1

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# Optimism

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## **Optimism**

Dispositional optimism is a personality construct that reflects individual differences in generalized expectations about future outcomes. Unlike their pessimistic counterparts, optimists tend to approach the world expecting positive, as opposed to negative, outcomes to occur in their future, across different life domains. This definition makes dispositional optimism different from other, related concepts that address outcome expectancies of specific, situational transactions and behaviors or infer optimism through an individual's interpretation of negative life events.

Most research examines dispositional optimism by administering the "Life Orientation Test-Revised", which assesses a person's generalized optimistic and pessimistic outcome expectancies. Much of this work has treated dispositional optimism as a continuous, bipolar construct, ranging from high levels of pessimism to high levels of optimism. Other research, however, has examined optimistic and pessimistic outcome expectancies as separate, but related, constructs.

Overall, the literature on dispositional optimism suggests that optimists live happier and healthier lives than pessimists. This entry reviews literature on optimism and provides an overview of the psychological mechanisms that make dispositional optimism an adaptive personal resource. The entry focuses on two important life-span developmental questions: 1) are there age-related changes in the benefits of optimism, and 2) can individuals become more optimistic over time?

#### **Optimism and Quality of Life**

Research suggests that dispositional optimism promotes various aspects of subjective well-being, including life satisfaction and emotional well-being. Optimism can also benefit an individual's physical health; for example, optimists are more likely than pessimists to show adaptive patterns of hormonal, immune, or cardiovascular functioning. In addition, dispositional optimism has been associated with faster recovery from surgery, as well as lower risk of cardiovascular disease, progression of illness, post-surgical re-hospitalization, and mortality.

The main mechanisms through which dispositional optimism facilitates subjective well-being and physical health relate to individual differences in coping with goal-related stressors. This proposition is rooted in expectancy-value models of motivation. Given that optimists generally expect positive outcomes to occur in their future, they will continue to invest effort and commitment if progress toward an important goal is threatened or slowed. By contrast, pessimists typically experience considerable doubt about desired future outcomes, and thus are more likely to withdraw effort and commitment when they confront problems in the pursuit of important goals.

Meta-analytic research supports this assumption by documenting strong associations between dispositional

optimism and problem-focused or approach-oriented coping, which directly alter cognitions and behaviors aimed at overcoming a stressor (e.g., planning or problem solving). Pessimists, by contrast, tend to manage stressors more frequently by engaging in avoidant coping (e.g., denial or behavioral disengagement). Furthermore, as compared to pessimists, optimists also engage more frequently in effective emotion-focused coping (e.g., acceptance or positive reframing) and develop more extensive and supportive social networks in stressful life circumstances.

Of importance, the differences in coping tactics and social networks observed between optimists and pessimists have been linked to individual differences in subjective well-being and physical health. Thus, these self-regulation processes represent important mechanisms that mediate associations between dispositional optimism and an individual's quality of life.

## Age-related Changes in the Benefits of Optimism

Although the adaptive value of dispositional optimism is well established, less is known about whether the benefits of optimism remain stable across different life circumstances or periods. This question has been raised in recent discussions about whether the effects of optimism could at times be reduced, or even reversed. Support for the idea that the consequences of optimism may vary across life circumstances stems from motivational theories of life-span development. This body of theory posits that the frequency of encountering uncontrollable stressors increases in older adulthood when personal resources decline and opportunities for attaining desired goals become reduced. Accordingly, life-span developmental research has demonstrated that persistent goal striving can be less effective in older, as compared to younger, adults because older individuals are more likely to experience goal-related problems that can no longer be resolved.

An implication of the evidence from life-span psychology is that the effects of dispositional optimism could also vary across age. To the extent that the benefits of optimism derive, at least in part, from an optimist's tendency to manage problems through persistent goal striving, the adaptive value of optimism may become reduced during older adulthood. This may be the case because goal-related problems are often more difficult or impossible to overcome in old age. During the earlier phases of the lifespan, by contrast, there should be stronger and more reliable associations between dispositional optimism and indicators of quality of life, given that high levels of optimism facilitate the resolution of emerging problems through persistent goal striving.

