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SPECIAL ARTICLE:

Building Resilience Breaking Barriers

Wajiha Ahmed

ABSTRACT

Mental-wellbeing is not the absence of adversity, it is the ability to go beyond what holds you back. Despite advancements in technology and pharmacology, the most important cure has always laid within us. Mankind's gift of perseverance, our resilience. Often, we forget what we're capable of, especially in the midst of calamity. Among others, one such vulnerable population is that of medical students. Increasing figures of depression, anxiety and burn out have been reported among medical students concurrent with seniority in clinical years. It is vital to ensure that we care for and empower the caregivers of tomorrow, therefore, equipping them with resilience today. Resilience begins as early as a child begins to walk, preparing one for stepping into bigger shoes as we grow.

KEYWORDS
Mental wellbeing, Mental health, Pakistan.

INTRODUCTION

The relentless passage of time goes on, never stopping long enough for grief or celebration. As medical students, how often have we found ourselves under pressure in an exam hall mere moments after a deeply transformative personal experience? Yet, we persevere and the act of our perseverance is owed to resilience which is the ability to "bounce back" from stressful times, according to the American Association of Psychology (APA)[1].

The goal is not to eradicate unpleasant experiences but to develop the strength required for showing up and doing our best in the face of difficulty. Resilience is not just a trait, it's a skill best mastered through practice and positive reinforcement. A number of studies among Pakistani medical students have reported statistically significant burn out, anxiety and depression concurrent with seniority in clinical years[2-4]. A myriad of factors may contribute to mental burden but the key modifiable factor in mental health outcomes is resilience[5] as it can be cultivated independently from socio-economic factors, pharmaceutical aids and circumstantial changes.

Medical students particularly need to exercise resilience as their unique care-giver role requires a higher standard of self-regulation and healthy coping skills. Medicine is an exceptionally demanding field and thus medical practitioners must be equipped and prepared on par for the inevitable. Above all else, we must believe that we were chosen for this role because we are capable of delivering under pressure.

RESILIENCE AND MENTAL HEALTH

Resilience has been marked as a sign of good prognosis among those affected by psychiatric concerns[5]. It has been evidenced that resilient people have been known to not only overcome but excel in their lives as they possess commendable adaptability and are able to adhere to positive mindsets and habits despite circumstantial challenges[6]. Quality of life is found to be proportional to resilience among psychiatric patients[5,6]. Mental-wellness is not merely based on functionality, it is the measure of living up to one’s full potential despite setbacks. Medication alone is not a sustainable aid to mental-illnesses, the importance of therapy and behavioral adaptations has gained more momentum recently. Individual factors which vary vastly such as childhood traumas, socio-economic variables and personality types are

not only risk factors and predeterminants of illness also have a profound impact on the outcome of any psychiatric treatment regime[7,8]. While most domains remain non-modifiable, behaviors and attitudes can be adequately adjusted in a compliant individual. Thus, emphasising the need for personal transformation to overcome complex psycho-social barriers.

STRATEGIES AND INTERVENTIONS

Due to resource scarcity and high disease burden in reference to psychiatric illnesses, it is in our best interests as a society to integrate self-management practices into our communities. Families and schools play a key role in teaching resilience to children, by empowering them to deal with stressful events from a young age[8], shaping self-sufficient adults who can withstand greater adversities which may come with time. In an ideal world, being underprivileged in any aspect should not dictate the parameters of one's personal goals and aspirations, your only limit should be your own potential. It is essential to develop this resistance among ourselves for us to be able to progress as a society and to reclaim power from social constructs which unfairly limit opportunities and potential in affected populations. Resilience can be practiced and cultivated in small steps daily, till it becomes an unshakeable habit. It can be nurtured through healthy coping skills such as journaling, finding strength in spirituality, reframing thoughts and fortifying social connections. Personal care habits such as regular exercise, maintaining physical hygiene, eating well and prioritizing sleep all contribute to higher resistance thresholds. Supported interventions include cognitive behavioral therapy, mindfulness based stress reduction, positive appraisal and positive psychology interventions.

CONCLUSION

Stress is a compulsory part of the human experience which mandates the development of strong coping skills among communities by fostering connections, outlooks and habits which promote resilience among individuals. Resilience is learned behavior and can be taught thus making its application virtually limitless across a myriad of psychiatric disorders. It provides a strong framework for self-regulation and improvement as an undeniably powerful tool for patient empowerment and uplifting communities.

REFERENCES

1. Imran A, Tariq S, Kapczinski F, de Azevedo Cardoso T. Psychological resilience and mood disorders: a systematic review and meta-analysis. *Trends Psychiatry Psychother.* 2024;46:e20220524. doi:10.47626/2237-6089-2022-0524

2. Baqai S, Thaver IH, Effendi FN. Burnout among Medical and Dental Students: Prevalence, Determinants, and Coping Mechanisms. J Coll Physicians Surg Pak. 2024 Dec;34(12):1508-1512. doi: 10.29271/jcpsp.2024.12.1508. PMID: 39648387.

3. Rehmani N, Khan QA, Fatima SS. Stress, Anxiety and Depression in students of a private medical school in Karachi, Pakistan. Pak J Med Sci. 2018 May-Jun;34(3):696-701. doi: 10.12669/pjms.343.14664. PMID: 30034442; PMCID: PMC6041547.

4. Zafar R, Raheel M, Mujtaba MA, Mahmood R, Nawaz MU, Kumar B. Prevalence of anxiety and depression in medical students of a public sector medical college in Islamabad and coping mechanisms adopted. J Pak Med Assoc. 2022 Mar;72(3):540-543. doi: 10.47391/JPMA.2107. PMID: 35320240.

5. Chuang SP, Wu JYW, Wang CS. Resilience and Quality of Life in People with Mental Illness: A Systematic Review and Meta-Analysis. *Neuropsychiatr Dis Treat.* 2023;19:507-514. doi:10.2147/NDT.S392332

6. Tanelian A, Fletcher M, McGlauchlin K, et al. Resilience or susceptibility to traumatic stress: the role of microbiota. *Biol Psychiatry.* 2022;92(5):364-376. doi:10.1016/j.biopsych.2022.02.003

7. Wu G, Feder A, Cohen H, et al. Understanding resilience. *Front Behav Neurosci.* 2013;7:10. doi:10.3389/fnbeh.2013.00010

8. Shastri PC. Resilience: Building immunity in psychiatry. Indian J Psychiatry. 2013 Jul;55(3):224-34. doi: 10.4103/0019-5545.117134. PMID: 24082242; PMCID: PMC3777343.