

The Multisystem Approach to Resilience in the Context of Organizations

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Introduction

In the context of organizations, employee resilience is related as much to intrapersonal capacities and resources as it is the organizational system and the interaction between the two. Organizations are complex collections of different systems, performing different functions at different levels. Thus, it is unsurprising that multiple systems need to be considered to capture the complexity of employee resilience. With the rising popularity of resilience training within organizations, the role of organizational factors that contribute to employee resilience has been a somewhat neglected area of scholarship. This chapter will outline a multisystemic approach to resilience in the occupational context. First, I will define resilience and explore theoretically why investigations of employee resilience need to consider multisystemic approaches to the subject. Second, I will describe organizational resource models of employee well-being and resilience that highlight the organizational and team-level factors that contribute to the likelihood that employees will experience a resilient outcome. Finally, the multisystem approach to employee resilience will be applied to a real-world case example.

Defining Resilience

As the chapters in this volume show, there is no shortage of definitions of resilience. However, most authors have settled on a definition that distinguishes between resilience as an *outcome* observed in the context of risk and the *capacity* for resilience, which is the cluster of ingredients that increase the likelihood that resilience will be observed. An accepted definition of

resilience as an outcome is provided by Kalisch et al. (2017), who defined resilience as: “the maintenance or quick recovery of mental health during and after exposure to significant stressors” (p. 786). In the occupational context, the experience of significant stressors often reflects chronically high workload, organizational change, job insecurity, or potentially traumatic events in the case of military personnel and first responders (for review, see Kleim & Westphal, 2011). Resilience as an outcome is most often operationalized by the absence of depression, anxiety, or posttraumatic stress disorder despite significant risk exposure (Bonanno, Westphal, & Mancini, 2011) and cannot be measured in the absence of risk (Kalisch et al., 2017).

The capacity for resilience reflects the cluster of resilience-supporting qualities, resources, and skills that are available and used by an individual to address stressors that emerge. The investigation of these resilient capacities reflects the first wave of resilience enquiry. Over many years, such investigations have yielded a list of factors and processes that enable a resilient outcome in the face of risk (Lent, 2004; Richardson, 2002). Potential resilience capacities are many and varied and include: environmental supports (e.g., Pietrzak, Johnson, Goldstein, Malley, & Southwick, 2009), the regulation of positive affectivity (Tugade & Fredrickson, 2007; Tugade & Fredrickson, 2004), cognitive appraisal approaches (e.g., Major, Richards, Cooper, Cozzarelli, & Zubek, 1998), and flexible coping and emotion regulatory strategies (e.g., Bonanno & Burton, 2013; Cheng, Hui, & Lam, 2000; Galatzer-Levy, Burton, & Bonanno, 2012) to name a few. Important to this chapter is the role that organizational and work team systems play in extending or constraining individual capacities and resources.

Research in the field of organizational psychology has been demonstrating the importance of fit between the demands imposed on individuals and the resilience capacities or available resources. For example, a recent longitudinal study explored patterns of military personnel coping in the context of a low-control and low-autonomy workplace (Britt, Crane, Hodson, & Adler, 2016). In this low-control and low-autonomy context, the most consistently effective form of coping was acceptance, rather than other strategies typically reported to be adaptive such as problem-solving and social support seeking. Other work suggests that the resources available need to be relevant to reducing the demands imposed by particular stressors. This is referred to as the matching hypothesis (de Jonge & Dormann, 2006). The principle of the matching hypothesis is that demands in different domains (e.g., cognitive, emotional, or physical) are most effectively addressed by resources in similar domains. For example, cognitive demands, related to load on cognitive processes, are most effectively addressed by cognitive resources such as task clarity (de Jonge & Dormann, 2006). De Jonge and Dormann (2006) found that the presence of physical resources (i.e., instrumental supports) reduced the relationship between physical demands (i.e., strain on the musculoskeletal system) and physical strain. Moreover, emotional demands (i.e., emotional labor required to achieve organizational goals) were addressed by emotional resources (i.e., supervisory support) reducing emotional strain. However, other studies have found limited support for the matching hypothesis (van den Tooren, de Jonge, Vlerick, Daniels, & van de Ven, 2011).

The mixed findings in support of the matching hypothesis may reflect the nuanced capacity of certain resources to alleviate demands that are difficult to capture with broad measures of resources or demands (e.g., cognitive, emotional, physical demands). For example, a

cognitive stressor may be mentally exacting work imposing demands on concentration, but the cognitive resources measure used includes aspects that may not alleviate strains particular to concentration. In this way, the broad categories do not capture the nuanced fit between specific cognitive demands and specific cognitive resources. Further, it may also be the case that some capacities are global in their beneficial effects (e.g., coping efficacy, perceived support), whereas the utility of other resources is more related to their ability to reduce the load imposed by one specific demand. For example, perceived coping self-efficacy (the perceived belief that one can manage situational demands) is likely to be applicable to a context where stressors are dynamic or constantly changing (Sandler, Tein, Mehta, Wolchik, & Ayers, 2000). In contrast, workplace specific know-how may be effective for addressing highly demanding time-sensitive workplace stressors, but less applicable to managing family conflict. Thus, certain resilience capacities may be more versatile and broadly adaptive than others.

