

Optimism in Relation to Well-being, Resilience, and Perceived Stress

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Abstract:

The purpose of the study was to explore the relationships between optimism, well-being, resilience and perceived stress among undergraduates. The sample consists of 181 students (77 male and 104 female) within age range of 18 to 25 years. Perceived Stress Scale (PSS, Cohen, Kamarck, & Mermelstein, 1983), Warwick Edinburgh Mental Well-being Scale (WEMWBS, Tennant et al., 2007), Optimism/Pessimism Instrument (OPI, Dember, Martin, Hummer, Howe, & Melton, 1989) and Resilience Scale (Wagnild & Young, 1993) were administered to all the respondents. The data were analysed by using descriptive statistics i.e. mean and SD, Pearson product moment correlation and step wise multiple regression. The results revealed optimism to have a significant positive relationship with well-being and resilience. Well-being was found to be significantly positively correlated with resilience. The step wise regression analysis found that resilience is a predictor of well-being.

Keywords: Optimism, Perceived Stress, Resilience and Well-being

I. INTRODUCTION

Dispositional optimism can be defined as the generalized expectancy for positive outcomes. Optimism and pessimism reflect confidence versus doubt, not regarding a specific situation but regarding life in general. Dember, Martin, Hummer, Howe and Melton (1989) have reported a broader definition of dispositional optimism as having a positive outlook on life, as measured by the Optimism Pessimism Instrument (OPI). Perceived stress may be one of the factors that contribute in optimism. It refers to interactions between an environmental factor (external stress); the physiological reactions of the body (distress); and a person's cognitive, emotional, and behavioural response to this interaction. Stress is perceived when an external event causes aversive physiological and cognitive distress in an individual that exceeds his or her emotional and behavioural repertoire designed to negate the harmful effects of external stressors. There are numerous studies that indicate a relationship between optimism and perceived stress. Radloff (1977) reported that optimism was negatively correlated with perceived stress. Scheier and Carver (1985) found that optimism had a negative relationship with perceived stress. Kurdek and Siesky (1990) found a significant moderately high negative correlation between optimism and psychological distress, and negative moderate correlation between optimism and death anxiety. Their results also indicated the relationship between psychological distress and death anxiety to be positive. In a study Aspinwall and Taylor (1992) assessed self-esteem, locus of control, optimism, desire for control, mood, and preferred ways of coping on first year college students. The study revealed optimism levels were associated with lower levels of psychological distress. The study also found that optimists preferred more active coping methods and were less likely to use avoidance

coping. Active coping was associated positively with adjustment whereas avoidance coping was negatively associated with adjustment. They concluded that optimism, through coping, significantly affects adjustment as well as psychological well-being. Scheier and Carver (1992) revealed that optimistic college students experienced less stress adapting to college life than pessimistic college students. Sitz and Poche (2002) investigated the relationship between optimism and perceived stress. They found that females would exhibit higher levels of optimism and also lower levels of perceived stress. However, there was not a strong relationship between gender and optimism or perceived stress. Carver and Connor-Smith (2010) reported in a study the associations of optimism with coping differed fairly substantially across academic, trauma related, and health-related stressors. Optimism was more strongly linked to problem-focused engagement for academic and health stressors than for the less controllable trauma-related stressors. In contrast, optimism related more strongly to emotion-focused engagement for traumatic and health stressors, which are more severe and less controllable than academic stressors. Shearman and colleagues (2011) conducted a study to compare collegiate athletes and non athletes and gender on optimism and life stress. Result indicated that high-level optimistic athletes experienced significantly lower levels of life stress than high-level optimistic non-athletes. Result also revealed that high-level optimistic men would experience significantly lower levels of life stress than high-level optimistic women.

Resilience refers to having the capacity to bounce back from adversity, failure or even seeming overwhelming positive changes such as increased responsibility. Masten and Obradovic (2006, p. 14) define "resilience is a broad

