

differences among ethnic groups ($F=12.78$, $df= 5$, $p<0.0001$). Bonferroni post-hoc tests revealed that PTG among participants identifying as Caucasian were significantly lower than those identifying as South Asian ($p<0.0001$), East/South East Asian ($p=0.008$), and Caribbean ($p=0.009$). All other comparisons were non-significant.

Conclusions: Cardiac patients of Caribbean, South and South-East Asian ethnocultural backgrounds may experience higher level of PTG than their Caucasian counterparts. Cultural-specific values and social support mechanisms which may explain these findings require investigation. Given the greater burden of CAD in these groups, the potential to mitigate poorer outcomes should be explored.

TS-21: 5

Emotional well-being as predictor of the course of disease in chronic patients: A systematic review

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Background. In chronically diseased patients, the role of negative emotions and depressive symptoms in the course of diseases have been examined extensively. Although these negative feelings are related to positive feelings such as well-being and positive emotions, both are relatively independent constructs. Therefore, we examine emotional well-being in chronic patients, focusing on the predictive roles of well-being, positive affect, life satisfaction and happiness on the course of diseases.

Aim. This study provides a systematic review of prospective studies focusing on the influence of emotional well-being on the course of disease in populations with chronic diseases.

Methods. We searched the databases PsycInfo and Pubmed, using search terms of emotional well-being (e.g. well-being, positive affect, life satisfaction) in combination with characteristics of the course of disease (e.g. recovery, survival) and chronic diseases (e.g. patients, cancer). Two reviewers independently assessed the quality and validity of the results. Additionally, we searched the reference lists of the relevant results. Only results focusing on positive aspects of emotional well-being were included.

Results. Preliminary results showed there were 17 studies investigating emotional well-being and its prospective relation to recovery or survival in chronic patients. 11 Studies examined positive affect as an indicator of emotional well-being. Other studies investigated life satisfaction (N=4), well-being (N=1) and happiness (N=1). Several questionnaires were used to measure these constructs. Most studies (N=13) found that high levels of emotional well-being at baseline were related to increased recovery and survival at follow-up, with the strongest associations for positive affect. The other studies (N=4) found no prospective association.

Conclusion. Emotional well-being predicts the course of disease in chronic patients. Mainly positive affect shows beneficial associations to recovery and survival. Several mechanisms could play a role. Positive affect may directly influence physical health. Otherwise, it may increase health-promoting or coping behaviours, by that influencing physical health.

TS-27: Happiness 2

Time: Saturday, 26/Jun/2010: 10:30 - 11:45

TS-27: 1

Exploratory and confirmatory factor analysis of Subjective Happiness Scale (SHS) and Subjective Vitality Scale (SVS) among physical education students in Egypt, France and Saudi Arabia

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The main purpose of this study was testing the factor structure of two well-being scales in three different cultures (Egypt, France and Saudi Arabia). The first scale is the Subjective Happiness Scale (SHS) and the second one is the Subjective Vitality Scale (SVS). The SHS consists of 4 items and it was developed by Lyubomirsky (1999) and validated by Lyubomirsky and Lepper (1999). The SVS was developed by Ryan and Frederick (1997). For this scale, we used the short version validated by Bostic, Rubio and Hood (2000) which consists of 6 items. The factor structure of the two scales has not yet tested in any of these three countries. Method: using the translation and back-translation, we created Arabic and French version. In this study, the Arabic version was administrated to two physical education student samples in Egypt (n= 523) and in Saudi Arabia (n= 200). The French version was administrated to physical education students (n = 509). The average age was from 17 to 24 years old. The SPSS and LISREL program were used for exploratory and confirmatory factor analyses. Results and conclusion: For the three samples, for SHS and SVS, using the principal axis