Within a systems conceptualization of resilience, the focus is on the dynamic interplay between intra-individual characteristics, social psychological elements (e.g., group cohesion, norms), and the ecological context (e.g., organizational culture). For employee resilience, the social and ecological context in which employees find themselves is very much a core part of determining the available capacities for resilience and therefore the likelihood of resilient outcomes. Given that the outcome of resilience depends on the interaction between the capacities and resources that individual has and the demands of the situation, a person who demonstrates resilience in one setting may not necessarily demonstrate resilience in another. The situational demands and resilient capacities and coping resources available in the system at any one-time point are dynamic. For example, when employees move abroad for employment it is likely certain demands will change, as will their access to certain resources (e.g., support networks). In this way, the likelihood of resilience is not a trait or stable characteristic of a person, but modifiable over time via the accumulation or constraint of certain capacities or resources. Thus, the system in which individuals find themselves has important implications for the resilient capacities and coping resources present at any one point in time.

Many studies have focused on attributes that characterize resilient individuals and equip them to handle organizational change and other negative events (Shin, Taylor, & Seo, 2012; Tugade & Fredrickson, 2004). Such research has had two implications for organizations. The first is an interest in hiring practices that seek to screen individuals for their resilience. The second is that organizations are being encouraged to develop the capacity of employees to show resilience on the job. Arguably, the first implication is problematic for the previously discussed conceptual reasons. To summarize, the capacity for resilience can change, so past resilience may not necessarily predict future resilience, particularly in the context of new demands where the previously used strategies may not apply to the new demand. The second implication with respect to the organization's role in the resilience of employees is more in line with conventional wisdom and acknowledges the potential organizational and team role for increasing the likelihood of a resilient outcome when exposed to risk. In response to this second implication, there has been emerging interest in resilience training that has been implemented in the hope of developing individual level coping capacities (for review, see Robertson, Cooper, Sarkar, & Curran, 2015). However, *usage of coping strategies* is only one of three broad clusters of modifiable capacities for resilience identified

in the literature (Crane, Searle, Kangas, & Nwiran, 2019). Others also include the availability of *coping resources* that may be derived from the environment, and *resilience beliefs* (e.g., self-efficacy), which are also affected by environmental features.

Understanding Employee Resilience: The Role of Job Design

Historically, models considering the role of job design primarily focus on explaining the manifestation of employee burnout and promoting job engagement. Yet, a similar analysis may be applied to understanding the emergence of a resilient outcome. The organizational and intrapersonal inputs into workplace systems for preventing burnout contribute to the clusters of resilience-supporting capacities. Moreover, there is the potential for a dynamic interplay between these organizational and intrapersonal inputs, whereby the organizational factors seem to influence capacities considered to be intrapersonal (e.g., motivational orientation, resilient beliefs), and vice versa.

One dominant approach to understanding employee burnout is the job demands-resources (JD-R) model whereby employee well-being and mental ill health can be explained by the existence of two factors: job demands and job resources (Demerouti, Bakker, Nachreiner, & Schaufeli, 2001). Job demands are work-related tasks that require effort, and vary by task complexity, emotional labor demands, and physical strain. Job resources are work-related assets that can be accessed to meet job demands. Job demands and resources are organizational inputs that effect resilience. Job demands tax the employee's resources creating exhaustion, whereas low resources affect motivational processes that are related to the withdrawal of effort and emotional disengagement (Demerouti et al., 2001). The combination of prolonged high demands and low resources eventually lead to burnout. Burnout is characterized by a sense of exhaustion, a lack of efficacy, and a psychological detachment from work. Examples of job resources are decision-making autonomy, emotional support from leaders, and technical equipment, all resources that could also be understood as resilience promoting resources for the workplace. The original conceptualization of the JD-R model, however, focused primarily on the role of job design, rather than individual-level characteristics to explain why employees experience burnout. Specifically, it has been proposed that high job demands will have a negative effect on employee well-being unless workers have sufficient job resources to deal with their demanding jobs. According to the JD-R model, burnout is likely in any profession where the job resources are outweighed by the job demands.

Although organizational-level inputs are important, there are also individual-level inputs into the system that have been identified to support resilience at work. In recent years, these models have been extended to include the role of individual resources (e.g., self-efficacy, optimism). Personal resources are thought to moderate the relationship between job demands and negative outcomes. For example, Van Yperen and Snijders (2000) explored the role of personal resources in buffering the effects of job demands in bank employees in the Netherlands. These authors found that general self-efficacy moderates the relationship between job demands and psychological health symptoms. Similarly, in Finnish employees

(25–59 years) under demanding work conditions, optimistic employees were found to experience lower psychological distress compared to their less optimistic counterparts (Mäkikangas & Kinnunen, 2003). Such research suggests that employees with high-levels of intrapersonal resilient capacities are able to deal more effectively with job demands. In this way, there are a set of individual level inputs into the system that also have a role in buffering the effects of workplace related risk.

The Dynamic Interplay Between Organizational and Individual-Level Resources

The previous examples present a picture of an almost passive comparison between demands and resources with resilience emerging when resources outweigh demands. However, the picture is not that simple. Recent research suggests that job resources may even contribute to capacities traditionally considered intrapersonal (Xanthopoulou, Bakker, Demerouti, & Schaufeli, 2007). Such findings have shown that job resources actually trigger personal resources that enable the enhanced likelihood of resilience to job demands. Job resources are likely to affect the motivational system of the individual, as outlined in the JD-R model, by promoting resilience beliefs such as agency and optimism regarding future positive outcomes. Thus, individual-level capacities for resilience are potentially susceptible to changes in the workplace environment. The story, however, does not end there. There is also evidence to support the suggestion that employees who are higher in certain resilient capacities are also more likely to make use of resources to facilitate goal attainment. For example, employees with good interpersonal skills may be better equipped to ask for what they need and get it. A person–environment system such as this also receives feedback in the form of goal attainment, recognition from others, positive affect that reinforces resilient beliefs and has opportunities to use certain resilient capacities—motivating more of the positive behavior. Negative feedback may also be received that can increase maladaptive beliefs (self-limiting beliefs) or contribute to reductions in problem-solving.