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conceptual umbrella, covering many concepts related to positive patterns of adaptation in context of adversity.” Others reported resilience as the ability to adapt and cope successfully despite threatening or challenging situations (Agaibi & Wilson, 2005). There are number of studies that reveal relationship between resilience and optimism. Seligman (1991) has proposed that optimists are resilient and therefore, achieve success in life. They have better health and may even live longer. Klohnen (1996) reported that resilient individuals have an optimistic, zestful and energetic approach to life, are curious and open to new experiences, and are characterized by high positive emotionality. Resilience comes from how optimists explain adversity to themselves. This, in turn, makes them emerge strongly in life. Youssef and Luthans (2007) investigated the impact of hope, optimism and resilience in the workplace. Study found significant positive relationships between hope, optimism and resilience and employees' job satisfaction and work happiness. Utsey, Hook, Fischer, and Belvet (2008) investigated the cultural orientation, ego resilience, optimism, and subjective well-being in the college students. They found ego resilience positively correlated with optimism, and religiosity and racial pride positively predicted psychological functioning and well-being. Baldwin, Jackson, Okon, and Cannon (2011) examined psychological resources (of ego resilience and dispositional optimism) and found that geographical location and resilience was negatively correlated with distress, and positively correlated with optimism. Dispositional optimism was negatively correlated with levels of psychological distress. African American seniors who resided in the north reported significantly less distress than those in the south. They further reported that resiliency and optimism buffer stress among older African-Americans. Carr (2012) examined the role of family and marital communication in understanding resilience to family of origin adversity included 201 married individuals. Results indicated that optimism was positively correlated with resilience. It was also found that individuals' family functioning was the strongest predictor of resilience, such that individuals from families characterized by a balance between cohesion and flexibility, open communication, and an overall sense of satisfaction with the family were most resilient. Dawson and Pooley (2013) examined resilience and role of optimism in first year university students during two semesters. The results indicated that students with higher levels of optimism experienced higher levels of resilience. Multiple regression analysis indicated optimism independently and significantly predicted resilience among students.

Well-being can be defined in terms of physical, mental and emotional health of an individual. It enables an individual to thrive and flourish. According to Gough and McGregor (2007) well-being is something that people are notionally able to do and to be, and what they have actually been able to do and to be. It is also not merely the absence of illness or pathology. Optimism is one of the potent factors related to well-being. Chamberlain, Petrie, and Azaria, (1992) found that life-satisfaction and wellbeing were positively associated with optimism among pre-surgical patients. Optimism was positively correlated with life satisfaction and positive well-being. The result also revealed that optimism was negatively correlated with psychological distress and

pain among pre- surgical and postsurgical patients. Peterson (2000) studied optimism as an inherent aspect of human nature, and showed that optimism is highly beneficial, and is linked to good mood, perseverance, achievement, and physical health. Leung, Moneta, and Chang (2005) reported in a study of community dwelling Chinese 117 elderly living in Hong Kong. Results revealed that optimism was positively correlated with health status. It was also found that optimism was a predictor of health status. They claimed that optimism is a key contributor to subjective well-being because it fosters self-esteem, relationship harmony, and positive perceptions of financial conditions. Ciarrocchi and Deneke (2006) conducted a study with a sample of 255 adults. Study included five factors of personality, state hope, dispositional optimism, and spirituality, along with cognitive and affective dimensions of subjective well-being. Results revealed positive correlation between optimism and subjective well being. Hope predicted all three dimensions of subjective well-being over and above personality, bipolar optimism, and spirituality. Pessimism predicted negative affect while both optimism and spirituality predicted positive affect when controlling for age, gender, personality, and the other study variables. Fotiadou, Barlow, Powell, and Langton (2008) examined the relationship between optimism, anxiety, depression, life satisfaction, coping and subjective health perception in parents of children with cancer and parents of healthy children. It was found that parents of children with cancer had higher levels of anxiety, depression, optimism, satisfaction with life and subjective health perception than the comparison group. Optimism was significantly correlated with satisfaction with life, subjective health perception, anxiety and depression in both groups. Matthews and Cook (2009) investigated the relationship between optimism and emotional well-being and the individual and combined mediation of this relationship by perceived social support, problem focused coping, and self-transcendence in 93 women with breast cancer during radiation therapy. Results revealed that optimism was positively related to Emotional Well Being. Results also indicated that self-transcendence was found to partially mediate the relationship between optimism and Emotional Well Being.

There are ample research studies that reveal the relationship among these variables in the Indian context. Singh and Mansi (2009) conducted a study with a sample of 250 students having age range from 18 to 25. They found that positive Self-efficacy, optimistic attitude and locus of control affect the well being in a meaning full way. Results also found that well being was negatively and significantly correlated with optimism. Mittal and Mathur (2011) investigated optimism, life satisfaction, and psychological well being among 80 corporate professionals within age range of 20 to 30 years from upper middle socio economic status. It was found that corporate professionals scored average and high on the scales of learned optimism and life satisfaction which in turn resulted into psychological well-being even in the time of recession. Results also indicated that life satisfaction and learned optimism are positively and significantly correlated to psychological well-being. Sood, Bakhshi, and Devi (2013) examined the level of perceived stress, resilience and mental health of adolescents living at international border in Jammu and Kashmir (India). Sample consisted of

100 adolescents within age range from 13-18 years. Results indicated that there was negative correlation between perceived stress and mental health. Resilience and mental health was positively significantly related with each others. Results also indicated that the resilience was non-significantly related to perceived stress.

