# Optimism and Pessimism

# Aims of the Lecture

- Provide a definition of optimism and pessimism.
- To discuss why study optimism / pessimism in relation to individual differences.
- To discuss issues with some of the existing studies research optimism in specific settings.

# Aims of the Lecture

- To discuss coping strategies adopted by optimists and pessimists.
- To look into the research exploring optimism / pessimism and promoting health and well being.
- To ask is it possible to change pessimistic people into optimists?

# What are optimism and pessimism?

- Optimism has been defined as

  “to believe that good rather than bad will happen”…. When a goal is of sufficient value then the individual would produce an expectancy about attaining that goal

  (Scheier and Carver, 1985).

- Pessimism: to expect bad things to happen

  (Carver and Scheier, 2005)

# Why research this?

- Health consequences (Maruta, 2000).
- Longitudinal Study.
- Measured Optimism and Pessimism traits in 1,100 patients between 1962-1965.
- 30 years later… those classified as optimists recorded as having a 19% higher chance of still being alive compared to pessimists.

# Optimism

- Early theorists argued that optimism is considered to be a psychological deficit
  - Sign of weakness of character
  - Suggested that we should have a balanced, even handed appraisal of our futures.
  - Freud – Religion = Optimistic illusion (denial)
    - This was the belief of some psychologists until the 1970s.

# Optimism Research

- Cognitive Psychology
- Matlin and Stang (1978) – People whose thinking is optimistic.
  - More able to recall positive things sooner than negative things.
  - Viewed themselves more positively than others.
- People with anxiety and depression
  - Recall negative information more quickly
  - View themselves more negatively

# Optimism and Individual Differences Research

- Optimism and Subjective Well-Being.
- When people confront adversity or difficulty - experience a range or emotions.
  - E.g. Eagerness, Anxiety, Anger, Confusion etc.
- The balance among these feelings appears to relate to people’s degree of optimism or pessimism (Carver and Scheier, 2005).
  - E.g. Mediates the persons emotional response.

# Existing Research into Optimism

- Relationships between optimism and distress have been examined in a wide range of areas.
- E.g.  Aspinwall and Taylor (1992) – Longitudinal study into experiences of students entering college
    - Direct beneficial effect between optimism and adjustment to college life.

# Other research into optimism

- Employees of business and coping styles (Long 1993).
- Survivors of missile attacks (Zeidner and Hammer, 1992).
- Carers and coping strategies (Given et al, 1993; Hooker et al, 1993).
- All of these studies have highlighted how optimistic individuals utilise more effective coping strategies experience less negative emotions (e.g. distress).

# Research issues to consider

Including:

1. A large number of these type of studies only measure the emotional responses once after the event.

- Emotions are transient in nature.
  - So could it be the timing of when the measurement scales were utilised to collect the data.

# Research issues to consider

2. Studies have highlighted that pessimists experience more distress **after** the traumatic event

   But what about their state of mind **before** the event?

   - Cannot determine that.

# Optimism and Post Natal Depression

- Carver and Gaines (1987): Quantitative (Scales) methods to measure
  - Last trimester - depression and optimism
  - 3 weeks after birth - depression scale.
- Findings
  - Optimism related to lower depression in initial assessment.
  - Optimism predicted lower levels of depression post birth.
  - Optimism offers a resistance to the development of depressive symptoms.

# Optimism and Coping Strategies after major surgery

- Scheier et al (1989): Men undergoing and recovering from coronary artery bypass surgery.

- Assessed optimism levels at three stages:
  - Day before surgery
  - A week after.
  - 6 months after surgery.

# Findings

- **Before surgery** – optimists reported less hostility and depression than pessimists.
- **1 week after** – optimists reported more happiness, relief, satisfaction (with medical care and friendship network) than pessimists.
- **6 months after** – optimists reported greater quality of life than pessimists.
- **5 years after** – optimists reported greater well being and quality of life than pessimists.

# Optimism, Pessimism and Coping

- **Why** do optimists experience less distress than pessimists in dealing with difficulties in their lives?
- Do optimists do anything in particular to cope that helps them adapt better?
- Differences in coping strategies have been the focus of a number of studies.

