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# TABLE OF CONTENT

Editorial : Improving Resilience and Nurse Caring Behavior

**Yulis Setya Dewi**

19. A Qualitative Inquiry into The Adherence of Adults Type 2 Diabetes Mellitus with Dietary Programs 118 – 123

**Kusnanto Kusnanto, Elfa Lailatul Izza, Tri Johan Agus Yuswanto, Hidayat Arifin**

20. The Affirmation – Tapping on Pain Perception and Serotonin Serum Level of Post – Caesarian Section Patients 124 – 128

**Joko Suwito, Suhartono Taat Putra, Agus Sulistyono**

21. Analysis of Risk Factors Occurrence of Juvenile Delinquency Behavior 129 – 136

**Tri Anjaswarni, Sri Widati, Ah Yusuf**

22. The Effectiveness of Prone and Supine Nesting Positions on Changes of Oxygen Saturation and Weight in Premature Babies 137 – 143

**Ayu Prawesti, Etika Emaliyawati, Ristina Mirwanti, Aan Nuraeni**

23. Analysis of Sociodemographic and Information Factors on Family Behaviour in Early Detection ff High-Risk Pregnancy 144 – 150

**Ika Mardiyanti, Shrimarti Rukmini Devy, Ernawati Ernawati**

24. The Effect of Combination Therapy of A Warm Ginger Stew Compress and Ki. 3 Point Acupressure on The Pain Level of Gout Arthritis Patients In Indonesia 151 – 154

**Enji Meilia Era Pertiwi, Sidik Awaludin, Annas Sumeru**

25. Ethnic Foods Diet Program Improve Self-Efficacy and Diet Compliance Among Type 2 Diabetic Patients 155 – 160

**Eka Mishbahatul Mar'ah Has, Amira Aulia, Tiyas Kusumaningrum, Ferry Efendi**

26. Differences in Clinical Simulation with Audiovisual and Practicum-based Standard Operating Procedures in Nursing Student Competencies 161 – 164

**Hendri Palupi, Kusnanto Kusnanto, Slamet Riyadi Yuwono**

27. Developing Family Resilience Models: Indicators and Dimensions in the Families of Pulmonary TB Patients in Surabaya 165 – 171

**Dhian Satya Rachmawati, Nursalam Nursalam, Muhammad Amin, Rachmat Hargono**

28. Factors Influencing the Success of the National Nursing Competency Examination taken by the Nursing Diploma Students in Yogyakarta 172 – 180

**Yulia Wardani**

29. The Impact of Self Efficacy on the Foot Care Behavior of Type 2 Diabetes Mellitus Patients in Indonesia 181 – 186

**Nuh Huda, Tintin Sukartini, Nadya Wahyu Pratiwi**

30. Content Validity and the Reliability of Technological Competency as Caring in The Nursing Instrument_Indonesian Version (TCCNI_IV) 187 – 192

**Ignata Yuliati, Ni Luh Agustini Purnama, Sri Winarni**

31. Determinants of Drug Adherence on Grade Two and Three Patients with Hypertension 193 – 198

**Riza Fikriana, Shrimarti Rukmini Devy, Ahsan Ahsan, Al Afik**

32. Family Support System as an Effort to Optimize Coping Mechanism of Preschool Children During Hospitalization 199 – 204

**M. Hasinuddin, Ulva Noviana, Fitriah Fitriah**

33. Correlation Between Emotional Peer Support and Cyberbullying Behaviour in Senior High School Students 205 – 209

**Emi Wuri Wuryanningsih, Enggal Hadi Kurniyawan, Emila Cahya Aisyah**

34. The Relationship between Partner Support and Interdialytic Weight Gain (IDWG) Hemodialysis Patient 210 – 214

**Mundakir Mundakir, Nur Fadlilah, Retno Sumara, Asri Asri, Yuanita Wulandari**

35. Analysis of the Sociodemographic and Psychological Factors of the Family Caregivers' Self-Management Capabilities for Type 2 Diabetes Mellitus 215 – 223

**Rondhianto Rondhianto, Nursalam Nursalam, Kusnanto Kusnanto, Soenarnatalina Melaniani, Ahsan Ahsan**

36. Comparison between the QRMA Measurement with the Anamnesis and the Capillary Blood Glucose Test 224 – 230

**Muflih Muflih, Suwarsi Suwarsi, Fajarina Lathu Asmarani**

# EDITORIALS: IMPROVING RESILIENCE AND NURSE CARING BEHAVIOR

Nurses encounter many risk factors in their work life and have to provide professional care for and relieve the patients under unpleasant conditions in any case in the same time. A number of adverse events or antecedents can pose a significant threat to the wellbeing of nursing staff, such as workplace violence, fatigue, lack of resources, intimidation at work, and lack of capacity that can affect service to patients (Cusack et al., 2016). These situation leads to abroad arrays of occupational stress which is happened in daily life. When stressors exceed nurse's coping skills, their functional capacity becomes impaired. A study in a teaching hospital in Surabaya in July 2017 found that nurses showed symptoms of stress characterized by frequent sleep disturbances (40%), loss of concentration and thinking small things were too detailed (40%), irritable and tension when interacting with other health workers (70%) (Dewi, Hargono, & Rusdi, 2019). Several methods were implemented to improve coping of nurses but not their resilience (ICN, 2016). Arguably, resilience skills are needed by nurses to provide a better care to patients and their family. Resilience is a term that we are hearing a lot lately. There is no single definition of resilience approved by experts. However, a common theme in various definition of resilience is strength, ability to overcoming challenging obstacles and bounce back from adversities (Çam, 2017). In this editorial, we discuss ways of engaging the nurses to resilience skill in order to improve their caring behaviour.

