

The Influence of Resilience on Flourishing in the Health Context: A Meta-Analysis

Dayanıklılığın Sağlık Bağlamında Gelişmeye Etkisi: Bir Meta Analiz

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Abstract:

Internal psychological factors play a significant role in individual flourishing, particularly for those facing health challenges, where resilience becomes crucial for promoting sustained well-being. Resilience, the capability to endure and adapt in the face of adversity, is the central focus of this research. The study was purposed to explore the impact of resilience on flourishing by examining effect sizes through meta-analysis. This research analyzed seven selected studies conducted globally. Research topics were identified using the PICO framework. A Boolean-based keyword strategy was used to systematically retrieve studies that met the inclusion criteria: those that addressed the correlation between resilience and flourishing in health contexts and were published between 2008 and 2024. A total of 3,172 studies were initially identified across seven databases, and seven were selected based on the inclusion criteria. Quality appraisal and data extraction were conducted to ensure the studies' validity. The analysis revealed a correlation effect size of 0.513 between resilience and flourishing, indicating a moderately strong effect. However, the heterogeneity test indicated variability across studies, highlighting the need further to explore the validity and interpretability of the meta-analysis. Nevertheless, a significant positive link between resilience and flourishing was identified within the health domain.

Keywords: Flourishing, Health, Meta-analysis, Resilience.

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Öz:

İçsel psikolojik faktörler, sağlık sorunları yaşayan bireylerde ruhsal iyilik hâli ve bireysel gelişim üzerinde belirleyici bir etkiye sahiptir. Bu bağlamda dayanıklılık, stresli yaşam olayları ve sağlıkla ilişkili zorluklar karşısında uyumu destekleyen temel bir psikolojik kaynak olarak değerlendirilmektedir. Zorluklara karşı direnme ve uyum sağlama kapasitesi olarak tanımlanan dayanıklılık, bu çalışmanın temel odak noktasını oluşturmaktadır. Bu çalışmanın amacı, sağlık bağlamında dayanıklılık ile gelişme arasındaki ilişkinin meta-analiz yöntemiyle incelenmesidir. Araştırma kapsamında, PICO çerçevesine dayalı olarak oluşturulan arama stratejisi kullanılarak 2008–2024 yılları arasında yayımlanan çalışmalar sistematik biçimde taranmıştır. Boolean tabanlı anahtar kelime stratejisi aracılığıyla yedi veritabanından toplam 3.172 çalışma belirlenmiş; dahil edilme kriterlerini karşılayan yedi çalışma meta-analize dahil edilmiştir. Çalışmaların metodolojik kalitesini değerlendirmek ve veri bütünlüğünü sağlamak amacıyla kalite değerlendirmesi ve veri çıkarımı yapılmıştır. Meta-analiz bulguları, dayanıklılık ile gelişme arasında orta düzeyde güçlü ve pozitif bir ilişki olduğunu göstermektedir (etki büyüklüğü = 0,513). Bununla birlikte, heterojenlik analizi çalışmalar arasında anlamlı düzeyde değişkenlik bulunduğunu ortaya koymuştur. Bu durum, elde edilen bulguların genellenebilirliği ve yorumlanabilirliği açısından dikkatle ele alınması gerektiğine işaret etmektedir. Sonuç olarak, dayanıklılığın sağlık psikolojisi bağlamında bireysel gelişimle anlamlı ve pozitif bir ilişkiye sahip olduğu sonucuna varılmıştır.

Anahtar Kelimeler: Flourishing, Sağlık, Meta analiz, Dayanıklılık.

Introduction

In 2023, 26.27% of Indonesia's population reported experiencing health-related complaints. (Badan Pusat Statistik, 2023). Individuals experiencing health issues are often vulnerable on psychological, physical, and social levels. One significant psychological factor influencing emotional health is an individual's belief in their health perceptions (Greimel et al., 2016). Unstable emotions can lead to stress, which, over time, may affect gene expression, resulting in unhealthy behaviors (Effendy, 2016). This alteration in gene expression can contribute to various health problems, such as infections, allergies, autoimmune reactions, and inflammation (Effendy, 2016). It is hypothesized that psychological factors play a crucial role in influencing genetic activity. As such, both physical and mental health are vital aspects of human life, with well-being being characterized by overall good health (Vanderweele & Lomas, 2022).

