The art of being resilient: How can I thrive following spinal cord injury

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How resilient do you think you are?
What is resilience?

- Something that occurs when one faces adversity
- It is a dynamic process
- It involves maintaining stable social, psychological and physical functioning
- A quality involving strength of purpose, hardiness, perseverance, tenacity, resoluteness, endurance
- True grit!

Resilient behaviour is characterised by:

A belief that one can self-manage
Able to form close relationships
Able to achieve positive outcomes in their daily lives
A degree of autonomy
Able to problem solve
Optimistic and humorous despite adversity
Able to manage stress and trauma associated with adversity


No one doubts that catastrophic injury is associated with serious challenges and difficulty!!
However, there are ways of boosting one’s resilience after a catastrophic injury like SCI.
The greatest glory in living lies not in never falling, but in rising every time we fall.

- Nelson Mandela
You may ask the question whether I have the right or the ability to be giving advice on this topic?

“I’m too busy recommending things to experience them myself.”
Research evidence provides clues about ways one can enhance one’s resilience
Based on good evidence, the foundations of resilience are:

1. Depending on your capacity, exercise regularly
2. Eat a healthy diet
3. Work on your sleep so you get at least 6 hours per night
4. Work on your social support networks
5. Engage in frequent enjoyable activities
Resilience is strongly related to expectations, something we call self-efficacy.
Self-efficacy has been defined as ‘the belief in one’s capabilities to organize and execute the courses of action required to produce given attainments’ (Bandura, 1997)

If I have high self-efficacy, then this means I perceive/believe I can manage my behaviour and daily outcomes
If I have poor self-efficacy, it can be damaging physically and mentally.
An abuse of self-efficacy
The mediating role of self-efficacy?
Those with high self-efficacy different to Australian norms in three physical domains.
Those with low self-efficacy different to the other two groups in all domains p<.05
Chronic pain influences mood (and mood influences pain)
(Greater time since injury associated with lower pain)

However, self-efficacy has no influence on fatigue

Chronic pain and depressive mood related to higher fatigue (and vice versa)

Self-efficacy plays a protective role, and will be most effective when one correctly interprets the relationship between one’s behaviour and outcomes.

Unfortunately, not everything you believe or think is correct.

We can all be deluded (some more than others of course!!) It will be helpful to be aware that our thoughts/expectations can be incorrect.
Persistent anger and irritability will lower resilience
Thinking in a negative, catastrophic, unhelpful manner will lower resilience while...

thinking optimistically, realistically, and helpfully about adversity enhances resilience
Whatever strategy or treatment used, resilience will be substantially enhanced if it becomes clear to the person that what they are doing is successful or adaptive.

A powerful self-statement: I have done it before, I can do it again.
CBT can enhance resilience
Clinical trial outcome for adults with SCI. Chronic pain (0=none, 2=discomfort, 3=distressing) following group CBT. Control SCI participants received usual rehabilitation care.

Clinical trial outcome for adults with SCI. Depressive mood (Beck Depression Inventory where high scores indicate high depressive mood) following group CBT. Control SCI participants received usual rehabilitation care.

Clinical trial outcome for adults with SCI. Perceived control (perceptions of helplessness where high scores indicate helplessness) following group CBT. Control SCI participants received usual rehabilitation care.

Thank you