



For the remainder of 2015, this column will focus on topics and interventions that concern oncology nurses as they strive to provide quality care for patients and families and support their own well-being. The following article presents the concept of mindful leadership and its relationship to supporting personal resilience while leading with excellence at the point of service.

## The Role of Resilience and Mindful Leadership in Oncology Nursing

Cindy J. Rishel, PhD, RN, OCN®

When oncology nurses think of the word *resilient*, they often describe the term in the context of the patients and families they care for each day. When patients face a diagnosis of cancer, their lives have suddenly been altered in a frightening manner. Everything changes, and they must find a way to navigate the troubled waters ahead.

The actions and behaviors of patients and family members may be described as a process—a process that demonstrates resiliency (the ability to change disaster into a personal growth experience) in light of the battle being waged (Polk, 1997). From such a perspective, this process comes as the result of a synergistic experience of the human spirit, body, and mind (Rishel, 2010). Energy for the process comes from within the human spirit but is affected by external factors of individual strength (i.e., social, spiritual, or ecological sources) (Rishel, 2010). As a result, many patients and families develop a personal form of resiliency that comes from within the human spirit (or their collective unconscious) and from external sources of strength (Richardson, 2002).

Polk (1997) described nursing as a profession that is concerned with individuals who are engaged in this process of overcoming or moving through adversity. Nurses are also concerned with the contributions they make to support the individuals going through that process. This concern with supporting patients and family members through the process of cancer diagnosis and treatment is paramount in everything nurses do. However, seldom do nurses think about resilience as a key factor of their own process. The purpose of this article is to explore the relationship

between nurse resilience and leadership, with an emphasis on incorporating mindfulness as a technique to enhance a resilient leadership style.

### Resilience and Leadership

Oncology nurses are facilitators who help to form the patient's treatment plan and hold it together through the many twists and turns that may be the cancer treatment experience. Oncology nurses laugh, cry, pray, and celebrate with their patients and families. Nurses support the physical and emotional journeys of each patient and his or her family, all the while ensuring that care delivery is of the highest quality. In this sense, all oncology nurses are leaders at the point of service to patients, not just the nurses in specifically identified administrative roles.

Polk (1997) argued that nurses are concerned with the contributions they make to the patient's process of developing resiliency, but nurses must also develop their own process of resiliency to allow them to be effective as contributors and enable them to sustain leadership at the point of service. Resilience has been characterized as an aggregate of resources and as a continuum (Polk, 1997). In either case, oncology nurses' ability to develop resilience is critical if they are to be effective leaders in care delivery. The very resources nurses need to establish resilience (i.e., social intimacy, ego strength, and resourcefulness), although similar to the resources patients and families use to establish their own process of resilience, may also create problems as the oncology nurse seeks to establish his or her leadership role.

Despite their best efforts, some nurses seem to lack a true awareness of them-

selves and the impact of their actions on patients and families. These nurses may also not possess a deeper understanding of their personal motivation and may, in fact, lose sight of their own values when faced with the pressure to produce improved patient outcomes—a characteristic of health care today (George, 2014). The ability to establish a personal process of resilience in the face of highly challenging circumstances is important for oncology nurses if they are to be successful leaders in patient care. However, effective leadership is not an intuitive process; it is one that can, and must, be nurtured and developed in nurses who are also resilient. By using the resources needed to establish resilience, oncology nurses may become what George (2014) termed *authentic leaders*. Authentic nurse leaders are those who understand that the purpose of their leadership is to serve their patients and families, as well as their colleagues (George, 2014). For oncology nurses to be authentic leaders, each must consistently incorporate his or her personal values into practice, build relationships that are trustworthy, exhibit personal discipline, and find balance between personal intrinsic and extrinsic motivations (George, 2014).

### Mindful Leadership

Leadership development in many organizations typically consists of training, development programs, and, perhaps, limited mentoring with a more experienced leader. Finding organizations

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