Individuals who navigate health challenges and use their illness experiences to evaluate how they cope with vulnerability are more likely to achieve well-being and flourishing (Edgar, 2017). Flourishing is a relative state in which all aspects of a human life are in good condition, extending to their relationships and social interactions (Huppert et al, 2021; Vanderweele, 2017). Individuals who flourish tend to experience positive emotions and life satisfaction, confidently assess their mental and physical health, find meaning in their activities, act as agents of goodness in their environment, maintain high-quality relationships, and achieve relative financial and material success (Vanderweele, 2017).

Resilience is one of the key characteristics of flourishing individuals, emphasizing their ability to recover and adapt (Huppert and So, 2011). When individuals effectively manage anxiety, worries, and emotions in the face of challenges, such as health issues, they can recover swiftly and continue their lives. Resilience refers to an individual's capacity to recover from difficulties and challenges, including those related to health (Connor & Davidson, 2003). Additionally, several studies have highlighted a significant positive correlation between resilience and flourishing in various contexts, such as education among students (Amelasasih et al., 2019), entrepreneurship (Choirunnisa, 2022), families with

special needs children (Puwanti & Kustanti, 2018), and during the COVID-19 pandemic (Karomah et al., 2022). These findings demonstrate that, in the context of health, resilience plays a critical role in enabling individuals to achieve flourishing.

Conversely, research by Rink et al. (2021) determines a positive interaction between well-being (flourishing) and resilience in the behavior of healthcare professionals during service delivery. Meta-analyses of resilience interventions in healthcare settings, such as those by Cheng et al., suggest that the tools used to measure resilience during interventions influence healthcare professionals' resilience levels (Cheng et al., 2022). However, these studies do not explore other potential associations with flourishing. Furthermore, research gaps exist regarding resilience as a determinant of flourishing, with some studies indicating no significant relationship between the two. For instance, resilience was found not to influence flourishing among respondents during the COVID-19 pandemic (Cusinato et al., 2020). Based on earlier studies, it can be concluded that much of the research on resilience and flourishing has focused primarily on healthcare professionals, highlighting the need for further investigation into patients with chronic diseases who require healthcare services. This study aims to assess the effect size of the correlation between resilience and flourishing in the healthcare context, among both healthcare professionals and patients with chronic illnesses.

Materials and Methods

The primary objective of meta-analysis is to achieve objective scientific validity that can serve as a foundation for description, theory development, prediction, and control. The process of conducting a meta-analysis follows the PRISMA 2020 guidelines for systematic reviews and meta-analyses. In general, after defining the problem statement and research objectives, the next step is to formulate the research question using the PICO framework. This step is essential for guiding and assisting in classifying research themes during the search process (Page et al., 2021). The participants in this study will focus on patients with health conditions; the focal point of the

intervention or exposure is the correlation between resilience and flourishing; and the study's output must focus on the patient's flourishing state.

A literature review was conducted to find some relevant studies. In broad terms, Table 1 of this study focuses on resilience and flourishing in the context of health. The research questions, formulated according to the PICO framework, are as follows:

1. Does resilience affect flourishing in patients and healthcare professionals?
2. What is the magnitude of the effect of resilience on flourishing?

After formulating the research questions, the next step is to establish inclusion and exclusion criteria to selectively review study results using the PICO framework (see Table 1).

Table 1. The Inclusion & Exclusion Criteria

Inclusion Criteria	Exclusion Criteria
<p>Studies will be considered if they provide more information about:</p> <ul style="list-style-type: none"> ● Resilience ● Resiliency ● Resilient ● Flourishing ● Well-being ● Happiness 	<p>Studies will be excluded if they describe more about:</p> <ul style="list-style-type: none"> ● Buoyancy ● Subjective Well Being ● Life Satisfaction ● Quality of Life ● Psychological Well Being ● Emotional Well Being
<p>Studies will be considered that produce output on flourishing.</p>	<p>Studies that measure other than flourishing.</p>
<p>Priority will be given to studies that focus on general health, both mental and physical.</p>	<p>Studies in broad industrial, organizational and educational contexts.</p>
<p>Available in English, either as an original publication or a translated version.</p>	<p>The work remains untranslated into English.</p>
<p>Published after January 2008</p>	<p>Published before January 2008</p>

Next, a search strategy must be developed, specifying six databases and the timeframes for each search. Additionally, a method for retrieving relevant studies from these databases is required. Following the guidelines of

Boolean keywords was developed based on the research framework (Aromataris and Riitano, 2014) outlined in Table 2.