# Optimism, Pessimism and Coping

- Scheier et al (1986): Asked students to recall the most stressful event that had happened to them during the last month.
- Completed a checklist of coping responses in relation to the event.
- Students higher in optimism used more problem-focused coping strategies.

# Optimism, Pessimism and Coping

- Scheier et al (1986).
- Optimists also used more positive reframing.
  - When the situation was seen as uncontrollable.
- Optimism was negatively related to the use of denial and the attempt to distance oneself from the problem.

# Positive Reframing

- A technique by which a person learns to stop his or her negative thought process and replace the negative thoughts with more positive self-talk.

- E.g.
  - Negative Outlook – Picky
  - Positive Reframe – Attention to Detail.

  - Negative Outlook – Bossy
  - Positive Reframe – A leader

- Scheier et al (1986)
- Optimists also used more positive reframing when the situation was seen as uncontrollable
- Optimism was negatively related to the use of denial and the attempt to distance oneself from the problem

# Therefore.....

- Optimists use more **problem-centred coping** than pessimists.
- Also use **emotional focused coping** when situation is uncontrollable.
  - Working to accept the reality of the new situation.
  - Putting the situation in the best possible light.
  - Distinct coping advantage – in situations that they can AND cannot change

(Carver and Scheier, 2005)

- Pessimists on the other hand tend to disengage from the goals (Carver et al, 1989).
- Fontaine et al (1993) – Denial is a key coping strategy used by Pessimists.
- Substance misuse as a coping aid.

# So…

- Studies have highlighted the mediating effect of optimism and coping relating to specific situations.
  - E.g. Aspinwall and Taylor (1992) – student adjusting to college life.
    - Optimists engaged in active (problem focused) coping.
    - Pessimists – engage in avoidance coping.

# All ages

- It appears that optimists differ from pessimists in both
  - Stable coping tendencies
  - When confronting a specific stressful situation
- Use more problem focused coping when possible.
  - When not possible – use strategies such as acceptance, humour, positive reframing.

# Promoting healthy behaviours

## (no health concerns or “at risk” groups)

- Steptoe et al (1994) – Young adults
  - Optimists more aware and more engaging in healthy behaviours.
  - Impact on performance in a variety of fields (Academic, Sporting etc).
- Robbins et al (1991) – General Well being and “healthy behaviours”.
  - Optimists report high levels of health promoting behaviours

# Pessimism and Health Defeating Behaviours

- Theory suggests that pessimists are less likely to make efforts to ensure their well being (Carver and Scheier, 2005).

- Engage in behaviours that reflect a tendency to give up…
  - Avoidance
  - Denial.

# Pessimists and healthy behaviours

- Substance misuse can be used as a secondary gain in order to find reasoning for people's non-proactive responses to stress.
  - "I couldn't help I said that, I was drunk".
  - "I can't help I am alcoholic.  It is a disease"
- Exterior locus of control

# Substance misuse and pessimism

Strack, Carver and Blaney, (1987): People treated for Alcohol abuse – entering aftercare.

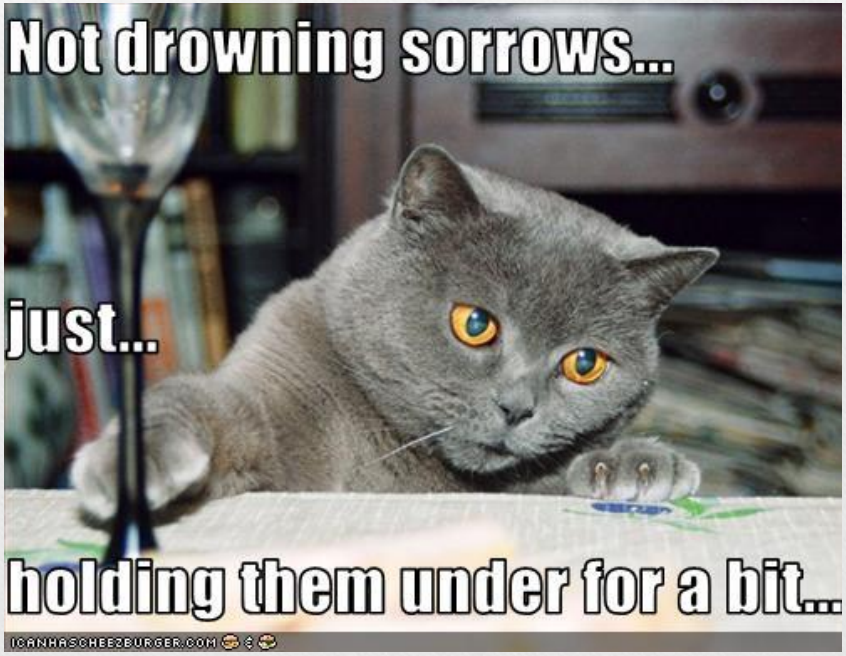
- Pessimists more likely to drop out than optimists.
- Pessimists more likely to turn back to drink.