II. PRESENT STUDY

In the current study, an attempt has been made to examine the relationship between optimism, well-being, resilience, and perceived stress. In addition, the predictive effect of resilience on well-being has also been studied.

III. HYPOTHESIS

- Optimism will have a positive relation with well-being.
- There will be positive relationship between optimism and resilience.
- There is relationship between optimism and stress.
- There will be positive relationship between resilience and well-being

IV. METHOD

Sample:

The sample consists of 181 undergraduates students (77 male and 104 female). Their age ranged between 18 to 25 years. The sample was selected from Karnal, a district of Haryana.

V. MEASURES

The following psychometric tools were used for the collection of data in the present investigation.

Perceived Stress Scale (PSS, Cohen, Kamarck, & Mermelstein, 1983): The PSS is a 10-item measure designed to assess the degree to which individuals perceive their lives as stressful. Respondents rate each item on a 5-point Likert-type scale ranging from 0 (Never) to 4 (Very Often). Higher scores indicate greater perceptions of life stress; lower scores reflect lower perceptions of stress. The PSS showed adequate coefficient alphas (.84 and .85 for two college samples; Cohen et al., 1983); The PSS has been positively correlated with life-event scores, depressive and physical symptomatology, social anxiety, and maladaptive health-related behaviours (e.g., increased smoking; Cohen, Sherrod, & Clark, 1986). These pieces of evidence indicate the construct and concurrent validity of the PSS.

Warwick – Edinburgh Mental Well being Scale (WEMWBS, Tennant et al., 2007): The present scale consists of 14 items with response patterns of 5 point likert scale ranging from 1 (None of the time) to 5 (All of the time). WEMWBS showed good reliability and validity. Cronbach's alpha score of 0.89 (student sample) and 0.91 (population sample). WEMWBS showed high correlations with other mental health and well-being scales and lower correlations with scales measuring overall health. Its distribution was near normal and the scale did not show ceiling effects in a population sample. It discriminated between population groups in a way that is largely consistent with the results of

other population surveys. Test-retest reliability at one week was high (0.83). Social desirability bias was lower or similar to that of other comparable scales (Tennant et al., 2007).

Optimism/Pessimism Instrument (OPI, Dember, Martin, Hummer, Howe, & Melton, 1989): It provides two scores, one for optimism and one for pessimism, each scale consisting of 18 items with 20 filler items for a total of 56 items on the scale. Items are rated on a scale of 1 (Strongly agree) to 4 (Strongly disagree). Dember and Brooks (1989) found reasonable test-retest reliability at 2-weeks which was .75 for the optimism scale and .84 for the pessimism scale.

Resilience Scale (Wagnild & Young, 1993): Resilience scale consisted of 25 item with 7 point likert response format ranging from 1 (Strongly Disagree) to 7 (Strongly Agree). All the items are positive worded and show an overall resilience score. Cronbach's alpha coefficients ranged from .72 to .94 supporting the internal consistency reliability and construct validity of the resilience scale reported by Wagnild (2009).

VI. PROCEDURE

After establishing rapport and providing proper instruction, above mentioned psychometric devices were administered on target sample for obtaining the data. The answered questionnaires were collected and scored as per manual. The scores were statistically analyzed using SPSS 10.0 version. Analysis was conducted for descriptives, correlation analyses and regression prediction.

VII. RESULTS

The present investigation was conducted to study optimism, well-being, resilience and perceived stress. The obtained data were analysed by applying descriptive statistics i.e. mean and SD, and Pearson's Product Moment method of correlation. Regression analysis was conducted with resilience as the predictor variable and well-being as the dependent variable. Descriptive results revealed that participants scored moderately on the measures of optimism, ($M=54.85$, $SD=6.11$) from a maximum of 72, well-being, ($M=48.54$, $SD=8.48$) from a maximum of 70, resilience, ($M=127.05$, $SD=19.27$) from a maximum of 182, perceived stress, ($M=18.28$, $SD=5.97$) from a maximum of 40, and pessimism, ($M=44.80$, $SD=6.56$) from a maximum of 72 (refer Table 1). The results of all these analyses are described as under