Table 2. Result of Keywords Used in Several Databases

Database	Keywords	Articles Found
IEEE Xplore, Emerald Insight, Springer Link, Science Direct	(flourishing OR happiness OR "well-being") AND resilienc* AND health	2,844
Sage Journals	(flourishing OR happiness OR "well-being") AND resilienc* AND chronic AND health	669

The next step is to select the studies identified during the search process. Study selection is performed using Rayyan, with several steps including filtering duplicate studies, automatic filtering based on keywords aligned with the inclusion criteria, further filtering based on relevant titles, and subsequent filtering based on the abstracts of selected titles. This process is conducted independently by the researcher, with the assistance of two

reviewers. A summary of the screening and selection process will be presented in the PRISMA flow diagram (Figure 1).

Data extraction occurs after determining the final number of relevant studies. The extracted data items include the study label, article type, country, sample characteristics, resilience and flourishing scales used, Cronbach's alpha

values for each scale, valid sample size, correlation coefficient (*r*) scores, and other necessary data for analysis. Additionally, relevant studies will be content-reviewed, focusing on population, data collection methods, study design, and reported outcomes. Quality assessment is based on Evidence-Based Librarianship (EBL) by Glynn, using four responses: 'Yes' (Y), 'No' (N), 'Unclear' (U), and 'Not Applicable' (NA), with the overall assessment norm calculated as $(T=Y/T)$ ($T=Y+N+U$) ($<75\%$) (Glynn, 2006).

Data analysis will be performed using Jamovi for Windows to review the correlation between resilience and flourishing. The analysis will report variable significance, the direction of variable relationships, effect size estimates, and results from the heterogeneity test. These will be displayed in data tables, funnel plots, and scatter plots.

