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**THE RELATION BETWEEN OPTIMISM AND RESILIENCY AND DISTRESS
TOLERANCE**

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ABSTRACT

The result of the present research is to investigate the relation between optimism and Resiliency and the tolerance of the Imam Reza Hospital in Amol City. The research is functional in terms of purpose and, and is correlational in terms of nature and method. The population of the study includes all the staff working in the Imam Reza Hospital in Amol City which was 150 people by 2014. A 108-member sample has been determined randomly among the population. In this research, we used three questionnaires, including Resiliency 25-item questionnaire (CS-RIS), optimism questionnaire of Carver & Scheier (1985) and the 15-item questionnaire of tolerance for data collection. The data was analyzed after the collection using interpretive statistics and Pearson and multiple regression. The results showed that there is a significant relation between optimism and tolerance and also between Resiliency and tolerance.

Keywords: Optimism, Resiliency, Tolerance

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INTRODUCTION

In the 21st century, the psychologists found out that people should spend their mental energy on positive aspects of his experience (Seligman, 2000). In the earlier years, psychology had focused more on negative emotions such as anxiety and depression, so the wellbeing and happiness was neglected. But today, a research about psychological wellbeing and positive psychological aspects is growing (Kashdan, 2004). However, optimism is among the positive psychological concepts, but the necessity for the optimism is repeating positive and energizing sentences and terms such as 'I take steps every day towards success', 'everyday I'm passing the road of blessing'. But optimism is something more than such issues and is a deeper concept. Researchers' efforts narrate something beyond those promising things. The results show that optimism roots in the thinking style and their understanding of people of the reasons of happenings. Every person uses unique approaches to relate the reasons to the results, which are named styles (Davar panah, 2012). According to Carver & Scheier (1985), optimistic people generally believe that every work goes on correctly, but the pessimistic people expect everything to go on incorrectly and consequence in bad results. According to such view points, assuming all the factors are

considered, we can conclude that people who are exposed to less mental health risks, are faced with positive results and people who are exposed to more risks, face with negative consequences. Although the empirical evidences support this pattern, some studies show that people, who are exposed to risk factors, face with less negative, pessimistic and disappointing aspects and even they might show significant progress. This is the tolerance of anxiety. Tolerance is opposed with vulnerability.

Tait (2007) found out the tolerance is focused on a special groups of people who are exposed to risk factors but are faced with less negative results and even they might obtain positive consequences. In addition, vulnerability can be applied to people who although are not exposed to stressful situations, they suffer from negative consequences or are deprived of obtaining approving and positive results. Tolerance is the opposing factor of vulnerability. . In addition, vulnerability can be applied to people who although are not exposed to stressful situations, they suffer from negative consequences or are deprived of obtaining approving and positive results. Investigating the relation between hope to life and living with other positive psychological

components, such as having a purposeful life to enjoy a happy, blissful and with full mind health have received a huge attention recently. Studies by Huom, Cheng and Cheng (2009) on China's students, Shoting , Wang and Leem (2009) on 334 high school students in Singapore, Alberto and Jovenir (2008) on the chronic obstructive pulmonary disease patients, Vandrolden, Greevink and Dijcond (2006) on the victims of natural disasters, Trenzo and Pinto (2003) on the women suffering from breast cancer, and also Achet and Kohan on cancer patients, Movahed (2003) in a research on the students of Chamran University stated that there is a positive and significant relation between optimism and life expectancy. Asadallahi (2007) showed the effects of cognitive treatment relied on mental-emotional treatment of Alice and optimism of Sigelman on the disappointment and depression among the female high school students of Tehran city significantly (Nikroo, 2009). Khodayari fard et al (2007) also investigated the effects of training optimism as a part of methodotrapy according to religious rules on the prisoners of Rajaei Shahr. The results showed that methodotrapy simultaneous with focus on religious rules and training optimism has a positive effect on all the subscales of general health except for obligatory obsession,

personal interaction, phobia and Psychosis. Optimism was in a positive relation with less depression (Lobel et al, 2002, Devinsent and Meer, 2002), less disparation and even better and healthier pregnancy (Lobel, Devinsent, Kemeener and Meer, 2003) and job functional (Begly, Lee and Zajka , 2000).

Also while facing a challenge, optimist persons, and show higher Resiliency (even if they have a difficult or slow progress) (Carver et al, 2010). This plays an important role in adjustment with stressful life events (Tossi Mafred, 2001) and in psychological wellbeing (Karadmaz, 2006). Kampfer (1999) believes that Resiliency is a return to the basic situation or an achievement to a balance in a higher level in threatening situation, which normally should provide successful adjustments life. The findings show that the Resiliency features of people plays important roles in marital satisfaction and relation, decreasing stresses in marital relations and increasing positive emotions (Haber et al, 2010, Neff and Braddy, 2011, Latidiad, 2006). By the improvement of people's Resiliency, they can show resistance facing with psychological problems and take over them (Conner, 2006, Wilson et al, 2004). So according to the mentioned material, the main objective of the research is to investigate the relation between optimism and Resiliency

with tolerance among the staff of Imam Reza Hospital in Amol City.

