SYSTEMATIC REVIEW

Resilience Model to Increase Self Acceptance of the Elderly in Nursing Homes: A Systematic Review

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ABSTRACT

Introduction: The elderly who live in nursing homes are required to adapt, which often causes stress, loneliness, helplessness, and withdrawal from the social environment. The purpose of this review was to analyze the resilience model that can increase the self-acceptance of the elderly in nursing homes. **Methods:** The systematic review was carried out in february 2022 with a range of article searche time from 2018-2022 using 4 electronic database (Scopus, PubMed, Web of Science, and ScienceDirect). The Center for Review and Dessemination and the Joanna Briggs Institute Guideline were used to asses the quality and PRISMA's checklist for this review guide. This study search based on Medical Subject Heading (MesH) and the search description was "resilience" AND "adaptations" AND "self-acceptance" AND "(elderly OR aged)" AND "nursing homes". **Results:** Based on the inclusion and exclusion criteria, 10 of the total 79 articles that identified records were kept. Being resilient is crucial in assisting people in overcoming challenges that arise in life. Resilience gives someone the capacity to manage their emotions, optimism, investigate the root of issues, sympathize, and achieve their goals. **Conclusion:** The nursing homes as a new place to live for the elderly must continue to increase the self-acceptance of the elderly. By increasing self-acceptance, hopefully that the resilience of the elderly in the orphanage will be formed. Resilience makes the elderly have strong self-efficacy, are able to adapt to change, have social problem-solving skills, deal with stress, and have a stable feeling.

Keywords: Elderly; Nursing homes; Resilience; Self-acceptance.

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INTRODUCTION

Self-acceptance is a person's acknowledgment of the strengths and weaknesses in himself that allows that person to develop himself as optimally as possible (1). In nursing homes, the elderly have low levels of self-acceptance (2). Elderly residents of nursing homes struggle to adjust, which causes stress, a loss of control over their lives, and a loss of identity. Nursing home residents that feel unneeded and undesired have low self-esteem and are upset with themselves, other residents, and the environment. The elderly will reduce social interaction and gradually distance themselves from the local society if they feel inferior, which will hinder social adjustment (4).

Based on research results, Taiwan is increasingly becoming an "aging society" with the number of people moving from family residences to nursing homes has increased over the years. While the results of the report in the UK show that as many as 400,000 elderlies live in nursing homes (4). The depression level of the elderly in nursing homes was higher (36.93%) than the elderly who lived at home (25.62%). In addition, the elderly at the orphanage also experienced anxiety by 32.73%. The elderly do not feel comfortable living in the orphanage because they are reminded of their family, considering the orphanage as a place of exile (5). The majority of the elderly do not have sufficient self-acceptance in the orphanage (6).

The elderly represent the pinnacle of human growth, and many of them aspire to a quiet, contented existence spent with their grandkids. The old being sent to nursing homes, children being too busy at work to care for the elderly at home, and other things prevented these expectations from coming

true (4). The elderly who were delivered by their families to the orphanage unilaterally experienced feelings of inferiority so that they had poor social adjustments and would not become good individuals (4). Because the elderly are adjusting to a new setting that has never been occupied and because each person in the orphanage has a different personality, it is getting harder for them to acclimatize. Elderly people who have bad thoughts think that living with their family is difficult and hinders their children's future.

Nursing home residents who lack self-acceptance experience a variety of detrimental effects, including excessive and recurrent despair and humiliation (6). Self-acceptance is an attitude that entails being content with one's abilities, talents, and understanding of one's limitations. The elderly living in an orphanage require more self-acceptance than the elderly living in the community because the latter have access to family support, which is crucial for helping the elderly solve problems, build self-confidence, and be motivated to face changes in their lives and, ultimately, increase self-acceptance. The elderly living in an orphanage require more self-acceptance than the elderly living in the community because the latter have access to family support, which is crucial for helping the elderly solve problems, build self-confidence, and be motivated to face changes in their lives and, ultimately, increase self-acceptance. Differences in nature and character with other elderly people that inhibit positive affect and emotions as well as cognitive evaluation so that the elderly cannot adapt well and cause the elderly to become unwell where one of the dimensions is self-acceptance.