Job Demands Are Not All Created Equal

A further complexity is that job demands are not always viewed as detrimental and do not all yield the same negative outcomes. The challenge-hindrance stressor framework (Cavanaugh, Boswell, Roehling, & Boudreau, 2000) is one model that may present a useful way of delineating stressors that contribute to the capacity for resilience versus those that erode it. Hindrance stressors (e.g., bureaucracy, role conflict), are classed as barriers to goal accomplishment and are therefore considered obstacles to personal growth. In contrast, challenge stressors are job demands that create an opportunity for personal growth and development. Research exploring challenge and hindrance stressors demonstrate that both increase the experience of psychological stress (Boswell, Olson-Buchanan, & LePine, 2004), although challenge stressors may also have positive outcomes. This idea extends Selye's (1956) distinction between positive and negative forms of stress, referred to as *eustress* and *distress*, respectively. Eustress and distress both engage the stress system; however, eustress involves a sense of positive challenge contributing to extending oneself and growth, whereas distress promotes negative affectivity and dysfunction. In the organizational domains, challenge stressors (e.g.,

time pressure, high workload) are considered to also deplete energy leading to exhaustion and stress, but at the same time increase personal capabilities (Van den Broeck, De Cuyper, De Witte, & Vansteenkiste, 2010). For example, a two-wave longitudinal study of working Australians across a variety of sectors demonstrated that a greater frequency of challenge stressors at Time 1 was related to a greater perceived resilience at Time 2. In contrast, Time 1 hindrance stressors were positively predictive of strain at Time 2 and negatively related to Time 2 perceived resilience (Crane & Searle, 2016). Thus, there is some evidence that job demands are not all the same and while both result in initial increases in stress, some workplace stressors lead to positive outcomes.

The Role of Individual Appraisals

Although the challenge-hindrance stressor framework suggests that job demands may be subject to a priori classification, other research has demonstrated variability in the way individuals perceive (appraise) these demands and the link between these appraisals and job performance. Searle and Auton (2014) suggest that categorizing job demands into challenge and hindrance stressors makes assumptions about how these stressors are interpreted. These authors apply the transactional model of stress and coping (Lazarus & Folkman, 1984) to describe how appraisal of the same job demand may vary from person to person. Searle and Auton (2014) demonstrated that even after controlling for the effects of challenge and hindrance stressors, challenge appraisals were positively related to positive affect, while hindrance appraisal was positively related to negative affect. Moreover, there was some evidence that appraisals mediated the relationship between job demands and outcomes, such that both challenge and hindrance stressors demonstrated an indirect relationship to positive affect, anger and task appraisal via challenge appraisal. Challenge stressors were related to greater challenge appraisal and thereby more positive outcomes, while hindrance stressors were related to lower challenge appraisal that in turn predicted greater negative outcomes. This research demonstrates that appraisals are important to the experience of affective outcomes that may, if experienced chronically, have implications for resilience on the job. However, the mediations demonstrate that work related demands also play a role in influencing the appraisal process.

The nature of job demands, therefore, seem important to appraisal and in turn well-being. However, job related resources may also have similar effects. Previous work exploring the JD-R model has proposed the motivational nature of access to job resources (Demerouti, et al., 2001), but there is an under considered role for job resources in the appraisal process. Job resources such as supportive colleagues and appropriate feedback from one's superiors increases the likelihood of being successful in achieving one's work goals. Thus, the perception of accomplishment is also likely to enhance perceived challenge appraisals as opposed to threat of failure or loss. Furthermore, previous work has demonstrated that personal resources, like optimism, could compensate for low work resources (Riolfi & Savicki, 2003). However, this idea must be considered in practical terms. For example, an employee may be *generally* optimistic that goals will be accomplished, but if he or she is chronically underresourced to achieve those goals (e.g., lacks equipment), it is likely that such optimism will be eroded. Considering the necessity to have resilient capacities that fit the demands

placed on individuals and systems, available resources to achieve a task are going to be an essential aspect of an employee's resilient toolkit when coping with workplace stressors. It is even possible that job resources may also compensate for lower individual-level resources, but this is a relationship that has yet to be explored.

From the previous analysis of job design models, it is clear that there is a complex interaction between individual-level factors and the work environment. Studies exploring job design models consistently demonstrate that employees have the greatest likelihood of resilience when there are challenging work demands and they are well-resourced to meet those demands (Bakker & Bal, 2010; Demerouti & Cropanzano, 2010). Collectively, this research suggests that the resources organizations provide is essential to their employees' resilience. For example, leadership approaches can influence employees' job demands and resources (Nielsen, Randall, Yarker, & Brenner, 2008), and may indirectly influence employee engagement via promoting employee optimism (Tims, Bakker & Xanthopoulou, 2011). Job resources need to be sufficient, however, and include feedback, social support, and skill variety. Perhaps most interesting is the way organizational resources may affect individual-level resilience capacities, such that better equipping employees in their roles has the potential to increase their private resilience capacities.

