 hours a week; 25.8% have a double bond (with two or more jobs) and nurses' salaries are 20% lower than male nurses.

Seven constructs were analyzed regarding the levels of resilience, being: regulation of the emotions; impulse control; optimism; causal analysis; empathy; self-efficacy and exposure, in their positive and negative aspects. As a result, the control of below-average emotions was observed in 56.8% of the participants, denoting that the resilience capacity in this construct is

weakened; already, in the other constructs, the majority is in the average, and the only construct above the average was the impulse control.⁴

It is pointed out that the regulation of emotions can be related to the three categories: individual conditions, family conditions and conditions related to help/ support of the environment. It is observed that, in the case of Nursing workers, although the characteristics of the subject have not been ruled out, the work environment seems to be the main category related to the stress of the profession.⁴

In addition, ⁴ relevant study carried out on the Nursing context, with a contingent of 1.8 million (50% of the population), among auxiliaries, technicians and nurses, is presented, which brings light to the daily reality of these professionals. health area, this being full of specifics, particularities and contingencies that differentiate Nursing from other contexts, ¹ as shown in figure 3.

Theme	Results		
Rest Infrastructure	It is shown that the research data points to an uncomfortable situation: 56.4% declare that there is no infrastructure for rest. (p.68)		
Perception of the team	It is reported that the worrying situation refers to the perception of the team regarding		
regarding the user population	the user population in which less than half (47.2%) feel disrespected and mistreated by those who are assisted / attended by them. (p.64)		
Violence in work	It is worth noting that when the team is asked if they have suffered any violence at work, 1/5 (19.7%) affirm that yes and those who say that 'sometimes' add up to 9%, which amounts to almost 30%. (p.64)		
Professional wear and tear	Note that the numbers counted for professional wear and tear do not leave doubt as to the nature of the actions and conditions experienced by the Nursing team. It is recorded that 65.9% of these workers consider their activity to be exhausting. (p.68)		
Medical license	In the last 12 months, a significant number of the staff (22.5%) in this situation has been analyzed in the last 12 months. It is reported that this percentage means almost ¼ of the total contingent that operates there. It is important to say that women on maternity leave are excluded from the calculation. It should be noted that private data already show lower indexes, with 17.2%. (p.69)		
Sickness in nursing	It is noteworthy that another data revealed in the research was the serious fact that there is a 'certain sickness' of the Nursing team that affects more than half of the total contingent. It is reported that the data show that 56.1% state that they have had medical care in the last 12 months. It is noted that these figures represent that more than one million workers fell ill during this period, needing medical assistance. (p.70)		
Sedentary lifestyle	It is determined that the research also sought to know the habits of the Nursing team regarding the practice of sports. It was found that just over 1/3 exercise some sports. It is reported that a small fraction adopts a lifestyle in which sports life is incorporated as habit, while most remain sedentary, ie almost 60% declare that they do not play any sport. (p.70)		
Vacation	It is noted that the figures show that 80.5% of the staff have this habit maintained. It is reported, however, that there is a considerable percentage that has not done so regularly, that is, 10% declare not take a holiday regularly. This fact shows that this situation reflects the condition of labor and financial instability that a significant number of professionals live today, either because of the precarious and temporary bond that has with the health institutions, or because of the low and insufficient salary to which is submitted, forcing him to make beaks as a salary supplement. (p.70-71)		

Figure 2. Figure adapted from the synthesis of the working conditions in which the nursing is inserted¹. São Bernardo do Campo (SP), 2019. Brazil

It is also reported, according to the authors⁴, that subjects who are strong in the control factor of the impulses tend to have high regulation of the emotions. It is emphasized, therefore, that these two factors are based on similar belief systems; thus, if the control of impulses is below average, the subject accepts their first impulse belief as true and acts according to it, often producing negative consequences that block their resilience.⁴

Thus, in view of the stressful conditions that nursing workers are subjected to, ¹ coupled with the difficulty in regulating emotions and excessive control of impulses, the result is a reduction of resilient capacity.⁴

In the second article (ID2), entitled Resilience and death: the nursing professional regarding the care of children and adolescents in the finite-life process,⁵ that the authors stated that health professionals use the following strategies of resilience: in the contact with the process of living and dying with chronic health, bet on their formulations as people, associating technique and affection; they are based on the search for religious reasons; they avoid suffering for patients in the process of dying; make team changes.⁵