By boosting the elderly's resilience, the negative effects resulting from their low self-acceptance might be anticipated. It is crucial for senior residents of orphanages to be resilient in order for them to adjust to and accept their life there. Resilience is an effective coping against difficulties and pressures. Resilience is a process of coping with stressors, difficulties, changes that are influenced by protective factors. Resilience is essentially a dynamic process that involves adaptive behavior in dealing with challenging circumstances that have major risks and challenges (8).

Resilience allows individuals to stay focused on the problems at hand without dissolving in negative feelings or thoughts, so they are able to overcome the risk of depression and other psychological disorders. Elderly resilience in orphanages is expected to adapt and accept their existence in the orphanage (9). Effective coping to increase the resilience of the elderly in the orphanage is needed so that the elderly can obtain physical, psychological health, freedom of activity, social relations and the environment. The researcher believes it is required to conduct a study with the title The influence of Resilience on the Self-Acceptance of Elderly in a Systematic Review Institution based on the description above.

METHODOLOGY

Search strategy
The Protocol and Recommendations from the Preferred Reporting Item for Systematic Review and MetaAnalysis (PRISMA) checklist were used in the systematic review strategy to decide on study alternatives, and the Center for Review and Dissemination and the Joanna Briggs Institute (JBI) Guidelines served as a benchmark for judging study quality. The search approach for the review questions listed in Table I was PICOS (P = population, I = intervention, C = comparison, O = outcome, S = study type). We used 4 electronic databases (Scopus, PubMed, Web of Science, and ScienceDirect) to search for relevant papers matching the review in february 2020 with a vulnerable article search time of 2018-2022. Search relevant articles using keywords according to Medical Subject Heading (MesH) and using Boolean operators AND and OR. So the authors use the research keywords ("resilience") AND ("self-acceptance") AND ("aged" OR "elderly") AND ("nursing homes") AND Adaptation.

Study selection
The four databases were searched, and 79 articles in all were located. The duplicates were then eliminated (N=0). There were 15 final, analyzed articles out of the total number of articles found. Each database yielded the following number of articles: Scopus returned five, PubMed returned forty-three, Web of Science returned ten, and Science Direct returned twenty-one. In order to summarize the selection of papers for the study, the PRISMA 2009 Flow Chart was used, as shown in Fig. 1.

Data extraction and quality assesment
The research team independently extracted the data, and they also went over the data to make sure it was accurate. Author, year, country, research goal, theoretical framework, study design, sample size, sampling method, participant description, reliability and validity, measuring tools, analysis and statistical techniques, and results were among the pertinent data that were taken out.

The assesment of quality of study were used JBI (Joanna Briggs Institute) critical appraisalchecklist for quasi-experimental studies, cohort studies, and cross-sectional studies. The checklist for the quasi-

Tabel I : PICOS

Criteria	Inclusion	Exclusion
Population	Elderly in the nursing homes	Elderly living in the community
Intervention	*Resilience*	Besides resilience
comparison	There is not any	
Outcome	Self-acceptance of the elderly in the orphanage	Not discussing the reception of the elderly in the orphanage
Study Design	Quasy-experimental studies, randomized control and trial, experimental study, qualitative research and cross sectional studies, mixed methods study,	Systematic review, literature review
Publication years	2018-2022	Before 2018
Language	English	Other than English

Table II : The characteristics of articles during study selection

language sources	Year	Study Design	N	Databases			
				PubMed	Scopus	WoS	Science Direct
English	2018-2022	Experimental	2		1		1
		Descriptive	3	2		1	
		Cross sectional	1	1			
		Grounded theory	2	1	1		
		Quasi-experimental	1			1	
		Cohort	1	1			
Result			10	5	2	2	1

experimental study was 9 questions, the cohort study had 11 questions and the cross sectional study had 8 questions. The assessment criteria used scores of "yes", "no", "not clear", and "not applicable". Each question with a "yes" score will earn one point and any other score will earn zero points.