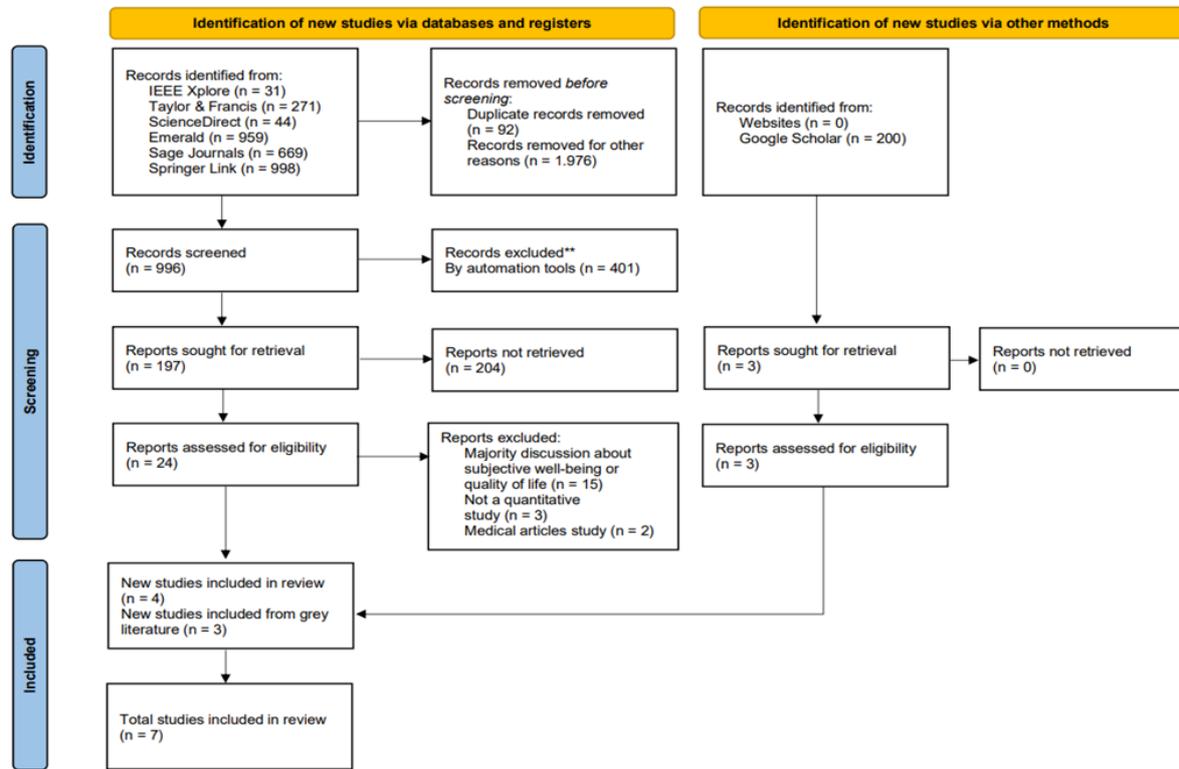


Figure 1. Prisma Diagram Flow

Result

Based on the process undertaken, 3,172 studies were identified across six databases. Using an artificial intelligence tool (Rayyan), 996 studies were identified after filtering out 92 duplicates. Automatic keyword-based selection, according to the inclusion criteria (health, healthcare, chronic, patient, resilience, resilient, COVID, well-being, happiness, flourishing), yielded 595 relevant studies. Subsequently, 197 studies were identified as relevant after screening titles against the inclusion criteria, and two reviewers reviewed 24 conflicting studies. Further selection based on comprehensive abstract review, along with consensus resolution of conflicts, yielded 16 studies. The researcher then conducted a brief content review, excluding 9 studies due to major discussions focused on subjective well-being or quality of life (outside the scope of inclusion), non-quantitative studies, or those primarily addressing major medical health issues. Ultimately, 7 studies were included (see Figure 1).

The characteristics of the seven studies showed consistency in the use of resilience measurement scales: Brief Resilience Scale (57.1%) and CD-RISC (42.9%). For flourishing scales, several tools were used: the Flourishing Scale (28.6%), the Satisfaction with Life Scale (28.6%), the WHO Well-Being Index (28.6%), and

the Subjective Happiness Scale (14.3%). Each Cronbach's alpha coefficient indicated that the scale possessed good internal consistency, with an average of >0.70 . Sample characteristics included individuals with health issues (28.6%), healthcare professionals (28.6%), and adults in general (42.8%). The majority of articles were published in journals (85.7%), with the remainder from conference proceedings (14.3%). Scholarly research on the connection between resilience and flourishing was primarily conducted in Asia (85.7%), with the remaining studies conducted in Australia (14.3%), as presented in Table 3.

Quality assessment was conducted for all included articles using the selection criteria. As shown in Table 4, the validity scores of the studies indicated generally good quality, although one article, Widyorini et al. (2023), scored below 75%, suggesting lower quality. This study had average scores below 75% for most aspects, except for study design (80%). Other articles scored above 75%, indicating comprehensive content quality. Notably, the studies by Yildirim and Belen (2019), Gayton and Lovell (2012), Yildirim and Arslan (2020), and Chow et al. (2018) scored 84%, 88%, 88%, and 88%, respectively.

