



## Are people healthier if their partners are more optimistic? The dyadic effect of optimism on health among older adults



Eric S. Kim<sup>a,\*</sup>, William J. Chopik<sup>a</sup>, Jacqui Smith<sup>a,b</sup>

<sup>a</sup> Department of Psychology, University of Michigan, Ann Arbor, United States

<sup>b</sup> Institute for Social Research, University of Michigan, Ann Arbor, United States

### ARTICLE INFO

#### Article history:

Received 19 December 2013

Received in revised form 27 March 2014

Accepted 28 March 2014

#### Keywords:

Optimism

Aging

Relationships

Successful aging

Positive psychology

Psychological well-being

### ABSTRACT

**Objective:** Optimism has been linked with an array of positive health outcomes at the individual level. However, researchers have not examined how a spouse's optimism might impact an individual's health. We hypothesized that being optimistic (and having an optimistic spouse) would both be associated with better health.

**Methods:** Participants were 3940 adults (1970 couples) from the Health and Retirement Study, a nationally representative panel study of American adults over the age of 50. Participants were tracked for four years and outcomes included: physical functioning, self-rated health, and number of chronic illnesses. We analyzed the dyadic data using the actor–partner interdependence model.

**Results:** After controlling for several psychological and demographic factors, a person's own optimism and their spouse's optimism predicted better self-rated health and physical functioning ( $bs = .08-.25, ps < .01$ ). More optimistic people also reported better physical functioning ( $b = -.11, p < .01$ ) and fewer chronic illnesses ( $b = -.01, p < .05$ ) over time. Further, having an optimistic spouse uniquely predicted better physical functioning ( $b = -.09, p < .01$ ) and fewer chronic illnesses ( $b = -.01, p < .05$ ) over time. The strength of the relationship between optimism and health did not diminish over time.

**Conclusions:** Being optimistic and having an optimistic spouse were both associated with better health. Examining partner effects is important because such analyses reveal the unique role that spouses play in promoting health. These findings may have important implications for future health interventions.

© 2014 Elsevier Inc. All rights reserved.

### Introduction

Imagine an older adult that you know, do you think that their partner's psychological attributes can affect their health? Emerging research suggests that the people in our social networks can have profound influence on our health and well-being [1–4]. For example, a recent study of older adults showed that even after accounting for an individual's own conscientiousness, their partner's conscientiousness was a unique predictor of his or her health [5]. In a study of cardiac rehabilitation patients and their partners, patients only accepted their partner's support if the couple reported similar exercise behaviors; in couples with dissimilar exercise behaviors, patients were less receptive to their partner's supportive efforts [6]. The researchers hypothesized that a patient's awareness of a partner's efforts to modify his or her own lifestyle increases the patient's appreciation of partner involvement,

which then increases exercise among cardiac patients. These two studies highlight an emerging literature that examines individual health behavior within a *dyadic* context—acknowledging the relationships between the psychological characteristics of people who share the same social environment. Yet, to our knowledge, the potential dyadic effects that optimism has on health have not been examined.

Dispositional optimism—the generalized expectation that good things will happen—has been linked with an array of physical health benefits ranging from reduced risk of cardiovascular disease and stroke to healthier levels of antioxidants and lipids [7–15]. Optimism is also linked with healthier behaviors. For example, optimists are more likely to exercise, eat healthier diets, manage stress better, and abstain from smoking [10,12,16,17]. Further, optimism is an individual attribute that is about 25% heritable, but can also be learned and shaped by social influences [18–23]. Therefore, optimism may provide a point of intervention for improving health outcomes. Although optimism's association with various health behaviors and outcomes has been examined at the individual level, to our knowledge, the dyadic effects of optimism on health have not been examined.

In the field of health psychology, the associations between psychological factors and health are typically conceptualized and tested at the individual level. However, it is likely that a partner's

Abbreviations: HRS, Health and Retirement Study; APIM, actor–partner interdependence model.

\* Corresponding author at: Department of Psychology, 530 Church Street, University of Michigan, Ann Arbor, MI 48109-1043, United States. Tel.: +1 914 826 4477; fax: +1 734 615 0573.

E-mail address: kimeric@umich.edu (E.S. Kim).

personality can impact a person's health. In the current study, we used the actor–partner interdependence model (APIM) to estimate the actor and partner/spousal effects of optimism on health while accounting for the interdependence within couples [24]. Actor effects measure the influence of a person's predictor variable on that person's own health; partner/spousal effects capture the unique influence of an actor's predictor variable on his or her spouse's health. For example, in our study, the actor effects capture the influence of a person's own level of optimism on his or her own health, while the spousal effects capture the unique influence of an actor's optimism on his or her spouse's health (above and beyond the spouse's own level of optimism).

Why might a spouse's optimism be associated with an individual's health? Past research has identified social support as a mechanism that may link optimism with health [25–28]. Social support may partly explain the link between optimism and enhanced health because optimists have several advantages when using social support for goal achievement: 1) optimists are more likely to seek social support when facing difficult situations, 2) optimists are more well liked, 3) optimists have a larger network of friends who provide social support, and 4) for optimists, these friends provide more social support during stressful times [25,28–32].