The results of these scores are then added up, if the research score is 50% in the critical appraisal, which is the limit point that has been determined and agreed upon by the researcher, it will be included in the inclusion criteria. Scores < 50% were excluded because they were considered low quality to avoid bias on the validity of the results and review recommendations. Finally, twelve studies scored higher than 50% and could be used to perform data analysis.

Data analysis and synthesis
Data analysis and synthesis in the studies were described according to study design, study and sample characteristic, country, and interventions.

RESULTS

In this study, we review a model of resilience to increase self-acceptance of the elderly in nursing homes. We analyzed ten articles from various countries that were published publicly that met the inclusion criteria that we had set. Overall, the research shows a model of resilience that can increase the self-acceptance of the elderly in nursing homes.

The research method used in this research were an

Table III : Reviewed Study Results

No	Title, author and year	Method (Desain, Sample, Variable, Instrument, Analysis)	Results
1	Meaning of well-being of older institutionalized persons in abandonment situation (10)	**D:** A quasi experimental **S:** 141 patients **V:** meaning of well being older institutionalized **I:** Psychological Well-Being Scale, The Spanish adaptation of Diener's Satisfaction with Life Scale (SWLS) **A:** Cronbach's alpha	After the intervention, participants from the experimental group showed an increase in the average scores of psychological well-being and life satisfaction, while no changes were found in the control group.
2	Satisfaction with the lives of elderly nursing homes residents (12)	**D:** descriptive **S:** 250 seniors **V:** satisfaction elderly in nursing homes **I:** Satisfaction With Life Scale (SWLS), Katz's Activities of Daily Living Scale, Hodgkinson's Abbreviated Mental Test Score, Basic Hope Inventory (BHI-12), Acceptance of Illness Scale (AIS), **A:** statistical analysis	The results showed that: 1) Satisfaction with the lives of elderly nursing home residents in the southern Mazovian region is low or average. 2) It has been observed that with increasing age the level of satisfaction with life decreases. 3) Acceptance of one's own condition due to accompanying chronic illness (AIS) and the ability to find oneself in new living situations (BHI-12), such as living in a nursing home (DPS), have an impact on the level of perceived life satisfaction
3	The mediating role of self-acceptance in the relationship between loneliness and subjective well-being among the elderly in nursing home: A cross-sectional study (14)	**D:** A cross-sectional study **S:** 415 seniors **V:** self acceptance, loneliness and subjective well being elderly in nursing homes **I:** general information questionnaire, the Memorial University of Newfoundland Scale of Happiness, the self-acceptance scale, and the UCLA Loneliness scale. **A:** Multiple linear regression	The results show that self-acceptance should be the focus of increasing subjective well-being
4	Quality of life of older persons in nursing homes after the implementation of a knowledge-based palliative care intervention (11)	**D:** An experimental crossover design **S:** 52 patients **V:** quality of life elderly in nursing homes **I:** WHOQOL-BREF and WHOQOL-OLD questionnaires **A:** Wilcoxon signed rank test	In the intervention group, no statistically significant improvement in quality of life was found. This result contrasts with the control group, which showed a statistically significant reduction in quality of life at both the dimension and item levels. Thus, this study showed a downward trend in health after nine months in both the intervention and control groups.
5	"You're at their mercy": Older peoples' experiences of moving from home to a care home: A grounded theory study	**D:** A grounded theory method **S:** 23 seniors **V:** the experience of the elderly moving to an orphanage **I:** interview guidelines **A:** descriptive analysis	Moving to a hospice is a significant unique relocation experience for the individual. The key factor influencing the transfer is the individual's perception of a lack of autonomy in the period before and after moving to a nursing home