Frameworks of Organizational Resources and Demands

In practice, it can be challenging to identify the resources that organizations need to provide to support employee resilience. In response to this practical challenge, specific models of organizational job-related resources have been developed. For example, the health services workplace environmental resilience (HSWER) model describes the environmental factors in the workplace that promote nurses' resilience (Cusack et al., 2016). Building nurses' resilience to complex and stressful practice environments has the potential to draw new people into the nursing profession and retain experienced professionals with well-developed skills, thereby ensuring safer patient care. Cusack et al. (2016) identified a number of protective environmental workplace characteristics emerging as important for nurses, such as mentoring, clinical supervision, education and training, staffing levels, personal safety, and self-care. From these themes, two overarching concepts emerge relating to support and development. Support was characterized as interventions and resources that allow nurses to endure the demands of their role. Development refers to interventions that empower nurses to enhance their potential (Cusack et al., 2016). In addition, support and development can be applied in three domains: (a) personal (related to individual well-being), (b) professional (relating to the values and expectations of the profession), and (c) practice (relating to work related skills and knowledge). In this way, six areas of need emerge as presented in Table 23.1. Resources can be provided in each of these domains to support resilience. Although the HSWER model provides a framework for supporting nursing staff specifically, these workplace attributes are relevant to other organizational sectors as well. Therefore, Table 23.1 adapts the themes emerging in Cusack's work for a number of different organizations.

TABLE 23.1 Modified Health Services Workplace Environmental Resilience Model

Domain	Support	Development
Personal	<p>Interactions between colleagues that promote psychological safety</p> <p>Adherence to policies that support staff well-being and the immediate actioning of resolutions to issues</p> <p>A culture of support for adequate breaks and respect for appropriate recovery practices</p> <p>Leadership or supervisory support for self-care practices</p> <p>Access to assistance when required for mental health concerns</p>	<p>Resources that allow the development of skills to reduce stress or cope effectively</p> <p>Activities that promote the capacity to support colleagues in the workplace</p> <p>Development of personal self-awareness regarding mental health concerns</p>
Practice	<p>Clearly articulated expectations of the role that are suitable for skill level or experience</p> <p>Access to necessary supervision or training to facilitate skills development</p> <p>Access to related policies and guidelines that relate to one's work</p> <p>Provision of resources that enable work to be undertaken successfully</p> <p>Collaboration between colleagues allowing the transition of knowledge and skill</p>	<p>Structures that support the development of role-specific knowledge related to tasks</p> <p>Opportunities for the safe reflection on mistakes that enable learning</p>
Professional	<p>Clear processes that facilitate communication between management and employees</p> <p>Supportive and responsive supervision</p> <p>Access to decision-making support</p> <p>Positive interactions among colleagues that is supportive of new ideas and innovation</p>	<p>Mentoring programs that promote career development</p> <p>Performance reviews that allow a scaffolded and stepped approach to skill development</p> <p>Leadership support for professional development activities</p>

Adapted from Cusack et al. (2016).

A second framework intended for broad application is the ASSET framework for identifying and understanding the sources of pressure and support in the workplace (Cartwright & Cooper, 2002; Cooper, Flint-Taylor, & Pearn, 2013; Johnson, 2009). This framework identifies six key factors pertaining to sources of workplace pressure and support: (a) resources and communication, (b) control, (c) work-life balance and workload, (d) job security and change, (e) work relationships, and (f) job conditions. The ASSET framework proposes predictable relationships between potential sources of pressure at work and individual health and job outcomes (e.g., job satisfaction). These factors not only contribute to negative sources of stress and demand, but may also be resources that support positive workplace outcomes.

The Resilient Work Systems Framework (Figure 23.1) is based on my work in occupational resilience, the existing frameworks thus far described (e.g., JD-R model, HSWER model, and the ASSET framework) and the existent scholarship on workplace stress. The Resilient Work Systems Framework articulates eight work-related dimensions that may

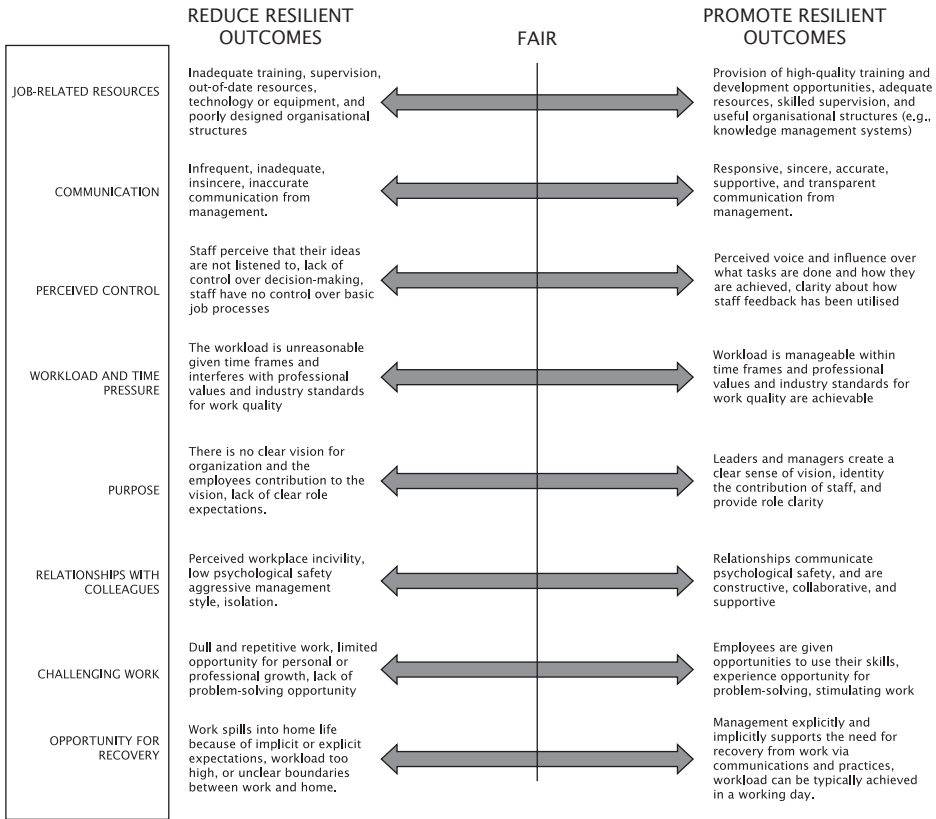


FIGURE 23.1 The Resilient Work Systems Framework for assessing organizational contributors to the reduction or promotion of employee resilient outcomes.