Park et al (1997): Examined substance misuse among pregnant women.

- Optimists less likely than pessimists to engage in substance misuse during pregnancy.
  - Group of similar Socio-Economic and Cultural Background.

# Explanations for this?

- Alcohol consumption dulls awareness of failures and perceived failures
- It can have a distracting quality… avoidance - leading to denial?
- Escaping from reality



# Suicide and Pessimism

- Beck et al (1985, cited in Khan et al 2014).
- Pessimism is one of the strongest predictors of suicide.
- Stronger predictor than depression.
- Ultimate disengagement from life (Beck et al, 1995 cited in Khan et al 2014).

# Is optimism always better than pessimism?

- Very little evidence to suggest that optimists are ever worse off than pessimists.
- Exceptions – unrealistic optimists
- However – several theorists have hypothesised that in some situations optimism is damaging
  - (e.g. Tennen and Affleck, 1987; Schwazer, 1994)
    - Ignoring of a threat until its too late.

# Is optimism always better than pessimism?

- Goodman, Chesney and Tipton (1995): Extent to which adolescent girls at risk of HIV infection sought out information about HIV testing.
- Those in higher optimism group were less likely to seek out relevant information.
- Less likely to follow through with the test.

# Can pessimists become optimists?

- Easier said than done…
- Twin studies have suggested that there is a genetic pre-disposition in whether we are optimists or pessimists (Plomin et al, 1992, Mosing et al 2009).
- Is optimism itself heritable or is the link due to other aspects of temperament?
  - e.g. Neuroticism or Extraversion.

# Can pessimists become optimists?

- Early childhood experiences also influence people's outlook on life.

- Erikson (1968) – 8 Stages of Man.
  - Stage 1 – Trust vs. Mistrust.
    - Young infants who experience the social world as predictable - Basic Trust.
    - Young infants who experience the social world as unpredictable - Basic Mistrust.

# Developmental Psychology and Optimism

- Attachment Theory (Bowlby, 1988) and related theories.
- Insecurity in childhood can lead to adult insecurities and feelings of pessimism.
- Suggests that our early childhood experiences have a major influence on whether we will become optimists or pessimists.

- Genetic factors (nature)
- Early childhood experiences (nurture)

- Is the development of optimism or pessimism largely determined by elements out of our control?
- Is a pessimistic or optimistic outlook permanent?

- Or can pessimism be changed?

# Can pessimism be changed?

- Potentially

- However, questions remain:
  - how large a change can be expected?
  - how permanent will the change be?

(Carver and Scheier, 2005)

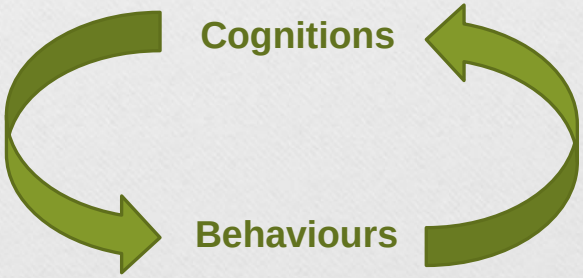
- Also, can learned (or induced) optimism have the same beneficial effects as ‘natural’ optimism?