No	Title, author and year	Method (Desain, Sample, Variable, Instrument, Analysis)	Results
6	Leisure Activities and Motivational Profiles in Adaptation to Nursing Homes (13)	**D:** descriptive study **S:** 113 seniors **V:** leisure activities and motivational profile **I:** a questionnaire assessing motivation, participation in leisure activities, life satisfaction, and adaptation to the orphanage **A:** correlation	The results of the study show that there is a relationship between recreational activities, motivation and adaptation to life in the orphanage
7	The effects of fear of COVID-19, loneliness, and resilience on the quality of life in older adults living in a nursing home (9)	**D:** descriptive and correlational study **S:** 440 seniors **V:** fear, loneliness, resilience, quality of life older adults in nursing homes **I:** Mini Mental State Exam (MMSE), the Brief Resilience Scale, the Fear of COVID-19 Scale (FCV-19S), the Loneliness Scale for Elderly (LSE), and the World Health Organization Quality of Life-BREF Turkish Version (WHO-QOL-BREF-TR). **A:** Shapiro Wilks, skewness and kurtosis value, Pearson correlation coefficient, multiple linear regression	Social relations and physical dimensions have the greatest impact on QOL, whereas mental and environmental dimensions have the least.
8	Quality of life among frail older persons (65+ years) in nursing homes: A cross-sectional study (15)	**D:** A cross-sectional study **S:** 78 seniors **V:** quality of life **I:** (WHOQOL-OLD and WHOQOL-BREF **A:** descriptive and comparative statistics	No significant differences between sex or age in quality of life were revealed
9	Self-Acceptance and Interdependence Promote Longevity: Evidence From a 20-year Prospective Cohort Study (8)	**D:** prospective cohort study **S:** 7626 **V:** self-acceptance and interdependence **I:** Ryff's Psychological Well-being Scale **A:** Confirmatory factor analysis, Kapan-meier analysis, cox regression	Self-acceptance reduces the risk of death by 19% and adds three years of life. Longevity expectations fully mediate the relationship between self-acceptance and death
10	Active aging program in nursing homes: Effects on psychological well-being and life satisfaction (17)	**D:** quasi-experimental **S:** 141 seniors **V:** active aging, psychological well-being and life satisfaction **I:** Mental State Examination **A:** t-test and chi-square test	After the intervention, participants from the experimental group showed an increase in the average scores of psychological well-being and life satisfaction, while no changes were found in the control group. To create active aging, it is necessary to empower participation, social openness and contribute to welfare maintenance

experimental study (2 studies) (10)(11), descriptive study (3 studies)(12)(13)(9), cross-sectional (2 studies) (14)(15), grounded theory (1 study)(15), quasi-experimental (1 study)(17) and study cohort (1 study) (8). Mexico (1 study), Poland (1 study), China (1 study), Sweden (2 studies), the United Kingdom (2 studies), Turkey (1 study), Singapore (1 study), and Spain (1 study) were among the nations where this research was carried out. The topic of boosting the elderly's self-acceptance in nursing homes via resilience was covered in all of the chosen research. Table II features the characteristics of articles during study selection. Table III features the Reviewed Study Results.

The advantages that can be observed in using the resilience model for the elderly in nursing homes are competent in dealing with various life stressors, including moving to the orphanage environment.