Table 3. Study Characteristic

Author	Title	Article Type	Country	Sample Characteristic	Resilience Scale	Flourishing Scale	Cronbach's Alpha	Total Sample	M Age	SD Age	r	F
Widyorini, dkk 2023	The Relation Between Resilience and Subjective Happiness among COVID-19 Survivors with Comorbidities: The Mediating Role of Fear of COVID-19	Conference	Indonesia	Deaf people	BRS (Brief Resilience Scale)	Subjective Happiness Scale	na	25	na	na	0,280	na
Yildirim & Belen 2019	The Role of Resilience in the Relationships between Externality of Happiness and Subjective Well-being and Flourishing: A Structural Equation Model Approach	Journal	Turki	Turkish adult	BRS (Brief Resilience Scale)	Flourishing Scale (FS)	BRS = 0,86 FS = 0,83	243	37,1	na	0,450	na
Yildirim 2019	Mediating Role of Resilience in the Relationships Between Fear of Happiness and Affect Balance, Satisfaction With Life, and Flourishing	Journal	Turki	Turkish adult	BRS (Brief Resilience Scale)	Flourishing Scale (FS)	BRS = 0,86 FS = 0,85	256	36,9	9,02	0,430	na
Gayton & Lovell 2012	Resilience in Ambulance Service Paramedics and Its Relationships With Well-Being and General Health	Journal	Australia	Paramedics in Queensland	CD-RISC	The Satisfaction With Life Scale (SWLS)	CD-RISC = 0,80 SWLS = 0,83	219	33,5	6,8	0,369	3,53
Novak & Ari 2023	Resilience, Stress, Well-Being, and Sleep Quality in Multiple Sclerosis	Journal	Israel	Multiple Sclerosis Patients	CD-RISC	The Satisfaction With Life Scale (SWLS)	CD-RISC = 0,82 SWLS = 0,82	259	41,7	12,5	0,699	0,631
Yildirim & Arslan 2020	Exploring the associations between resilience, dispositional hope, preventive behaviours, subjective well-being, and psychological health among adults during the early stages of COVID-19	Journal	Turki	Turkish adult	BRS (Brief Resilience Scale)	The WHO Well-Being Index (WHO-5)	BRS = 0,78 WHO-5 = 0,88	220	39,5	8,2	0,53	na
Chow, dkk 2018	Resilience and well-being of university nursing students in Hong Kong: a cross-sectional study	Journal	Hongkong	Nursing student	CD-RISC	The WHO Well-Being Index (WHO-5)	na	678	na	na	0,378	na

*na= not applicable

Table 4. EBL Checklist

Section A: Population	Study 1	Study 2	Study 3	Study 4	Study 5	Study 6	Study 7
Does the study population accurately represent all potential and eligible participants who could be included in the research?	Y	Y	Y	Y	Y	Y	Y
Are the inclusion and exclusion criteria clearly defined and explicitly described?	U	U	U	Y	Y	U	Y
Is the sample size adequate to yield statistically precise and reliable estimates?	N	Y	Y	Y	Y	Y	Y
Is the response rate sufficient to ensure accurate and precise statistical estimates?	U	Y	Y	Y	Y	Y	Y
Was the selection of the study population conducted without introducing sampling bias?	Y	Y	Y	Y	Y	Y	Y
Were issues of incomparability or confounding adequately addressed during the data analysis?	Y	Y	Y	Y	Y	Y	Y
Did the study obtain informed consent from all participants before data collection?	Y	Y	Y	Y	Y	Y	Y
SCORE	57,1%	85,7%	85,7%	100%	100%	85,7%	100%
Section B: Data Collection							
Are the procedures for data collection clearly and comprehensively described?	Y	Y	Y	Y	Y	Y	Y
Was data gathered through direct, face-to-face interviews or surveys?	N	N	N	N	N	N	N