It is pointed out that, in the scenario studied,⁵ there is no work directed towards these caregivers at the finitude of life, and many surveyed reported this institutional deficiency, affirming that it is necessary to care for those cared for, corroborating other studies.¹ Accordingly,

according to the authors, ⁵ the promotion of resilience for professionals in this field should seek collective construction, with support dialogues, technical training bases, qualified support networks and personal trajectory in career building and work choices.⁵

In terms of career development and work choices, the relevance of the vocation / sense of work to the full consolidation of the profession, regarding career development, professional satisfaction, well-being and personal growth, among other dimensions of the psychic order of nursing²³, being that the vocation can impact the person-work compatibility, generating greater engagement. It is known that the idea that work can be approached as a vocation has a long history, 24-5 however, this vocational feeling needs to be better studied to understand the elements that make up the dimensions of professional choice, and vocation can be a predictor of resilience.²³

It is understood that many are the difficulties experienced by Nursing professionals, ranging from the general aspects of Nursing training,²⁶ characteristics of the profession,²⁷ until the labor market is increasingly unbalanced between supply and demand ²⁸ and, in this area, historicity has bases of religious vocation,²⁴ while contemporaneity brings the exercise of care as a profession and its facets, for example, the opportunity to belong to interesting groups and the socioeconomic rise.²⁹

The third article (ID3), the Capacity of resilience in adolescents: the look of Nursing, ¹⁷ being that these adolescents were daughters of parents married, separated, lived and did not live with the stepfather, were unaware of their biological father or were raised by grandparents. It is added that they are part of this scenario: fights of the parents; sexual violence; physical aggressions and unstructured family that produced sequels, such as low self-esteem. Through this study (ID3), qualitative research was adopted with the adoption of data collection through the life narrative, to know the life history of the researched ones from their own narratives. ⁶

In this study (ID3), unlike the other articles in this integrative review (ID1, ID2, ID4, ID5 and ID6), the authors emphasized the importance of the dialogical relationship between the adolescents and the nurses and had "the active questions of these health professionals with passive customer responses. "It is described, therefore, that they had as purpose and objective "the construction of a field of exchanges with view to be incorporated to the knowledge of the nurses and the experiences of the adolescents". It can also be observed that the purpose and the objective contributed to the practice of resilience in Nursing and care.

The individuality of the researched ones and their feelings were valorized, through attentive and sensitive listening, repealing a paradigm of the area: the mechanic attendance. It was concluded, in view of the attentive and sensitive listening, by the authors, that there is a contribution to the appreciation of these clients' self-esteem, and these professionals (nurses) should adopt a posture that contributes to their self-esteem and resilience of these teenagers, in this way, "making them autonomous and protagonists of their own lives".

It can be observed that, to be a nurse, one has to have as a perception that the priority skills of this professional are humanism,⁶ based on simplicity, charity and humility, strongly supporting the foundations of the profession 24 (1633) and later, as scientifically erected by Florence Nightingale (1854), by consolidating the teachings of love and brotherhood to the next.²⁴ In this way, there is a relationship between servile activity (the desire to serve and to give oneself in care for others) 30 and resilience, that is, a servile image and resilience.

In the fourth article (ID4), the theme was Occupational stress and resilience among health professionals, with the objective of describing, analyzing and understanding the perceptions and experiences of stress and resilience, the identification of risk and protection factors. Therefore, the authors used the Job Stress scales and the Resilience Inventory. It turns out that the

risk factors faced by these professionals (nurses) are: to work on a shift and to have more than one employment relationship with Job Stress Scale. Outstanding among the indicators of resilience were: job satisfaction, emotional competence, empathy and tenacity and innovation.⁷

It is important to comment that, according to the authors, in general, the sample had indicators of resilience above 60% in all evaluated factors,7 as in findings of seminal studies that corroborate the results of this research, even in populations exposed to enduring factors.31 It can also be observed that a high level of schooling is a protection factor in order to permeate resilience among nursing workers. processes significant differences were found in the emotional sensitivity factor among married women (31-50 years of age and who have religion); the male participants presented below-average scores on the factor in question, indicating differences between genders in the exercise of professional activity in health.

According to the authors, due to their work, they interfere with the life of workers, especially with regard to the emergence of occupational diseases, ⁷ and, among the populations of workers studied, health professionals have frequently been identified as a risk group for illness physical and mental.⁴ It is believed that this statement is in line with the study entitled Conditions of work in Nursing, ²⁰ which portrays professional burnout, medical leave and illness in Nursing. These data were presented in Figure 2 analytically.

