Relations between coping responses and optimism–pessimism in predicting anticipatory psychological distress in surgical breast cancer patients

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Abstract

Individual differences in characteristics such as optimism, pessimism, and coping responses have been shown to contribute to variability in distress during stressful situations. However, the interrelationships among these characteristics are not well established. The purpose of this study was to investigate the interrelations among optimism, pessimism, and coping in predicting distress levels among patients scheduled for surgery related to breast cancer. Sixty surgical patients (mean age = 52; SD = 12.21) completed the Brief Cope and the Life Orientation Test as a part of a presurgery take-home packet. Distress was measured with the Profile of Mood States in the waiting area, just prior to surgery. Results revealed that optimism and pessimism were directly related to distress levels prior to surgery (p < 0.05). Coping responses also were related to distress (p < 0.05); however, these effects appeared to be largely mediated by optimism and pessimism. 
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1. Introduction

Optimism and pessimism are important psychological constructs, which can predict how individuals react to stressful events. Optimism is typically defined as the degree to which an individual generally expects positive experiences in the future, while pessimism denotes the degree to which an individual generally expects negative experiences (Scheier & Carver, 1985). Existing literature has indicated that individual differences in characteristics such as optimism and pessimism contribute to variability in levels of emotional distress in stressful situations (e.g., Chang, 2001; Scheier & Carver, 1985, 1992). For example, Scheier, Matthews, and Owens (1989) found that patients’ levels of optimism inversely predicted their levels of distress before surgery, above and beyond the effects of relevant medical variables.

In addition to optimistic and pessimistic tendencies, there is also a long-standing view that the ways in which individuals cope make a difference in how strongly they react to various stressors (e.g., Carver, 1997; Folkman & Lazarus, 1988). Differences in coping responses have been associated with variability in emotional responses to a wide variety of stressful events, with some forms of coping (e.g., planful-problem solving) generally associated with less distress and other forms of coping (e.g., distancing) generally associated with higher levels of distress (Folkman & Lazarus, 1988).

Although optimism and pessimism, as well as coping responses, have been found to predict variability in psychological responses (e.g., distress) to stressful situations, less is known about their interrelations (Gilham, Shatte, & Reivich, 2001; Scheier, Carver, & Bridge, 2001).

One line of research (e.g., Billingsley, Waehler, & Hardin, 1993; Carver, Scheier, & Weintraub, 1989; Scheier, Weintraub, & Carver, 1986) has investigated the possibility that coping responses mediate the effects of optimism and pessimism on distress. Consistent with that possibility, differences in the types of coping responses typically used by “optimists” and “pessimists” have been found in a number of studies (see for review, Taylor & Aspinwall, 1996). Optimism, for example, has been found to be positively related to the use of problem-solving coping, positive reframing, and tendency to accept reality (Carver et al., 1989; Scheier et al., 1986). Optimism has also been found to be negatively related to the use of denial and the attempt to distance oneself from the problem (Scheier et al., 1986). Pessimism has been reported to be associated with the use of overt denial, substance abuse and coping responses that lessen awareness of the problem (Billingsley et al., 1993). Overall, more optimistic individuals generally seem to be active “copers” while more pessimistic individuals seem to be avoidant copers (Taylor & Aspinwall, 1996). Viewed in this way, coping can be conceptualized as a mediator of the effects of optimism and pessimism on distress levels in stressful situations.

However, support for the mediational role of coping is not universal. Recent studies have demonstrated that optimism and pessimism can have associations with outcomes that are independent of coping responses (i.e., not mediated by coping) (Lobel, Marie, & Zhu, 2002; Tomakowsky, Lumley, & Markowitz, 2001). For example, in a group of healthy women with high-risk pregnancies, Lobel et al. (2002) found that optimism had an independent association with emotional
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