Although age-comparative studies including children and adolescents are lacking, longitudinal studies on adult development support the proposition of age differences in the benefits of dispositional optimism. One study showed that low pessimism predicted reduced mortality among relatively young adults who had a cancer, but was unrelated to

mortality among their older counterparts. Another study demonstrated age differences in the emotional consequences of dispositional optimism across older adulthood. This study showed that while optimism protected individuals in early old age from the experience of increased depressive symptoms over time, the gap between optimists' and pessimists' depressive symptomatology became substantially reduced in advanced old age. Moreover, the study's results suggested that such age effects of dispositional optimism occur particularly during periods of high stress, which were more frequently observed as individuals advanced in age.

It is important to note, however, that the aforementioned research did not document a reversed effect of dispositional optimism. Even in circumstances when the benefits of optimism were reduced, optimists still held an advantage over their pessimistic counterparts. This pattern of findings may emerge because optimists also engage in more effective emotion-focused coping than pessimists. Thus, the benefits deriving from adaptive emotion-focused coping could partially compensate for reductions in the effectiveness of problem-focused coping among optimists who confront life circumstances that involve a low controllability of goal-related stressors.

## **Development and Stability of Optimism**

Research on the origins of dispositional optimism suggests that genetic factors play a role in its development. Dispositional optimism appears to be partly inherited, with evidence from twin studies suggesting that between 25% and 30% of the variability in optimism is due to genetic factors. Given the genetic origins of dispositional optimism, it is perhaps not surprising that it has generally been treated as a relatively stable personality dimension. Indeed, test-retest reliabilities of dispositional optimism over periods as long as ten years are often as high as the ones established for other well-known traits, such as those encompassed by the Big Five personality framework.

Not all studies show high test-retest reliabilities, which could imply that there is a potential for change in optimism. In this regard, evidence suggests that early environmental factors may contribute to the development of optimism. For example, findings from longitudinal studies document that a higher childhood socioeconomic status is one especially potent predictor of adults' dispositional optimism, even when controlling for adult socioeconomic status. In addition, parents and parenting behaviors have been implicated in the development of optimism. Specifically, adults have been found to be more optimistic when their parents reported that they wanted their child and had planned the pregnancy. Conversely, mothers who perceived their children as difficult and used hostile childrening practices had children who were more pessimistic as adults.

The specific mechanisms, related to when and how potential changes in optimism could occur, however, are not yet well understood. Based on the available research, one process could relate to the possibility that critical

developmental periods, such as early childhood, lay the foundation for the development of dispositional optimism across the lifespan. From this perspective, greater optimism in adulthood could be observed if early life experiences foster the development of psychological skills that are necessary for mastering a variety of developmental tasks and normative or non-normative challenges encountered later in life. Said differently, if individuals repeatedly manage to attain important goals and resolve pressing problems, their generalized outcome expectancies may also become more positive over time. Conversely, failure in managing goal-related problems could result in less favorable generalized outcome expectancies.

An important implication of this argument is that changes in optimism could be observed throughout the adult lifespan. Dispositional optimism might be particularly malleable during critical transition periods, when a person attempts new tasks, tries to document new skills, or acquires new social roles. During such times, the accomplishment of desired outcomes is often less certain, even for those individuals who have been successful in the past and expect to be successful in the future. Given the outcomes of these transition periods, a person's sense of optimism could be undermined or a person's sense of pessimism reduced. Thus, life transitions may provide a context in which changes in dispositional optimism might be expected to occur – for better or worse.

Preliminary evidence for such a possibility can be found in the lower stability coefficients of dispositional optimism observed among samples of individuals who were in the midst of negotiating the transition from university life to the workforce. In such transition periods, psychological processes associated with success or failure may contribute to reliable changes in dispositional optimism, providing a theoretical explanation for reduced test-retest reliabilities. We should be clear, however, that not all studies examining transition periods have found comparable results. In this regard, it is noteworthy that the one study that has produced the clearest support for the changeability of optimism focused on a population that was relatively young (first year law students). Perhaps the potential for change is greatest when these transitions occur earlier rather than later in life, before a backlog of prior successes and failures have accumulated.

See also: goals; personality; motivational theory; problem solving; emotion-focused coping; well-being.

## **Recommended Readings**

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