either reduce or increase the likelihood of employee resilience. Each of the eight dimensions includes anchors at either pole that describe the characteristics of that dimension. For each dimension, an organization may be classed as either low (contributing to a reduction in the likelihood of a resilient outcome) or high (promoting the likelihood of a resilient outcome). Ideally, practices and policies that promote resilient outcomes at both the organizational level and the immediate team level occur consistently.

Multilevel Model of Team Resilience

The resilience literature concerned with work team functioning is a recent, albeit rapidly developing area. A recent model of team resilience highlights the connections between both individual and team level factors that contribute to the emergence of team resilience (Gucciardi et al., 2018). This model proposes that team resilience emerges from combinations of human capital resources that are relevant to the objective of the team. Individual-level knowledge, abilities, skills, and other capacities (i.e., human capital resources) remain relevant to team outcomes in terms of resilience in so far as they are related to a specific on-the-job task or

demand. Moreover, because team resilience refers to multiple inputs from at least three team members, human capital resources should be complementary to the team objectives and responsive to the context in which the demands on the team occur.

According to this model of team resilience, human capital resources may be triggered by adversity, which is a perceived or real external threat to team functioning. Team functioning may be task-based or teamwork-based. To manage the demand, team members must be able to access human capital resources and deploy them effectively. Team resilience emerges in the face of adversity when individuals align and coordinate their human capital resources via behavioral, cognitive, and affective mechanisms. The effective coordination of these human capital resources occurs through team social dynamics, such as norms, that allow response coordination.

Team norms are considered to be a key mechanism through which human capital resources are translated into coordinated responses. From a social identity perspective, norms reflect cognitive representations of shared patterns of thoughts, feelings, and behaviors that characterize regularities among a group and differentiate the group from others (Haslam, Turner, Oakes, McGarty, & Reynolds, 1997). Norms enable team members to answer questions about how they respond in any given situation. For example, if a team member experiences a project setback, norms dictate what the appropriate response is from other team members, such as emotional or instrumental support. However, for norms to influence behavior, the individual team members must perceive themselves to be a group. This is referred to as group (team) identification. Identification suggests the internalization of one's membership in a team or group as a meaningful part of who one is (Tajfel & Turner, 1979; Turner, Oakes, Haslam, & McGarty, 1994). According to Gucciardi et al. (2018), the combination of team norms that encourage the effective coordination of human capital resources and team identification enable the emergence of processes that increase the likelihood of a resilient outcome. Other critical ingredients for team resilience are planning, processes for pre-empting challenges (Alliger, Cerasoli, Tannenbaum, & Vessey, 2015), and team-based reflective practices (also known as after action or activity reviews) that allow learning to take place. Planning relates to the identification of desired behaviors or outcomes in advance (e.g., goals, implementation strategies). Pre-empting challenges is part of the planning process and enables the identification of barriers to the achievement of goals and contingency plans. Reflection plays a critical role in team resilience by enabling learning from failures and success by unpacking the reasons for outcomes, exploring alternative ways outcomes could have been achieved, identifying processes requiring change, or actions that should be sustained (Ellis, Carette, Anseel, & Lievens, 2014). The reflective practice has the capacity to enable the ongoing development of team processes, but also potentially encourages employees to think about setbacks, failures, and demands as an opportunity for growth, rather than threat, promoting individual-level resilient outcomes (Crane et al., 2019). The multilevel model of team resilience suggests a complex interaction between both individual-level inputs into the system and social dynamics that allows these inputs to be synthesized and purposefully

directed to team-related tasks. A key leverage point in this dynamic process is the role of leadership, which has been a critical area of interest in the occupational resilience scholarship.

The Critical Role of Leadership in Employee Resilience

Leaders and leadership behavior, as a key determinant of team and employee resilience, is well documented (see Alliger et al., 2015; Gomes, Borges, Huber, & Carvalho, 2014). Leadership is commonly defined as a person who is able to influence the behavior of followers to the achievement of desired goals (Dartey-Baah, 2015). However, just as leaders may influence goal achievement, they also have an influence over the well-being and resilience of employees in their charge. This influence may transpire in several ways. Apart from the direct interpersonal relationship that leaders have with their employees, leaders also influence other systems that are related to the quality of the employee's experience at work with important implications for resilience. Given that leaders are often responsible for resource allocation, in the context of job design and team models of resilience, leadership has an important role in cultivating the resources, as identified in Figure 23.1, and buffering employees from resilience depleting demands. Leaders are also critical for establishing norms that contribute to team functioning and supportive colleague interactions (e.g., psychological safety; Gucciardi et al., 2018).