Has the instrument used for data collection been validated for reliability and accuracy?	Y	Y	Y	Y	U	Y	Y
Is the analysis grounded in routinely collected statistical data, and are those statistics objective and free from researcher bias?	Y	Y	Y	Y	Y	Y	Y
Is the data collection tool or questionnaire presented within the publication or its supplementary materials?	Y	Y	Y	Y	Y	Y	Y
Are the survey or interview questions formulated with sufficient clarity to obtain accurate and meaningful responses?	U	Y	Y	Y	Y	Y	N
Were data collectors independent from individuals responsible for providing services to the study population, ensuring the absence of potential bias?	U	Y	Y	Y	Y	Y	Y
SCORE	57,1%	85,7%	85,7%	85,7%	71,4%	85,7%	71,4%
Section C: Research Design							
Is the chosen study design or methodology suitable for addressing the research objectives?	Y	Y	Y	Y	Y	Y	Y
Does the study demonstrate adequate face validity based on expert or participant evaluation?	N	N	N	N	N	N	N
Is the research methodology described in sufficient detail to permit replication by other researchers?	Y	Y	Y	Y	Y	Y	Y
Did the researchers obtain ethical approval from a recognized ethics committee or institutional review board?	Y	U	U	Y	Y	Y	Y
Are the study outcomes explicitly defined and appropriately linked to the data collection procedures?	Y	Y	Y	Y	Y	Y	Y
SCORE	80%	60%	60%	80%	80%	80%	80%
Section D: Result							
Are the study findings presented clearly and comprehensively?	Y	Y	Y	Y	Y	Y	Y
Have potential confounding variables been identified and adequately controlled in the analysis?	N	Y	Y	Y	U	Y	Y
Do the study's conclusions align appropriately with the data analysis and reported findings?	Y	Y	U	Y	Y	Y	Y
Is the subset analysis presented as a supplementary component rather than the primary focus of the study?	N	Y	Y	N	Y	Y	Y
Does the article offer recommendations or directions for future research?	U	Y	Y	Y	Y	Y	Y
Does the study demonstrate external validity, indicating that its findings can be generalized to broader populations or settings?	U	Y	U	Y	Y	Y	Y
SCORE	33,3%	100%	66,7%	83,3%	83,3%	100%	100%
OVERALL SCORE	56%	84%	76%	88%	84%	88%	88%

*Y=yes; N=no; U=unclear; NA= not applicable

**Study 1. Widyorini, dkk., 2023; Study 2. Yildirim & Belen, 2019; Study 3. Yildirim, 2019; Study 4. Gayton & Lovell, 2012; Study 5. Novak & Ari, 2023; Study 6. Yildirim & Arslan, 2020; Study 7. Chow, dkk, 2018

The analysis of 7 studies using the Sidik-Jonkman estimator, based on correlation scores and valid sample sizes, showed a significant relationship between resilience and flourishing in the context of health ($p < 0.001$).

Resilience was associated with flourishing, with an effect size estimate of 0.513 ($p < 0.001$; 95% CI = 0.376-0.650), indicating a strong effect (see Table 5).

Table 5. Result of Bias Calculation

	Estimate	se	Z	p	CI Lower Bound	CI Upper Bound
Intercept	0.513	0.0697	7.36	<.001	0.377	0.650

Heterogeneity analysis was conducted using Fisher's r-to-z transformed correlation coefficient as the outcome measure. The heterogeneity parameter (Tau²) was estimated using the restricted maximum-likelihood estimator (Viechtbauer, 2005). The Q test for heterogeneity was performed using Cochran's (1954) test, and the I² statistic was also reported. Seven studies were included in the analysis, and the observed Fisher's r-to-z transformed correlation coefficients ranged from 0.2877 to

0.8653, with most estimates being positive (100%). The average results differed significantly from zero ($z = 7.3393$, $p < 0.001$). Based on the Q test, the actual results appeared heterogeneous ($Q = 47.1929$, $p < 0.001$, $\tau^2 = 0.0277$, $I^2 = 87.2807\%$). The 95% prediction interval for the actual results ranged from 0.1595 to 0.8670. Therefore, although there may be some heterogeneity, the actual results of this study generally align with the estimated average results, as presented in Table 6.

Table 6. Heterogeneity Statistics

Tau	Tau ²	I ²	H ²	R ²	df	Q	p
0.166	0.0277 (SE= 0.0195)	87.28%	7.862	.	6.000	47.193	<.001

Based on an effect size of 0.513 ($p < 0.001$; 95% CI = 0.376-0.650), studies on resilience and flourishing provide strong, significant evidence. This aligns with the finding of $r > 0$ from these seven studies. All analyzed studies yielded positive results and demonstrated good effect sizes, particularly in three studies (Yildirim & Belen, 2019; Yildirim, 2019; and Yildirim & Arslan, 2020).

Examination of studentized residuals, as presented in Figure 2, revealed that the study by Novak and Ari (2023) had values greater than ± 2.6901 and may be an outlier in this model. According to Cook's distance theory, the study by Novak and Ari (2023) could be considered overly influential.