METHODOLOGY

The present research is a functional survey in terms of research subject and purpose and is non-experimental in terms of controlling research variables, because the relation between the variables are not manipulated. Also, the present research is descriptive-correlation and the relation between the variables is predicted according to the research purpose. According to the purpose of the study, the population includes all the employers of the hospital by the end of 2014 in Amol City which is about 150staff. The calculated sample volume was calculated to be 108 people via Chocran formula. The sample volume is selected randomly and has statistically analyzed. All the samples were reassured that the ethical measures have been observed such as anonymity, preserving the secrets and privacy of personal information. The independent variables in the present research are Resiliency and optimism, and the dependent variable is tolerance. We used descriptive statistics and Pearson correlation coefficient and regression analysis to analyze the data.

Optimism questionnaire of Carver & Scheier: questionnaire is provided by Carver & Scheier (1985) in order to efficiently and

validly evaluates the optimistic and pessimistic styles. This is a scale which is filled according to life's consequences. The providers of this questionnaire believe that it enjoys a high level of validity and generally evaluates the expectations and general messages on the acceptability of his future results. Smith et al (1989) in his research on the tractability coefficient with retesting method calculated 0.79 with the time span of 4 weeks. Also, the Cronbach alpha was calculated to be 0.76 and the content validity of the questionnaire was calculated to be 0.60 (Soori et al, 2013).

FINDINGS

According to data analysis, it was found out that Pearson correlation coefficient between two variables of optimism and tolerance among the staff of Imam Reza Hospital in Amol City was equal to $r=0.457$ and $p<0.001$. According to the significance level, H_0 , based on no relation is voided and consequently there is a significant relation between optimism and tolerance among the staff of Imam Reza Hospital in Amol City. Also, Pearson correlation coefficient between Resiliency and tolerance of the staff was $r=0.290$ and $p<0.001$. According to the significance level, H_0 , based on no relation is voided and as a result, there is a significant relation between Resiliency and tolerance

among the staff of Imam Reza Hospital in Amol City (table1).

In order to investigate the linear relation between the predictor dimensions of the variable optimism and Resiliency and the criterion variable, tolerance, we used multiple regressions simultaneously.

According to table2, the standardized coefficient (Beta) presents the below results: 3.25% of variance of the independent variable

(tolerance) is rooted in optimism and 5.34% of variance is rooted in predicted to be rooted in Resiliency. As results, the Resiliency variable has the higher amount of predictability in the tolerability variable. But finally in 13.5% of all changes, tolerance was determined by optimism and Resiliency and the model is meaningful, so $F=14.70$ and $p<0.1$.

Table1. Correlation coefficient between dependent and independent variables

Independent variable	Dependent variable	Correlation coefficient	Significance level	The results of hypothesis examination
Optimism	Tolerance	0.457	0.001	Confirmed
Resiliency	Tolerance	0.290	0.001	Confirmed

Table2. Regression coefficients of variable tolerance based on optimism and Resiliency

Predictive variables		Non-standardized coefficient		Standardized coefficient	t	F	R2 adj	p
		Coefficient B	Standard deviation	Beta				
constant		245.6	964.4		25.81	14.70	0.135	0.21
Independent variable	Optimism	0.134	0.038	0.253	51.23			0.001*
	Resiliency	0.174	0.036	0.345	79.44			0.001*

RESULTS AND DISCUSSION

The purpose of the present research was to investigate the relation between optimism and Resiliency and tolerance among the staff of Imam Reza Hospital in Amol city. The results showed that in the confirmation of the hypothesis 1, there is a significant relation between optimism and tolerance among the staff, which is consistent with the findings of Queen Fontain et al (2006), Walter Cristime,

(2004), Johnson et al (2003). Taylor and Commeny (2000) argue that if the understanding of people be accompanied by a positive concept of themselves and self control and an optimistic, even false, image on the future, not only it contributes them facing threatening and stressful situation but also it helps handling life problems. Peterson (2000) also suggests that optimism is related to positive temperament. Optimism has

positive relationship with effort, public reputation, academic and carrier success, health and family condition and even getting rid of emotional harms.

The other results of the study showed that there is a significant relationship between Resiliency and tolerance among the staff of Imam Reza Hospital of Amol City. The findings were consistent with those of Pursardar et al (2012), Khosroshahi and Hashemi Nasr abad (2011), Bonano (2004), Masten (2001), Conner and Davidson (2003) and Lazarus (2001). Decreasing Resiliency against life problems is along with a sort of mental pressure, anxiety or depression. Resiliency can improve self-confidence and successful facing with negative experiences through increasing the levels of positive emotions. Accordingly, Resiliency through improving self-confidence is a medium mechanism which is ended up with positive compliance and psychological well-being. People who have higher psychological wellbeing, have higher adjustment facing problems compared to people who does not have such advantage. On the other hand, the more people have Resiliency power facing life's problems and stresses, they are less exposed to mental and emotional disorders and enjoy higher levels of mental wellbeing and tolerance. Finally according to the results

of the study it is suggested that training optimism to the female children of single mothers, specifically of divorced parents, should be implemented. Because they should improve a hatred and pessimism towards males , receiving thoughts patterns from their mothers and face problems in marriage. Because optimism is a modern treatment style, it is recommended to investigate its function and efficiency among other societies such as the retired, employers, imprisoned and so on. Finally, it is suggested that optimism be trained through mass media. It seems that all the people need to look more positively to their selves and their surroundings. Because positive psychology believes that positive psychology components such as hope can help people against stressful happenings, it seems that producing preventive programs according to hope hypothesis and using their preventive role can be helpful.

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