Interventions carried out
The Active Aging Program is aimed at improving the psychological well-being and life satisfaction of the elderly in nursing homes. The intervention was carried out for 3 months and was carried out individually or in groups with 15-20 members. Based on research (16) the interventions carried out are as follows:
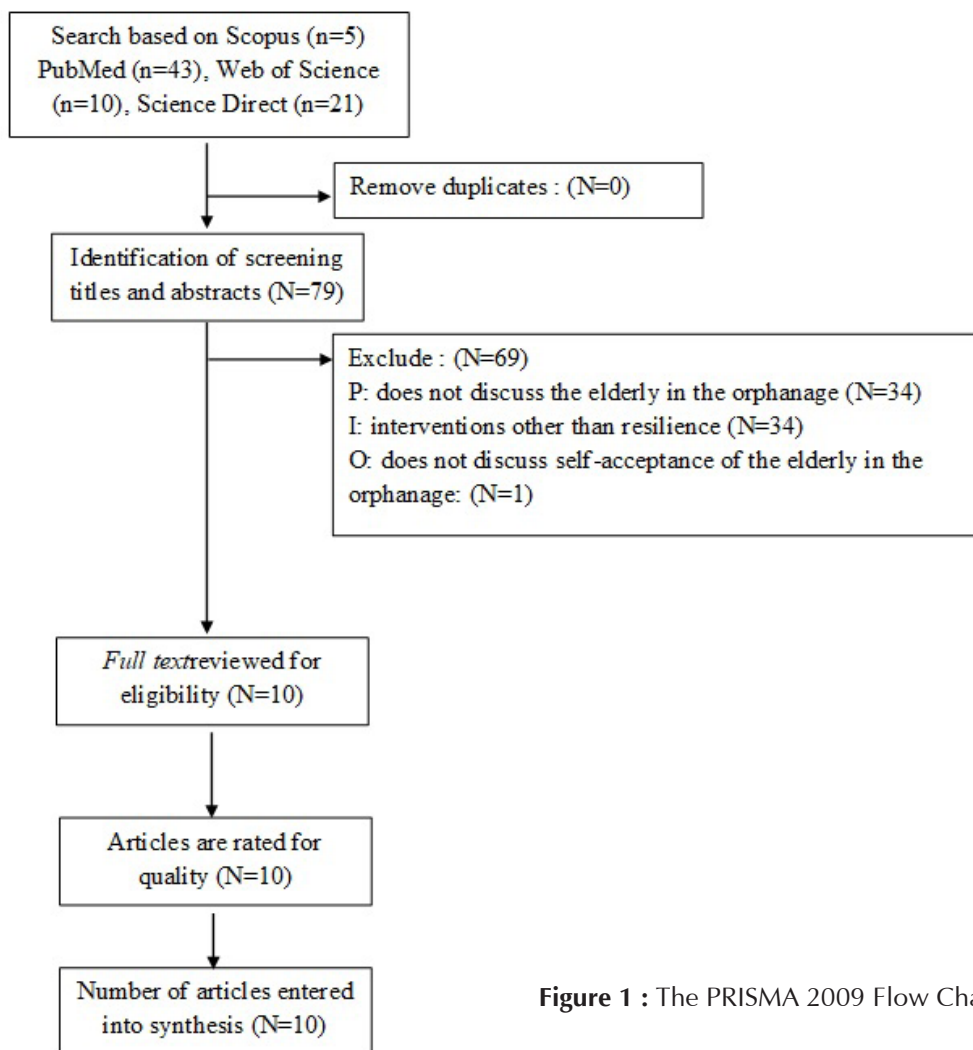
Figure 1 : The PRISMA 2009 Flow Chart.

1. Leisure workshops, activities that focus on socializing and having fun through bingo and popular board games. Workshops are held for one hour twice a week. The purpose of this activity is to increase self-acceptance and life satisfaction.

2. Nature therapy workshop, conducted activities related to nature such as making gardens, and walking on the pedestrian path. This activity aims to improve the participants' physical and social functions, carried out once a week.

3. Press workshop, all participants in the group attend the workshop as a forum for discussion. Held for 30 minutes aiming to encourage participants' social participation and openness to others.

4. Cognitive stimulation, carried out within an hour and a half every day. The computer session (Gradior and Neuron UP program) was the first of these activities. Secondly, music therapy sessions are used, as well as a multi-sensory room with various elements and songs to gain memory and connection to the outside world. Finally, the third activity uses the Montessori method, with daily work tasks such as folding t-shirts or packing bags for sightseeing. Activities carried out aimed at maintaining cognitive function and autonomy as long as possible.

5. Voluntary work is carried out to improve self-image, be open with the surrounding community, and increase the dimensions of life goals. These sessions take place three times a week for one hour each.