Resilience is the result of the accumulation of various factors and characteristics possessed by individuals, namely personality traits, protective factors, and experiences collected through life in the process and / or developing as a result. These internal and external factors can predispose to "protect" or put individuals "at risk" that cause resilience or maladaptation (Garcia-Dia, DiNapoli, Garcia-Ona, Jakubowski, & O'Flaherty, 2013).

Subsequently, there are 2 concepts in the organization that can emerge simultaneously in building nurse resilience, namely support and development. Support is defined as an intervention in the workplace that directs and provides opportunities for nurses to withstand the pressures at work. Development is defined as an intervention in the workplace that empowers nurses to enhance their professional, practice and personal potential. Furthermore, in each organizational concept there are three domains i.e personal, practice and professional. The personal domain covers the welfare of individual nurses. The practice domain consists of skills, abilities, and special competencies from the profession. The professional domain is about the service ideal which includes lifelong learning and adherence to ethical behavior patients (Cusack et al., 2016; Hsieh, Hung, Wang, Ma, & Chang, 2016).

In addition, three conditions that affect caring namely matters relating to patients, nurses themselves and the organization (hospital) (Tonges & Ray, 2011). The organizational factors highlighted are leadership, compensation and reward and professional relations. This component will build a healthy work environment that supports the ability and commitment of nurses displaying caring behavior.

As widely known that patients in the hospital need a care where nurse have to provide comprehensively in terms of bio-psycho-social-spiritual care. Furthermore, caring is not only a set of attitudes that can be identified such as sympathy or support, nor does it consist of all activities undertaken by nurses (Warelow & Edward, 2007). Professional nursing care is determined by the way a nurse can use knowledge and skills to value client uniqueness and be physically and emotionally and require resilience within the nurse (Warelow & Edward, 2007). Resilient nurses are able to display professional nursing care, in this case is caring behavior. Nurse resilience is a nurse's ability to positively adapt to adversity, and can be applied to build personal strengths of nurses through several strategies namely building positive professional relationships, maintaining positivity, developing emotional insight, achieving life balance and spirituality, and becoming more

reflective (Jackson, Firtko, & Edenborough, 2007). It can be concluded that resilient nurse will be able to help patients in any situation with nurse's professional manner.

Several studies have been carried out to develop nurse resilience potential, namely through Stress Control Workshops and Resilience Development Interventions (Pipe et al., 2012), A Work-Based Educational Intervention (Mcdonald, Jackson, Wilkes, & Vickers, 2012), Mindfulness-Based Stress Reduction Intervention (MBSRI ) (Foureur, Besley, Burton, Yu, & Crisp, 2013) , Multimodal Resilience Training Program (Mealer, Conrad, Evans, Jooste, Solyntjes, Rothbaum, et al., 2014), Mindful Self-Care and Resilience Intervention (MSCR) (Craigie et al., 2016), and Stress Management and Resiliency Training (SMART) (Chesak et al., 2015), A Pilot Integrative Coping and Resiliency Program (Tarantino, Earley, Audia, D'Adamo, & Berman, 2013), Aware Compassionate Communication: An Experiential Provider Training Series (ACCEPTS) (Gerhart et al., 2016). The latest model was developed by author using a Model of Resilience for Caring Enhancement (MORE CARE) and focused for ICU Nurses (Dewi, Nursalam, & Hargono, 2019). However the result is still inconsistent and influenced by various factors.

In general, strategies for building or developing resilience include a) building good relationships in teams; b) provide education and training to develop behaviors that help control or limit the intensity of stress, or help recovery; and c) help in processing emotions and learning from experience. Although individuals must be responsible for developing personal strategies to help coping and resilience, organizational support is an integral part of equipping individuals to face work related challenges (Adams, 2015). Resilient nurses have greater potential to be able to provide professional (caring) nursing services. In accordance with the resilience process (Lietz, Julien-Chinn, Geiger, & Hayes Piel, 2016) individuals reach the stage of resilience fully when able to provide assistance to others (helping others).

From the various explanations above, it can be highlighted that nurse resilience influences caring behavior in general. The concept of resilience is very important in the field of care because resilience plays an important role in nursing longevity and retention. Nursing leaders should be knowing how resilience can be applied to nurses and how to improve and maintain this concept in other fields (Turner, 2014). Therefore, it is very important to build and strengthen resilience of nurses in a stressful work environment in daily basis.

This editorial has touched briefly on the method of resilience capacity improvement and how this may mitigate the impact of work place stress on nurses by involving nurse as individual and organisation as where nurse have support.

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