Several lines of research speak to the potential role of leadership behavior in fostering positive and supportive interactions among teams. For example, a number of international studies have found that supportive leadership promotes better morale among soldiers (Britt, Dickinson, Moore, Castro, & Adler, 2007) and junior officers (Langkamer & Ervin, 2008). Moreover, lower conflict and less role ambiguity (both related to lower job demands) emerge in teams with supportive leadership (Britt, Davison, Bliese, & Castro, 2004). Transformational and servant leadership approaches are credited with the capacity to create co-operative employee relationships given that these approaches model behaviors that demonstrate concern for employees and consideration to their ideas promoting norms of concern for others and mutual respect (Kirkbride, 2006). Transformational leadership occurs when leaders broaden and elevate the goals and interests of their employees, generate acknowledgement and acceptance of group-based goals, and encourage group members to look beyond self-interest to the advancement of group purpose (Bass, 1985). Transformational leadership is commonly thought to comprise four dimensions: (a) idealized influence (leaders behave as role models and gain their followers' trust and respect), (b) inspirational motivation (leaders hold high expectations and communicate a compelling vision of the future), (c) intellectual stimulation (leaders encourage their followers to consider different perspectives and empower them to contribute novel ideas), and (d) individualized consideration (leaders display genuine care and concern for their followers by recognizing their individual needs; Bass & Riggio, 2006).

Servant leadership styles that emphasize service to others, team consensus, and the personal development of individuals have been shown to be related to cooperative conflict management (Wong, Liu, Wang, & Tjosvold, 2018).

Another way leaders can promote resilience in the workplace is via their capacity to inject purpose and meaning in work. For example, empowering leadership involves delegating to subordinate staff, providing opportunities for decision-making autonomy, encouraging employees to participate in mentoring, and fostering responsibility and confidence (Kim & Beehr, 2018). Recent research demonstrates how empowering leadership may have downstream effects on meaningful work and psychological well-being outcomes. In a group of 347 fulltime employees, empowering leadership was shown to have an effect on the promotion of meaningful work. Moreover, perceptions of meaningful work resulted in lower levels of emotional exhaustion and higher levels of life satisfaction (Kim & Beehr, 2018). The take-home message is that leadership approaches have implications for the demands experienced and resource availability that employees have access to and this has a considerable influence on employee resilience.

Beyond the effects of leadership approaches on demands and resources available to employees, there is some evidence that particular leadership styles contribute to employee resilience via their contribution to the trust developed between an employee and leader. Kelloway, Turner, Barling, and Loughlin (2012) demonstrated that transformational leadership was negatively related to employee psychological distress, but employee trust in leadership fully mediated the relationship between transformational leadership and employee psychological ill-health. This indicates that it is employee trust in the leader, developed by transformational leadership that is a key mechanism that supports employee well-being.

Although there is often an emphasis on leadership styles in the corporate sector (e.g., laissez-faire leadership, authentic leadership), discrete leader behaviors also have a measurable effect on positive employee outcomes. Support for the idea that leader behaviors are critical comes from work demonstrating that transformational leadership behaviors fluctuate daily, contrary to the idea that transformational leadership is a stable style (Breevaart & Bakker, 2018). It has been shown that on the days that transformational leadership is high, daily challenge demands have a positive relationship to work engagement. However, when transformational leadership is low, daily hindrances have a greater negative association with employee engagement (Breevaart & Bakker, 2018).

To date, considerable research has demonstrated the relationship between supervisor behavior and employee well-being. Foundational work by Gavin and Kelley (1978) demonstrated a positive association between the self-reported well-being of underground miners and their perceptions of how considerate their supervisors were. Similarly, studies in the 1980s demonstrated that nurses whose supervisor rated low in consideration and high in structure (i.e., tasks and processes highly structured) were most likely to report symptoms of burnout (Duxbury, Armstrong, Drew, & Henly, 1984). Martin and Schinke (1998) found that for psychiatric workers and family and child mental health workers, harsh criticism delivered by supervisors was positively associated with greater burnout. Conversely, organizational leaders with high state hope (i.e., a sense of personal agency and knowledge

of pathways to goal achievement) had significantly better work unit performance, subordinate retention, and employee satisfaction outcomes than low hope leaders (Peterson & Luthans, 2003). Potentially, leaders high in state hope may be more likely to communicate clear workplace goals, intentions to achieve those goals, and pathways to goal attainment to employees. Importantly, despite the objective challenges of mental health work and the emotional demands on the workforce, leaders were able to have a significant effect on the resilience of the employees. Gilbreath and Benson (2004) add support to previous studies showing, across a range of occupational types, associations between supervisor behavior, and employee well-being. This work also demonstrated that leader behaviors contributed significantly to the prediction of burnout over the contribution of demographic variables and support from other sources (e.g., home, others at work). Wegge, Shemla, and Haslam (2014) suggest that leaders who are cognizant of employee health, particularly when dealing with exhausted employees, and model good health behaviors also influenced the health behaviors of employees. Thus, leader behaviors appear to make a robust and unique contribution to the psychological well-being of employees across a range of industries. The practical importance of this work is that leaders can be trained in behaviors that are more likely to support the well-being of employees. For example, leaders can be trained to be considerate of employee health, demonstrate concern for the well-being of their subordinates, communicate vision and meaning, and ensure that employees are intellectually stimulated and empowered.