In addition, many health professionals are expected to be healthy and adequately perform their duties, providing quality services to the population, even when exposed to adverse situations, however, there are workers suffering from occupational diseases of a physical and psychic nature, who are unable to continue their work and deserve attention from their institutions and governmental bodies, although recent studies report that only 40.6% are assisted when they become ill by the institution in which they work.

In the fifth article (ID5), denominated Organizational culture of a psychiatric hospital and Nursing workers' resilience, which aims to analyze the organizational culture of the institution and identify the resilience of Nursing workers, the **IBACO** scales for culture organizational and RS for the resilience scale, and these scales were applied to 56 workers.8 It can be noticed, as far as the organizational culture is concerned, that there is the centralization of power and the devaluation of workers, while they report that there is collaboration at work and practices aimed at improving the interpersonal relationship.8

In terms of resilience capacity, 50% of the workers presented a high degree, 42.9% of whom were in an average degree of resilience. Negative values between IBACO and RS domains were revealed by the study's correlation tests, indicating that the lower the valuation of individuals in the institution, the greater their resilience.8 It is clear from these indices that management model adopted by the institution can suffering and sickness of workers.8 According to the authors, due to the negative correlation values between the domains, workers are required to develop their resilience to face the adversities of the work environment and stress-generating situations.8

It is pointed out that studies reveal that organizations that opt to minimize occupational risk factors, by implementing strategies capable of boosting the resilience mechanisms, end up providing better working conditions, as well as greater well-being to workers, 32 directly impacting the reduction of absenteeism, turnover and productivity increase, providing benefits to the organization itself.32

It is worth noting that the sixth article (ID6), which deals with the resilience of the medical and surgical clinic nurses in their day-to-day care, aimed to map the resilience condition of the nurses in that organization and to discuss the nurses' resilience conditions.3 It is stated by the authors, in the Nursing context, that it is indispensable the discussion that proposes to study and analyze the resilience, as well as the daily care.3 For this purpose, the Quest_Resilience questionnaire was used, which determines the resilience condition of eight determinant belief models (DBMs) in the behavioral patterns, which the following: context analysis; confidence; self control; conquer and retain people; empathy; body reading; optimism with life and meaning of life. It was concluded, by the study, that optimism with life and sense of life presented weak resilience to stress, with behavior pattern for intolerance. It is assumed that Nursing professionals have a balanced intensity in their beliefs and need to develop and identify the causes of the adverse situation and to remain in a protective position.³

It is possible, as is no less important, as pointed out by the authors³, when identifying the level of resilience of the nurse, to act in a way to work and to strengthen this resilience with the aim of providing Nursing care with greater consistency and amplitude. It is also the focus on resilience of paramount importance and it must go beyond the nurse/patient relationship, seeking to involve care in families, groups, communities and institutions, in a cultural and holistic perspective.3

It should be emphasized that studies carried out with the theme of stress in the life of the

nursing student: (lack of) knowledge prevention³³ brings light to the issue of weak resilience in the face of stress.³ Personal stress is related to situations of imbalance and difficulties in working life, excessive work and lack of vocation, which has, as a consequence, physical mental manifestations. The conclusions,33 a tenuous relationship with other studies, ³ which lecture about the environment in which this professional is inserted, and the researched participants propose, as strategies of stress relief, rest, optimistic attitudes and selfcontrol, 33 without excluding optimism with life and the meaning of life, ³ in a paraphrased way, with the dimension vocation^{24-5,34-5} as a predictor of resilience.²³

CONCLUSION

This study allowed us to analyze the national production on resilience in Nursing, in a temporal cut of the last ten years, demonstrating the importance, as well as the scarcity, of studies on the subject, by gathering only six papers. It is emphasized that in order to understand resilience in Nursing, it is necessary to know the bases of the training of these professionals (1633) and later the works of Florence Nightingale (1854), reconciling with the contemporary organizational world.

It is also possible to observe, with this integrative review, the relevance of resilience to these professionals, surrounded by specifics and particularities, as well as the psychic dimensions of the individual, the environment and the situation. It is necessary, therefore, that more research be developed in order to disseminate information and expand knowledge in an area where the spirit of donation and the self-denial of these professionals.

It demonstrates, by way of conclusion, the results of the national production presented here, the contemporary character, revealing great opportunities of studies that contribute in the construction of new knowledge for the Nursing area. It is suggested, as future research, the search for an understanding of the impact of the vocation on resilience. The possibility of revealing something important for the present and future context is believed, as some researchers have pointed out.

It is hoped, therefore, that this work may contribute to new research focused on Nursing resilience in order to guide researchers interested in the topic of resilience in an area of people who take care of people, in a scenario permeated by contingencies.

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