Optimism and Social Support: The Providers' Perspective

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Objectives

Optimism is an important determinant of mental and physical health, in particular when people are confronted with stressful situations. Social support has been proposed as a mechanism which mediates these beneficial health effects of optimism. It has been proposed that optimists are more socially attractive than pessimists, and as a consequence, they are provided with more social support (e.g. Peterson & Bossio, 2001).

In line with this assumption, various studies have shown a positive relationship between optimism and indicators of social support, such as the availability of helpful others or the frequency of helpful interactions (e.g., Brisette, Scheier, & Carver, 2002). However, all these results are based on self-reports of the support recipients. Thus, only the view of optimists and pessimists themselves about social support was considered, while the perspective of the support providers has been comparably neglected. Therefore, the question arises as to whether optimists are in fact provided with more social support, or merely perceive their social environment as more supportive than pessimists.

Accordingly, the major aim of the present research was to examine to what extent optimists, pessimists and additionally realists elicit different social reactions, such as a different intention to provide social support, in their social interaction partners.

Methods

Study 1

Sample

Participants: N = 168 (50% women)
Age: M = 22, SD = 2.77

Stimulus material

Transcripts of short conversations in which optimistic, pessimistic and realistic targets reported how they were dealing with a stressful situation (Weber et al., 2007)

Stressful relationship-related situations

The target has fallen in love and told the other person about it. However, he/she is rejected, because the other person would like to get to know him/her a little better first.

The target has fallen in love and told the other person about it. However, he/she is rejected, because the other person does not share his/her feelings.

Study 2

Sample

Participants : N = 240 (50% women)
Age: M = 23, SD = 3.06

Stimulus material

Audiotapes of short conversations in which optimistic, pessimistic and realistic targets reported how they were dealing with a stressful situation (Weber et al., 2007)

Stressful relationship-related situations

The target has fallen in love and told the other person about it. However, he/she is rejected, because the other person would like to get to know him/her a little better first.

The target has fallen in love and told the other person about it. However, he/she is rejected, because the other person does not share his/her feelings.

Study 3

Sample

Participants : N = 120 (50% women)
Age: M = 24, SD = 2.90

Stimulus material

Audiotapes of short conversations in which optimistic, pessimistic and realistic targets reported how they were dealing with a stressful situation (Weber et al., 2007)

Stressful achievement-related situations

The target has finished her studies and applied for her dream job. However, she is not accepted, because she first has to prove her expertise by working there for one day.

The target has finished her studies and applied for her dream job. However, she is not accepted, because there is a hiring freeze due to financial shortages.

Dependend measures in Studies 1-3

Evaluation of behavior

1) Perceived adequacy: 2 items
   scale: 1 (not at all) - 7 (very much)
   e.g.: "The behavior is adequate"

2) Perceived effectiveness: 2 items
   scale: 1 (not at all) - 7 (very much)
   e.g.: "The behavior is effective"

Evaluation of target

3) Personality: 6 Items, α>.86
   scale: 1 (strongly disagree) - 7 (strongly agree)
   e.g.: "The person is well respected"

4) Interpersonal attraction: 7 items, α>.91
   scale: 1 (strongly disagree) - 7 (strongly agree)
   e.g.: "I like the person"
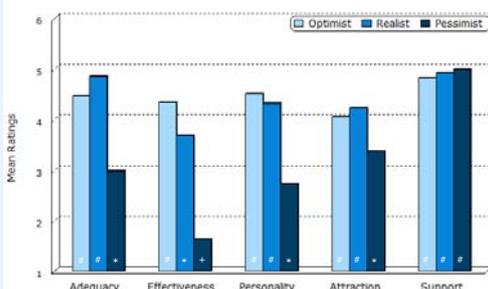
Social support

5) Intention to provide social support: 5 items, α>.90
   scale: 1 (strongly disagree) - 7 (strongly agree)
   e.g.: "I would be willing to spend time with the person talking and listening"

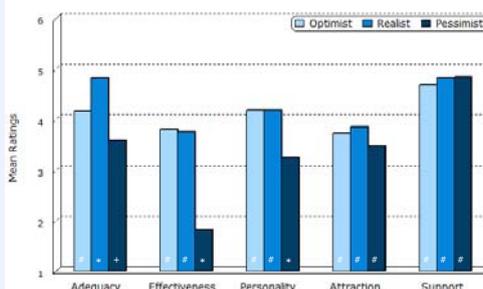(i.e., Carver, Kus, & Scheier, 1994; Montoya & Horton, 2004; Schwarzer & Weiner, 1990)
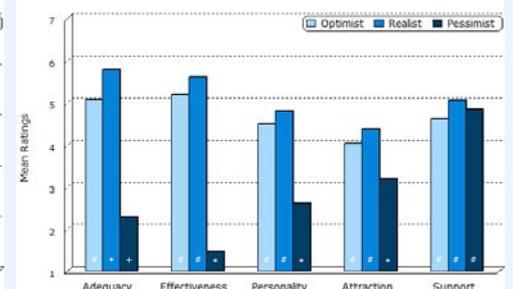
Results

Study 1
Note. Mean ratings with different symbols differ significanly at p<.05 (Bonferroni-Test); Vollmann, Renner, Matiba, & Weber, 2007.

Study 2
Note. Mean rating with different symbols differ significantly at p<.05 (Bonferroni-Test); Vollmann, Renner, & Weber, 2007.

Study 3
Note. Mean ratings with different symbols differ significantly at p<.05 (Bonferroni-Test); Vollmann, Renner, & Weber, 2007.

Discussion

The three studies with different samples, different stimulus material and situations from different life domains yielded highly similar result patterns, suggesting a high consistency in social responses to optimists, pessimists, and realists.

With few exceptions, the social responses to optimists and realists were equally positive. The results indicate that optimists and realists were perceived as equally socially attractive.

Regarding the evaluation of behavior and personality as well as perceived interpersonal attraction, optimists were viewed more favourably than pessimists. However, despite the more positive evaluation of optimists compared to pessimists, no differences were found with regard to the willingness to provide optimists and pessimists with social support. These results suggest that the greater availability and receipt of social support commonly reported by optimists might represent an optimistically biased perception rather than an accurate reflection of the support they are provided with. One possible explanation for this result pattern is that optimists might tend to generalize the more positive evaluation and therefore perceive more available social support which in turn essentially affects positive health outcomes. Thus, the relationship between optimism and health may not predominantly mediated by social support provided by the social network, but rather by the expression of social approval.

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