(Carver and Scheier, 2005).

# How might change be induced?

1. **Cognitive Behavioural Therapy**: Aims to…

- Challenge maladaptive/negative cognitions
  - e.g. hopelessness, expectations of negative outcomes, beliefs of low self-efficacy
- Change these cognitions for adaptive/positive ones
  - e.g. empowerment, Self- Efficacy, effective application of goals
- Circularity



# CBT and Optimism

- Beck (1967): early application of CBT – designed to treat mental health issues such as depression and anxiety
  - Believed depression and anxiety linked to unrealistic pessimistic thoughts
    - Unduly negative thoughts (I can’t do anything right).
      - Negative affect
      - Prevent achievement of goals

# CBT and Optimism

- CBT - to change these negative cognitions into more positive thoughts to reduce distress and renew effort.
- How?
- Many different approaches to CBT.
  - One method: emphasis on close attention to experiences
    - Heighten awareness of, and ability to identify negative thoughts and automatic (negative) thoughts.
    - Identify points where distress arises
    - Identify the related thoughts/cognitions

# Personal efficacy training

- Focus:  to increase specific kinds of competence
  - e.g. social skills training, problem solving skills, setting appropriate and obtainable goals.
  - Can address a more general sense of pessimism

# However…

- Sometimes pessimism is due to unrealistically high aspirations
- CBT for this type of pessimism may not be appropriate.
- Alternative focus: identify realistic goals/targets is key
  - Relinquish previous goals
  - Readjust expectations
  - Reduces pressure
  - Reduces likelihood of failure (as this reinforces negative cognitions)

# Situational Optimism/Pessimism

- Support for concept of **dispositional** optimism/pessimism
- **Situational** optimism?
- Maltby et al (2010):
  - Positive beliefs about certain events or specific areas of our lives.