Recent research examining the dyadic effects of optimism in close relationships found that optimism plays a key role in relationship quality and how couples interact. For example, a person's own optimism predicts his or her own relationship satisfaction as well as his or her partner's relationship satisfaction in cross-sectional analyses [33]. In longitudinal analyses, higher optimism is associated with higher relationship satisfaction, and this association is mediated by enhanced cooperative problem solving [34]. Perhaps these cooperative problem solving skills help couples enhance their physical health. For example, an optimistic partner may start going to the gym more often with their spouse, who is recovering from a cardiac event and having trouble meeting exercise goals. As mentioned above, researchers found that cardiac patients are much more receptive to a partner's support of exercise behavior if the couple reports similar exercise behaviors [6]. Research has also shown that couples that collaborate efficiently cope better with illness [35]. Thus, many of the mechanisms linking partner optimism to individual health could be direct and practical (e.g., perhaps an encouraging push to go to the gym or to eat a healthier meal).

Conflict and divorce in couples can cause serious physical illness [36]. However, optimists and their partners see both themselves and each other as reaching better resolutions after conflict [37]. Another potential mechanism linking optimism with higher relationship satisfaction may be the internal belief among optimists that they are receiving more support from their partner [37]. Interestingly, optimists may not actually receive more support from a partner, but only perceive that they are receiving more support [38]. Nonetheless, the perception of social support helps buffer against stress [38]. Therefore, both social support and relationship satisfaction may help explain the dyadic effects that optimism has on health.

Based upon this prior research, we examined the following hypotheses using longitudinal data from the Health and Retirement Study, a nationally representative sample of Americans over the age of 50. The identification of factors that protect against declining health is particularly important for the expanding segment of older adults who face the dual threat of declining health and rising health care costs.

We examined the link between optimism and health over a four-year period with three hypotheses in mind. First, we examined the association between optimism and health (as measured by: self-rated health, a 23-item measure of physical functioning, and an index of eight major chronic illnesses) at the individual level. We hypothesized that higher optimism would be associated with better health. Second, we examined the possible dyadic effects of optimism. We hypothesized that higher optimism in the spouse would predict better health in the actor, above and beyond the actor's own level of optimism. Third, we

hypothesized that the actor and spousal effects of optimism would prospectively predict health over a four-year period.

Most studies using the APIM adjust for a very small number of covariates, if any at all. In our analyses we controlled for traditional risk factors that predict future health including age, gender, race/ethnicity, level of education, and household wealth. Given that previous studies found a link between other personality factors (e.g., conscientiousness and neuroticism) and health, we included these personality factors as covariates [5]. The addition of these covariates helped rule out third variable explanations.

## Method

### Sample and procedure

The Health and Retirement Study (HRS) is a nationally representative and prospective panel study that has surveyed more than 22,000 Americans aged 50 + every two years [39–41]. Data have been collected since 1992. We report on psychological, health, and covariate data collected in 2006, 2008, and 2010. The University of Michigan's Institute for Social Research is responsible for the study and provides extensive documentation about the protocol, instrumentation, sampling strategy, and statistical weighting procedures. The HRS is sponsored by the National Institute on Aging (grant number NIA U01AG009740).

Starting in 2006, a random 50% of HRS respondents were selected for an enhanced face-to-face interview. A random half was selected because it was not financially feasible to provide enhanced face-to-face interviews for the entire HRS sample. At the end of the interview, interviewers left behind a self-report psychological questionnaire, which respondents completed and returned by mail to the University of Michigan. Among people who were interviewed, the response rate for the leave-behind questionnaire was 90%. Although HRS interviewed all couples in a household, only data for respondents aged 50 and older is used when survey weights are applied, because HRS was intentionally created to become a nationally representative sample of adults over the age of 50. Therefore, among those who were interviewed face-to-face, 7168 respondents were eligible for HRS. For the present study, we selected data from heterosexual couples in which both the husband and wife completed measures of optimism and health ( $N = 3940$  or 1970 couples). The sample used in this study, which consisted only of couple's ( $N = 3,940$ ), differed from the broader sample ( $N = 7168$ ) on several variables of interest. Specifically, the present sample was more optimistic ( $d = .17$ ), healthier ( $d = .21$ ), had fewer conditions ( $d = .11$ ), better mobility ( $d = .20$ ), and was younger ( $d = .13$ ) than the larger representative sample.

### Measures

#### Optimism

Optimism was assessed during the 2006 assessment using the Life Orientation Test–Revised (LOT-R). Studies have shown that the revised LOT-R has good reliability and validity [42]. The measure has also been demonstrated to have good discriminant and convergent validity [42]. A sample item is, “In uncertain times, I usually expect the best.” Participants are asked to rate the extent to which they agree with each item on a scale ranging from 1 (*strongly disagree*) to 6 (*strongly agree*). In total, six items were used to assess optimism ( $\alpha = .75$ ). Three negatively worded items were reverse scored, then all of the items were averaged to create a scale for optimism ( $M = 4.52$ ,  $SD = .94$ ).

Researchers sometimes split the LOT-R into two subscales—with one scale consisting of only positively valenced items and the other scale consisting of only negatively valenced items. We chose not to create subscales for theoretical and methodological reasons [43,44]. Optimism is most accurately captured by a scale that combines both positively worded items that are endorsed and negatively worded items that are rejected [43]. It is increasingly evident that a division into subscales

Download English Version:

<https://daneshyari.com/en/article/949312>

Download Persian Version:

<https://daneshyari.com/article/949312>

[Daneshyari.com](https://daneshyari.com)