Table 1 Inter-correlation Matrix and Descriptive Statistics

	Optimism	Well-being	Resilience	Perceived stress	Pessimism
Optimism	1	.23**	.40**	-.05	.29**
Well-being		1	.46**	-.13	.11
Resilience			1	-.01	.13
Perceived stress				1	-.01
Pessimism					1
Mean	54.85	48.54	127.05	18.28	44.80
SD	6.11	8.48	19.27	5.97	6.56

Note: * $p < .05$, ** $p < .01$

Table 1 shows the correlation between optimism, well-being, resilience and perceived stress among youth. Relationship between optimism and well-being is found to be positive with

a correlation coefficient of .23 which is significant at .01 levels. Optimism is found to be positively correlated with resilience with a correlation coefficient of .40 which is significant at .01 levels. The correlation between optimism and perceived stress is found to be negative (-.05) which is non-significant. Relationship between well-being and resilience is found to be positive. The correlation coefficient between the two variables is .46 which is significant at .01 levels.

The relationship between well-being and perceived stress is found to be negative with a notable correlation coefficient (-.13) which is non-significant. Relationship between well-being and pessimism is found to be positive (.11) which is non-significant. The variable resilience is found to be negatively non-significantly correlated with perceived stress (-.01). Resilience is found to be positively correlated with pessimism with a correlation coefficient of .13 which is non-significant at both levels of significance. The correlation between perceived stress and pessimism is found to be negative (-.01) which is non-significant.

Table – 2 Stepwise Regression Analyses (Dependent Variable, Well-Being)

S. No.	Variable	R	R ²	Std. Error of estimate	Standardized Coefficients	F	P Significant
1.	Resilience	.46	.214	7.54	.463	48.79	.001

Table 2 shows the results of stepwise regression analysis. The predictor measure of resilience accounts for 21% of variance in well-being. (R =.46, R²= .21). F value is equal to 48.79 which is significant at .001 level. It may be interpreted that variable resilience appropriately predicts well-being.

VIII. DISCUSSION

The outcomes from this study showed that, optimism has a significant positive relationship with well being. Therefore hypothesis 1 regarding the positive relationship between optimism and well-being is accepted. It may be interpreted that higher the optimistic level in students higher will be the level of well-being. These results are consistent with the conclusion of Peterson and Bossio (2002), as they indicated that most relevant studies report a .20 to .30 correlation coefficient between optimism and good health. Ho, Cheung, and Cheung (2010) examined the relationship between meaning in life, optimism and well-being among 1807 adolescents. Results showed that both meaning in life and optimism significantly associated with well being. Optimism also served as a partial mediator in the relationships between meaning in life and both positive and negative aspects of well-being.

The current study indicated that the relationship between optimism and resilience found to be positively significant. It means that people with high resilience scored high on optimism. Thus hypothesis 2 stating a positive relation between optimism and resilience is accepted and proved here. Resilience and optimism are positive aspects of healthy life. Similar finding has also been observed in another study. Fallon (2010) investigated the relationship between the academic optimism of schools and academic resilience in urban Latino high school students. Result showed that significant positive relationships between academic optimism of schools and academic resilience of students.

Optimism was found to be negatively non-significantly correlated with perceived stress. Thus the hypothesis 3 that stated that there is relationship between optimism and perceived stress is rejected here. Previous study revealed a significant negative association between optimism levels and life stress in an adult population (Chang & Sanna, 2003).

In addition, present findings indicate that resilience correlates significantly positively with well-being. It indicated that higher the resilience higher will be the well-being. Hypothesis 4 regarding the resilience and well-being is true therefore it is accepted here. This present finding is consistent with Momeni, Karami, and Rad (2013), who demonstrated relationship between spirituality, resiliency and coping strategies on one hand with students' psychological well-being in Razi University of Kermanshah. There was a positive relationship between resiliency, spirituality and problem-oriented strategy factors with well-being.

Result also found that resilience accounts for 21 % of variance in wellbeing. So the present study conclude that resilience is a good predictors of wellbeing therefore we can't ignore its contribution in person's wellbeing. Current findings are similar with the finding of Souri and Hasanirad (2011), as they examined the relationships between resilience, optimism and psychological well-being among medicine students. It was found that resilience is able to predict psychological well-being, and optimism played a minor mediation role in the relationship between resilience and psychological well-being. The current study concluded that psychological well-being is influenced by resilience and optimism. The goals of present study were to add to the existing body of literature for optimism to health related behaviour. Results would serve as a guide for future research.

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