The Application of Multisystem Thinking to Employee Resilience during Organizational Change

Organizational change is a normal part of working life. It is not only organizations and teams that are required to change, but individual employees are also expected to change and adapt to new working conditions (Anderson, 2013). Change fatigue is particularly common in the healthcare sector and the rapid and frequent pace of change within health organizations is well acknowledged (Camilleri, Cope, & Murray, 2018). In the healthcare sector, change is being driven not only by a greater public demand for services but also a shift in the needs of medical services as new public health issues emerge (e.g., COVID-19) and others become treatable (e.g., changes in the needs of HIV sufferers with the development of antivirals). However, organizational change is disruptive and a significant contributor to employee job demands, particularly as employees experience uncertainty with respect to changes to their roles, routines, or uncertainty about ongoing employment (Rafferty & Griffin, 2006). Organizational change often bears a relationship to problematic employee health outcomes such as burnout (Dubois, Bentein, Mansour, Gilbert, & Bedard, 2014). From a multisystem perspective, organizational change is likely to result in a complex interplay between individual, team, and/or organizational-level systems that determine the outcomes for employee resilience. In this way, when attempting to support the resilience of employees during periods

of organizational change, it is necessary to target several systems at once for intervention. A case example follows.

The XY Hospital: Background

The XY Hospital was experiencing significant and rapid change. This change took place very quickly and meant that staff were expected to adjust to large-scale change in less than 12 months. Several voluntary redundancies, transfers and resignations occurred as a consequence of the change. Change was being driven by several factors including (a) it was no longer perceived as necessary to have several wards with specific functions (change resulted in the merger of several wards resulting in modifications of work routines, communication and IT systems, and job roles); (b) there was change in the hospital director who was seeking to save operating costs; and (c) there had been previous calls for voluntary redundancies that resulted in more than 30 employees leaving the organization. Management reported concerns about the well-being of staff given increased absenteeism, evidence of low morale, and growing cynicism. As is common in such situations, the initial solution considered by management was to provide staff with resilience training to enhance individual-level coping capacities of employees. Resilience training can contribute to the resilience supporting capacities of individual staff members (Vanhove, Herian, Perez, Harms, & Lester, 2016). However, as noted throughout this chapter, there are many ways that organizations as a whole and specific work teams (both higher order systems that play a role in positive functioning when workplaces experience atypical amounts of stress) can have significant positive effects on both employee and organizational resilience.

At the outset, understanding employee resilience in this dynamic and paying attention to context can seem overwhelming and complex. However, frameworks for assessing supports and demands such as the Resilient Systems Framework (Figure 23.1) allow the identification of possible leverage points for optimizing individual resilience and the co-design of interventions at the individual, team, and organizational levels.

Diagnosis of Organizational Sources of Demand at XY Hospital and Approaches to Intervention

Core issues for this team included:

- *Perceived lack of opportunities for development.* Staff raised concerns about educational and development resources, specifically the lack of formal clinical supervision that was contributing to concerns about deskilling. As identified previously, clinical supervision is a key area of importance for staff in the hospital sector (Cusack, et al., 2016).
- *Communication about organizational change.* Staff reported concerns that management were not transparent about the change process. Communication is vital to the effective implementation of organizational change (DiFonzo & Bordia, 1998). In the context of this organization, the lack of communication was increasing the level of uncertainty among employees. During the change process, there is often uncertainty regarding the aims of change, how change will occur, and what the outcomes of change will be for the individual

employees (Buono & Bowditch, 1993). Employee uncertainty during the change process has significant implications for well-being and readiness for change.

- *Control over decision-making.* The main concern was the perceived lack of involvement in the change process. Specifically, staff felt that their feedback as to how changes are integrated into the workplace (particularly relating to quality of care) failed to be acknowledged. Actively involving employees in the change process has important implications for employee support for change (Sharif & Scandura, 2014). Moreover, job control and autonomy has been conceptualized as a job resource. Job control can help employees deal more effectively with job demands, buffering the negative implications of job demands (Bakker & Demerouti, 2007). The end result in this context was that employees felt frustrated about their ability to affect change, influence events, and avoid negative outcomes.
- *Workload and value conflicts.* Understaffing is an issue for many organizations when there is pressure to streamline the workforce and reduce costs. In the context of XY Hospital, workload was an issue for two reasons. First, during periods of crisis staff were often required to work overtime to manage the crises, a pattern that was highly unpredictable but that was occurring more often. Second, the main concern appeared to be the impact workload had on perceived quality of care. Frustration was expressed about the limited ability of staff to engage in patient care in a way that was meaningful (e.g., not having sufficient time to support patients and their families). This is a common observation in studies of nursing. Higher workloads and long work hours can appear to conflict with real or perceived quality of care and significant role responsibilities (Peter, Macfarlane, & O'Brien-Pallas, 2004) and can take a significant toll on the well-being of nurses. At times, this conflict takes an ethical form and can result in moral distress (McAndrew, Leske, & Schroeter, 2018), defined as “the experience of psychological distress that results from engaging in, or failing to prevent, decisions or behaviors that transgress, or come to transgress, personally held moral or ethical beliefs” (Crane, Bayl-Smith, & Cartmill, 2013, p. 6).
- *Problematic recovery from work.* High levels of exhaustion and high levels of workplace spillover into family life can indicate excessively high workplace expectations and the blurring of work–life boundaries. It can also mean that individuals lack strategies to recover from workplace stress effectively. Research demonstrates that daily recovery from work is associated with enhanced well-being, work engagement, and next-day job performance (Sonnentag, 2003; Sonnentag & Fritz, 2007; Totterdell, Spelten, Smith, Barton, & Folkard, 1995). Conversely, failure to recover from work leads to the chronic accumulation of stress and has implications for longer-term physical and mental health (e.g., Brosschot, Gerin, & Thayer, 2006; Geurts & Sonnentag, 2006). Fortunately, it is not the time available for recovery that is critical, but rather the characteristics of the rest experience (Westman & Eden, 1997) that can be encouraged via training and supportive leadership.