6. Psychomotricity, to improve the physical condition of the elderly through therapy and popular games that can improve the mental condition of the elderly as well. Activities are carried out for 30 minutes with a frequency of three times a week.

7. Jacobson relaxation technique, the purpose of this activity is to improve the physical condition of the elderly by using therapies such as progressive relaxation. This activity is held three times per week for 30 minutes.

8. Media library, used to improve the emotional status and social relations between residents. Done for one hour once a week.

9. Celebrate life, to promote social openness, maintain participants' sense of identity, and form new social bonds. It is held for one hour once a week.
10. Quality workshop, to provide participants with the opportunity to express opinions. To find out whether there has been a change in the psychology of the participants hour sessions are conducted per week

Steps taken so that the elderly have self-acceptance in the orphanage are carrying out daily life activities with meaning and feeling comfortable, paying attention to their physical needs such as food and hygiene, coexistence, namely having friendly relationships and attachments with residents of the orphanage, having spiritual experiences, namely by being involved in various activities. religious activities (9).

DISCUSSION

Resilience is the ability or capacity that individuals have in dealing with pressing problems or situations in life so that they can bounce back, and view problems and suffering positively and are natural things in life (17). Old age is the end of a life span. Enjoying old age and being happy and surrounded by loved ones is everyone's dream in old age. However, not everyone can enjoy old age comfortably living with their family and fulfilling their life properly, but they have to live in an orphanage.

Self-acceptance must be carried out by the elderly in the orphanage so that the elderly feel an enduring wholesome or personal integrity that makes the elderly feel well-being, and happiness and has the resilience to face life in an orphanage (6). The resilience model is run so that the elderly can have self-acceptance having spirituality, religiosity, and family support (9). In addition, the resilience model then raises the output of self-understanding, realistic self-expectations, no barriers in the environment, social and environmental support, no emotional stress, self-perception, and stable self-concept (10,14,15).

Elderly with good self-acceptance express the quality of personal life, as evidenced by the less dependence and greater self-care, the better the perception of health, well-being and quality of life (9). When family support is unfulfilled and distant, support from friends and people living with you is needed. Social support is able to make the elderly stand next to each other, make friends, and have supportive relationships (9,15). Social support to increase life satisfaction (11,14). Spirituality is related to human belief in God. Spirituality allows a person to experience life both individually and in groups with full meaning. Carrying out meaningful activities and activities as well as connecting with other people in the orphanage environment has a positive effect on self-acceptance of the elderly in the orphanage.

Resilience components form resilience, namely (1) emotional regulation, which is the ability to remain calm when under pressure. Good emotional regulation because they can face conditions away from families such as being away from relatives, children, and grandchildren. (2) Impulse control is an individual's ability to control desires, urges, likes, and pressures that arise from within. the ability of the elderly in controlling impulses can control desires, urges, likes and pressures from within; (3) Optimism is closely related to the characteristics desired by individuals, happiness, perseverance, achievement, and health. Optimistic individuals believe that a difficult situation will one day turn into a better situation. Optimistic about a difficult situation will turn into a better situation, as they are optimistic that they can still achieve happiness and health even though they live in an orphanage. (4) Causal Analysis refers to the ability of individuals to accurately identify the causes of the problems they face. The elderly who are not able to identify the cause of the problems they face correctly will continue to make the same mistakes; (5) empathy can be defined as the ability to understand and have concern for others; (6) Self-Efficacy is the result of successful problem-solving. Self-Efficacy represents a belief that we can solve the problems we experience and achieve success; (7) Reaching out is the individual's ability to achieve positive aspects or take lessons from life after the misfortune hat befell (17).

CONCLUSION

The resilience model can increase the self-acceptance of the elderly in the orphanage. The resilience model that is run so that the elderly can have self-acceptance is having spirituality, religiosity, and family support. In addition, the resilience model then raises the output of self-understanding, realistic self-expectations, no barriers in the environment, social and environmental support, no emotional stress, self-perception, and a stable self-concept.

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