# Situational Optimism

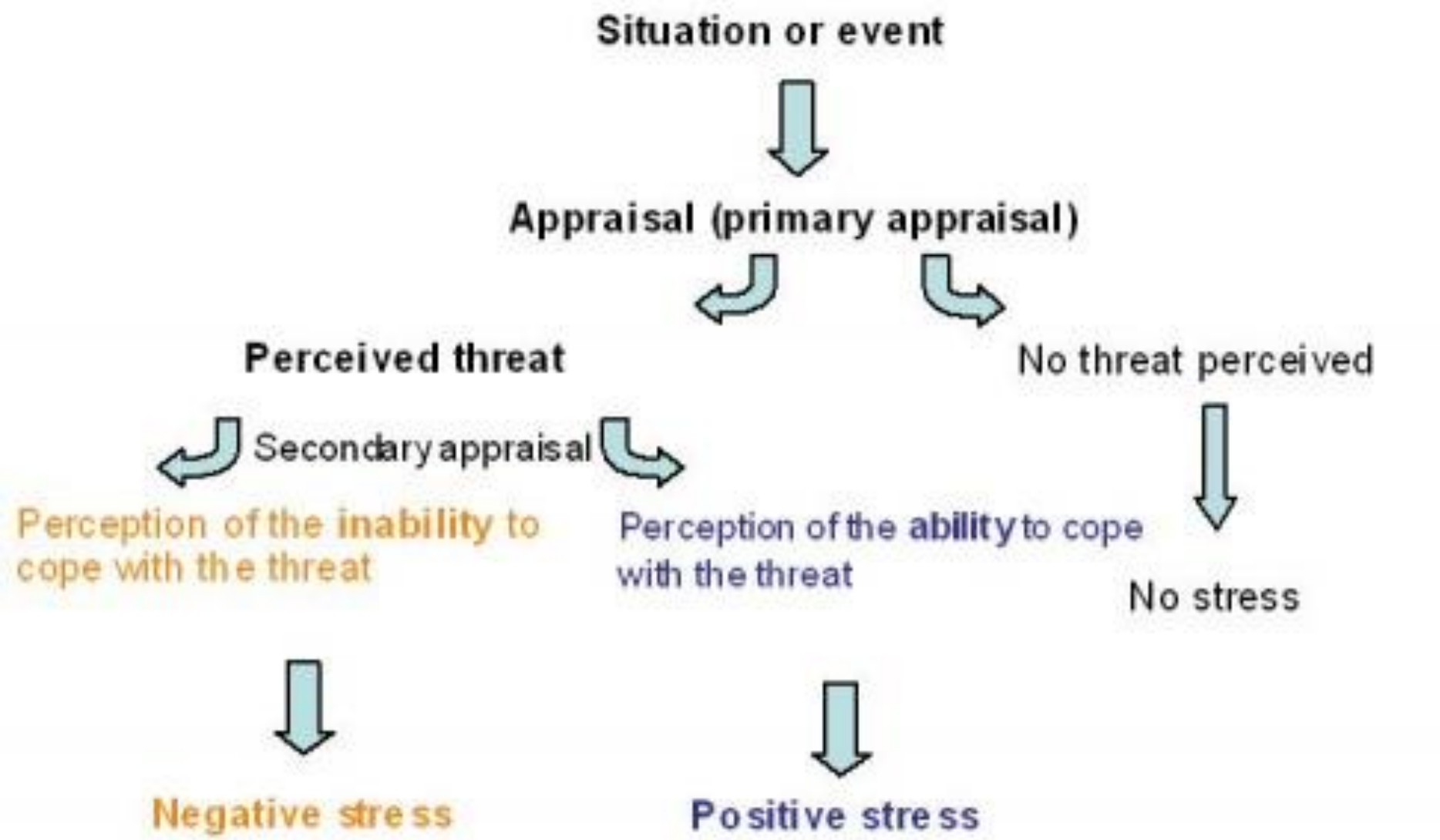
- Relatively new research focus

  Suggests that individuals with high optimism scores linked to specific events…

  (but not necessarily highly optimistic in general)

  …can result in problem solving coping strategies and health benefits (e.g. Segestrom et al, 1998).

- But - most of the quantitative measures have been validated as trait measures of optimism




*Lazarus, S. Folkman, 1984*

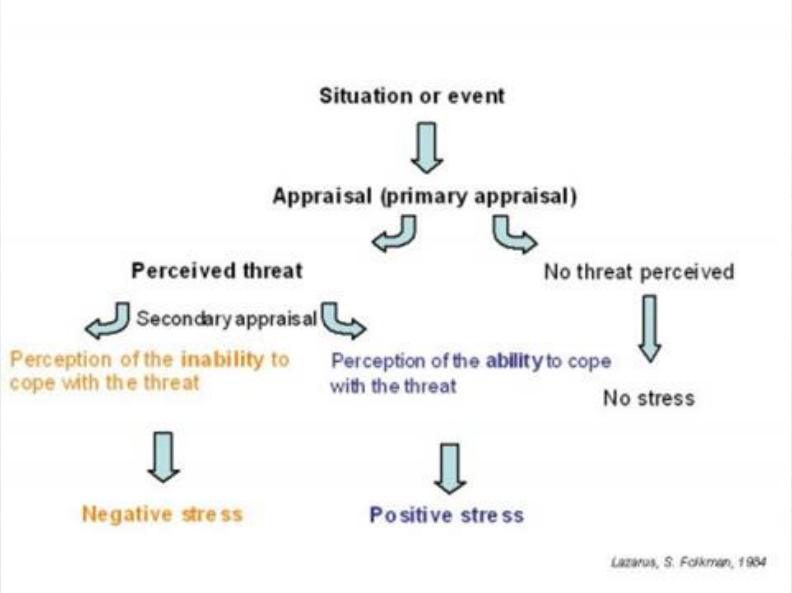
# What influences cognitive appraisal?

"The worst stress situation is one where there are high demands and the person attributes a lack of control to the task." (Hancock and Warm, 2003).

- Control:
  - Previous experience
  - Personality
  - Confidence
  - Knowledge
  - Support from others

# Optimism

- Previous experience
- Personality
- Confidence
- Knowledge
- Support from others




- All feed into our level of optimism

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