Table 23.2 outlines the possible team and individual-level interventions that address the issues identified in the previous case study as part of a multisystemic approach to intervention. Ideally, issues are addressed at different levels within the system to achieve the most sustainable outcomes.

TABLE 23.2 Team- and Individual-Level Interventions to Address Issues Identified in the XY Hospital

Issue	Team-Level Intervention	Individual-Level Intervention
Perceived lack of opportunities for development	<p>Develop a list of self-appointed mentors that can be sought out for career support and practice advice</p> <p>Promote a learning culture within the organization by identifying ward expertise and champions of particular skills on the ward</p> <p>Provide staff with information about the developmental opportunities already within the hospital (e.g., seminars)</p> <p>Managers modeling self-directed learning</p> <p>With staff consultation, determine strategies for staff development that would be most desired and then empowering a lateral thinking approach to meeting this demand (i.e. developing contacts both within and external to the ward/hospital)</p>	<p>Develop staff to be proactive about self-development and seeking mentors</p> <p>Assist staff in the development of realistic and achievable goals for their career</p> <p>Increase problem-solving behavior around competency development</p> <p>Encourage effective use of social support and mentoring within the hospital</p>
Communication	<p>Provide staff with feedback about what suggestions have been received and why a particular decision has been made (i.e., reasons behind decision-making). This could be in the form of a verbal general meeting or in a weekly update notice that outlines issues that have been received and their responses from management</p> <p>Be clear about what decisions staff may have a level of influence over</p> <p>Develop a framework with staff that allows greater upward and downward communication between staff and management</p> <p>Develop a standardized feedback process collaboratively with staff to pass information to management</p>	<p>Develop individual communication and inter-personal skills that allow them to communicate their concerns effectively</p> <p>Assist staff to take a management perspective when it comes to communication and negotiation</p>
Control over decision-making	<p>Create opportunities for staff to get involved in decision-making</p> <p>Allow staff to provide open solutions to problems without a preferred management driven solution being put up front</p>	<p>Assist staff to exercise control via the way they view and respond to a situation</p> <p>Assist staff to develop a greater tolerance for uncertainty and frustration in the workplace</p> <p>Help staff to focus on aspects within a situation that are controllable</p>
Workload and value conflicts	<p>If there is scope for influence, present staff with opportunities to come up with cost-neutral strategies for addressing perceived issues with workload and skill mix.</p>	<p>Normalize the challenges of workload that effect the health sector</p> <p>Help staff to balance the importance of meeting professional standards within the limitations of the hospital system</p>

TABLE 23.2 Continued

Issue	Team-Level Intervention	Individual-Level Intervention
Recovery from work	<p>Explicit support from management for routine breaks.</p> <p>Support a team-culture that values downtime and uses breaks effectively</p> <p>Ensure that there is not implicit or explicit messages that communicate expectations to staff of a requirement to be available beyond work hours</p>	<p>Help staff understand the barriers to detaching from the workplace during breaks and evening rest periods</p> <p>Help staff understand how to get the most from rest periods involving absorbing and enjoyable activities that are detached from the workplace</p>

Conclusion

In recent years, there has been greater recognition of the role job design, workplace ecology, and leadership play in the resilience of employees. However, there are several areas in need of further exploration in terms of the role of job resources in influencing individual level event appraisals or their role in compensating for a lack of individual level resources. This is an underexplored area that could have significant implications for the way we think about the dynamic interplay between environmental and individual resilient capacities in organizational settings. Moreover, research exploring team resilience is still in the early stages of development, with efforts to understand team resilience only emerging within the last decade (e.g., Alliger, et al., 2015; Edson, 2012; Gucciardi, et al., 2018). Thus, research is required to both develop an understanding of the dynamic mechanisms at play and the leverage points where interventions may be meaningfully applied. At the organizational level, empirical investigations are required that explore the costs and benefits of various human-resource management practices on employee resilience. Human-resource management approaches to employee resilience can be reactive and driven by what is in vogue at various points in time with limited evidence of their effectiveness. On the surface, such approaches may seem intuitive with a level of face validity for their effectiveness but provide no measurable benefit. These tendencies can be curbed by the delivery of proactive evidence-based strategies and practical advice to human resource managers regarding how to support employee resilience.

Australian entrepreneur Sir Richard Branson is credited with the maxim: “Learn to look after your staff first and the rest will follow.” The question that this chapter has addressed is *how* to look after your staff. The answer is via a multisystemic approach to staff resilience. I discourage the overreliance on resilience training and encourage consideration of organizational and team systems as ways to develop and sustain employee resilience. Where systematic issues of employee well-being and resilience occur, changes to job design, job demands, leadership behaviors, and available resources to cope with stress, especially during periods of organizational change, are likely to be key. Such initiatives not only sustain the resilience of employees, but also contribute to high performing organizations.

Key Messages

1. The role of organizational- and team-level factors in influencing individual-level resilience is a rich area of investigation. There are several questions yet to be answered regarding the level of fit required between certain resources and demands, and the role of job-based resources in effecting individual-level capacities for resilience.
2. Organizational and work team systems play a crucial role in extending or constraining individual capacities and resources relevant to maintaining employee resilience. Thus, better equipping employees in their roles has the potential to increase intra-individual resilience capacities.
3. Leaders and leadership behavior have been identified as a key determinant of team and employee resilience. In particular, leader behaviors make a robust and unique contribution to the psychological well-being of employees across a range of industries.
4. Leaders can be trained in behaviors that are more likely to support the resilience of employees.
5. Interventions that seek to support employee resilience need to move beyond resilience training and explore organizational and team systems as ways to develop and sustain employee resilience.

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