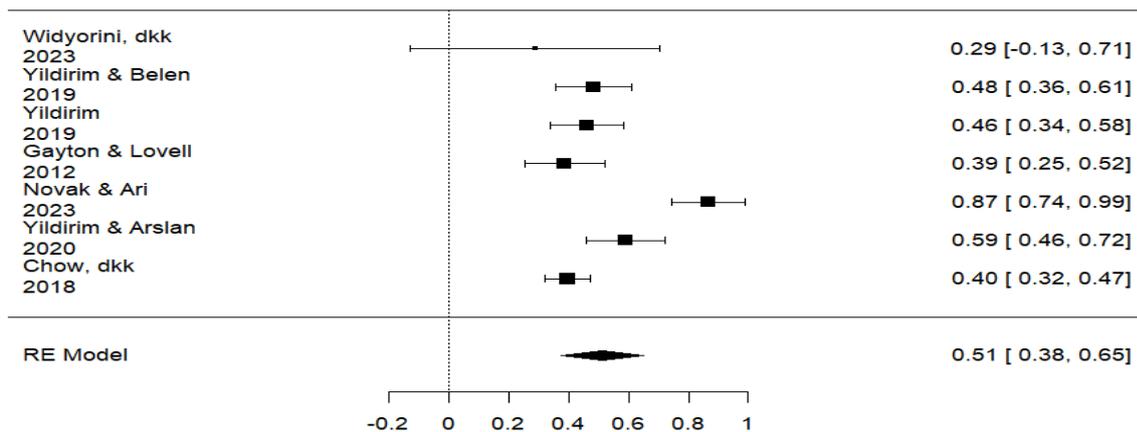


Figure 2. Forest Plot

Based on Figure 2, both the rank correlation and regression tests show no evidence of funnel plot asymmetry ($p = 1.00$ and 0.5028, respectively). This suggests that biases may

still persist in the research, possibly due to differences in data, collection procedures, standards, study design quality, or unpublished results.

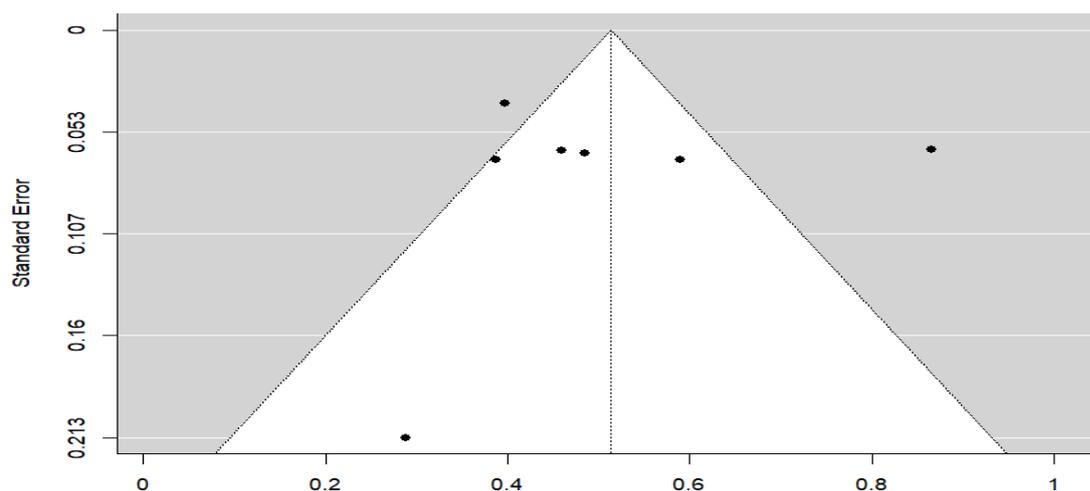


Figure 3. Funnel Plot

Discussion

The results of this study answered the hypotheses formulated beforehand, namely that resilience affects flourishing among patients and healthcare professionals. This study also assesses the consistency and magnitude of the effect between resilience and flourishing within the context of health. The findings from the seven analyzed studies can be qualitatively explained based on their quality assessments. One study, in particular, stands out with the lowest quality score of 56%, characterized by a wide confidence interval (CI) and a broad effect size: the study by Widyorini et al. (2023). This study focused on measuring the relationship between resilience and flourishing, both directly and indirectly through the mediator of fear, among 96 COVID-19 survivors with comorbidities aged 17 to 60 years. The study should consider refining the sample population specifications to reduce the excessively wide CI range. Furthermore, a larger sample size is necessary to generalize the results to a specific population. However, the relationship between these two variables is not entirely consistent across studies, as indicated by the forest and funnel plots, which exhibit heterogeneous and asymmetric patterns.

