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Self-efficacy, social support and well-being The mediating role of optimism

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Abstract

Self-efficacy, optimism and social support have been consistently related to health and functioning. In this study a specific hypothesis was tested: self-efficacy expectations, as a representation of a capable self, and perceived social support, as a representation of a helpful world, shape optimism which is an outcome expectation. Optimism in turn predicts satisfaction with life and depressive symptoms. Satisfaction with life and depressive symptomatology both served as indicators of well-being. Two hundred and one (201) individuals participated in our study (average age 41.57 years). The hypothesis was tested through Structural Equation Modeling. Six different models with optimism, self-efficacy and social support as possible mediators were consecutively tested and compared. According to only model that provided fit to the data, optimism partially mediates the relation of self-efficacy and perceived social support to well-being. Optimism was predicted by daily emotional support and self-efficacy.

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1. Introduction

According to the social-cognitive theory, expectations play a very important role in shaping behavior, goals and general human functioning (Bandura, 1986). There are two basic types of expectations: the first type, self-efficacy expectations, refers to the personal abilities for achieving a desired outcome, while the other, outcome expectations, refers to the possibility of finally achieving a desired outcome. According to Bandura (1997), self-efficacy expectations are judgments about how well a person can act in a certain way in order to meet a goal or cope effectively with stressful situations. On the other hand, Scheier and Carver (1985) describe optimism as a generalized tendency to expect positive outcomes even in the face of obstacles. The purpose of this study was to examine the ways that expectations interact with perceived social support in shaping well-being, as well as the possible role of optimism as a mediator in the relationship of self-efficacy and social support to well-being.

Both self-efficacy and optimism expectations are related to functioning and health. High self-efficacy is related, for example, to the regulation of the stress process, to higher self-esteem, better well-being, better physical condition, better adaptation to and recovery from acute and chronic diseases (Bandura, 1997; Bisschop, Knegsman, Beekman, & Deeg, 2004; Kuijer & de Ridder, 2003). Furthermore, low self-efficacy is related to more symptoms of anxiety and depression (Faure & Loxton, 2003; Kashdan & Roberts, 2004; Shnek, Irvine, Stewart, & Abbey, 2001), as well as to lower levels of subjective well-being (Barlow, Wright, & Cullen, 2002; Bandura, Caprara, Barbaranelli, Gerbino, & Pastorelli, 2003; Caprara, 2002).

Optimism is also related to well-being and health. Previous and recent studies (e.g., Chang & Sanna, 2001; Diener, Oishi, & Lucas, 2003; Eid & Diener, 2004; Makikangas & Kinnunen, 2003) have found that optimism significantly predicts several aspects of subjective well-being. Optimism is negatively related to depressive symptomatology both in the general population (Vickers & Vogeltanz, 2000) and in populations with various chronic conditions, such as cardiovascular disease (Shnek et al., 2001). It is also a significant predictor of physical and psychological functioning in patients suffering from various medical conditions (Carver et al., 1993; Fournier, de Ridder, & Bensing, 2002). Optimism has been found to be linked to functioning and health both directly and indirectly by means, e.g., of affectivity or self-esteem (Chang & Sanna, 2001; Symister & Friend, 2003). Optimists seem to employ more problem-focused coping strategies and more effective ways of emotional regulation, both of which contribute to better functioning (Taylor & Armor, 1996).

Besides expectations, social support is also related to subjective well-being (Kahn, Hessling, & Russell, 2003; Mikulincer & Florian, 1998), as well as to depression (Sayal et al., 2002). It is also related to the progress of a variety of chronic conditions, such as cardiovascular diseases, cancer and many others (Bisschop et al., 2004; Garssen, 2004; Heckman, 2003; King, 1997). Hogan, Linden, and Najarian (2002) and Rhodes (2004) suggest that individuals with more supportive families or friends have a better health status and they recover faster from health problems, compared to persons who are less socially integrated. Social support seems to exert influence on health both directly and indirectly through certain cognitive mechanisms, coping strategies, and health behaviors (Cohen & Wills, 1985; Davis & Swan, 1999; Wills & Fegan, 2001).

Recent studies have examined the relationship between expectations and social support with respect to human functioning and health. Thompson, Kaslow, Short, and Wyckoff (2002) in a

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