In contrast, three studies were identified as high-quality, with consistent findings across them: Yildirim and Belen (2019), Yildirim and Arslan (2020), and Chow et al. (2018). These studies received high scores across all assessed aspects—population, data collection, study design, and results—each with a total score exceeding 80%. However, Yildirim and Belen (2019) failed to provide clear inclusion criteria for their sample population and did not report ethical approval for the study. Similarly, Yildirim and Arslan (2020) did not offer detailed information regarding the population and sample criteria. Additionally, Chow et al. (2018) did not include the scale questions or responses used in their study.

The findings also indicate that one study, by Novak and Ari (2023), exhibits extreme data, with an effect size estimate approaching 1. This suggests that the study may be highly influential but could potentially contain invalid data. Despite this, the study scored well across population, data collection, study design, and results, with a total score of 84%. However, this study should specify the scale's validity and provide scores for the common variable.

According to the findings of the analyzed studies, two report effect size estimates within the moderate range: Yildirim (2019) and Gayton and Lovell (2012). Both studies also received high-quality scores, exceeding 75% in population, data collection, study design, and results. However, Yildirim's study (2019) lacks clear explanations regarding the sample criteria, does not provide clear ethical approval, presents conclusions that do not fully reflect the analysis results, and suffers from limited external validity. In contrast, Gayton and Lovell (2012) adequately describe the necessary components, though their analysis is primarily restricted to broad discussions and lacks detailed insights.

In general, resilience is positively and significantly associated with flourishing, although the study results still show non-homogeneous and asymmetric patterns. Three studies that exhibit minimal bias and can be considered reliable reference points are those by Yildirim and Belen (2019), Yildirim and Arslan (2020), and Chow et al. (2018). Conversely, three other studies—those by Yildirim (2019), Gayton and Lovell (2012), and Widyorini et al. (2023)—may exhibit significant biases in their analyses and quality, including factors such as the population, study design, data collection, and reported outcomes. Additionally, the meta-analysis results indicate that one study may contain outliers, suggesting unusual extreme data compared to the other studies.

An individual's health is influenced not only by biological factors but also by psychological and social factors (Engel, 1977). One psychological factor that promotes psychological well-being is resilience. According to Huppert and So (2011), individuals who demonstrate resilience in overcoming obstacles and moving forward without dwelling on the past are characteristic of flourishing individuals. Moreover, the resilience mechanism in fostering flourishing plays a significant role in supporting subjective well-being and psychological health, both directly and as a mediator of positive factors, such as hope and preventive behaviors. Resilience is also identified as a key promoter of positive aspects that sustain individuals' mental and physical health, particularly in relation to self-functioning, positive adaptation, autonomy, environmental mastery, and self-growth—all of which are associated with flourishing. Based on the meta-analysis, resilience was found to have a strong,

positive relationship with flourishing in the context of health. These findings provide a solid foundation for further research on growth and resilience in the health context, offering valid, unbiased evidence.

Recommendation

In conclusion, flourishing is closely linked to an individual's ability to bounce back from adversity, a characteristic that aligns with resilience. Individuals who can overcome challenges and continue with their lives are often described as resilient. This study highlights a strong positive relationship between resilience and flourishing within the context of health. However, several challenges were encountered during the research process, including a limited time frame and issues with data readability when utilizing artificial intelligence tools during the article selection phase. These challenges resulted in a less targeted search, which did not exclusively identify studies focused on patients with health-related issues. Given these limitations, future research could further explore resilience

and flourishing among individuals with health problems, while considering the inclusion of mediator or moderator variables to provide a more nuanced understanding of these relationships in the context of health.

Declarations

Conflict of Interest

The authors have declared that no competing interests exist.

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