There’s a landslide of evidence demonstrating the impact of Optimism on things that matter. Here are some of the key findings on Health:

Health

Pessimists:

* More likely to become ill and go to the doctor with greater frequency (Peterson & Seligman, 1987)
* Linked to depressive symptoms (Chang et al., 1997)
* Poor health later in life (Peterson et al., 1988).
* Pessimism was related to depression (Hull & Mendolia, 1991).
* Pessimists are inclined to catastrophize pain experiences, thereby making the experiences subjectively worse (Goodin et al., 2013; Hannsen et al., 2013)
* Not only are depressed individuals more pessimistic in their predictions about their future, but also they are more pessimistic about the future of others (Alloy & Ahrens, 1987).
* High levels of caregiver pessimism was related to depressive symptoms and a faster decline in physical health over a 10 year study (Lyons et al., 2004)

Optimists:

* Optimists have fewer illnesses, go to the doctor less often, are less likely to die of coronary heart disease, and recover more quickly from bypass surgery (Buchanan, 1995; Peterson, 1988; Peterson and Seligman, 1987, Scheier et al., 1989).
* Optimists are more likely to exercise, have healthy diets, improve diets, and are less likely to smoke (Tindle et al., 2009; Boehm et al., 2013; Giltay et al., 2007; Steptoe et al., 2006; Hingle et al., 2014).
* Are more able to disengage mentally from or inhibit, physical pain (Geers et al., 2008; Goodin et al., 2013).
* Optimists are more responsive to suggestion about pain relief (i.e., placebos) (Geers et al., 2010).
* Optimists report less distress more positive emotions, lower physiological strain (Carver et al., 2010; Klok et al., 2011; Wrosch et al., 2013)
* Optimistic children show more adaptive sleep profiles, another association between optimism and markers of good health appearing early in life (Lemola et al., 2011).
* Optimism predicted good health (whether measured by self-report, doctor visits, immunological efficiency, or longevity). (Peterson and Bossio, 2001)
* Students with high hope and optimism will recover more quickly from major injuries and illnesses (Barnum et al., 1998)
* Optimism was associated with a "fighting spirit" in a sample of women treated for breast cancer (Schou et al., 2005)
* Optimism was positively associated with active coping strategies and negatively associated with avoidant coping strategies in a sample of HIV-positive men and women dealing with the loss of loved ones to HIV-AIDS (Rogers et al., 2005)
* Optimism is in general associated with better cardiovascular functioning and reduced cardiovascular disease (Kubzansky et al., 2001; Tindle et al., 2009)
* There is promising evidence that optimism may predict increased longevity (Giltay et al., 2004)
* Greater optimism at the start of the semester for first year law students was associated with better mood and immune functioning 2 months later (Segerstrom et al., 1998)
* Optimism related to lower depression symptoms and predicted lower depression postpartum for pregnant women. Optimism appeared to help resist symptoms of postpartum depression (Carver & Gaines, 1987)
* Optimists having coronary artery bypass surgery had less distress beforehand and more life satisfaction after surgery (Fitzgerald et al., 1993)
* For caregivers of cancer patients, optimism predicted less depression and less adverse impact of caregiving on their physical health (Given et al., 1993)
* Optimism predicted success lowering levels of saturated fat, body fat, and an index of overall coronary risk for patients in cardiac rehabilitation programs and also related to increases in exercise (Shepperd et al., 1996).
	+ Patients five years later found optimists more likely to be taking vitamins, eating low-fat foods, and to be enrolled in a cardiac rehabilitation program (Scheier & Carver, 1992)
* Study of HIV-negative gay men found that optimists reported fewer anonymous sexual partners than pessimists, suggesting that optimists were making efforts to reduce their risk, safeguarding their health (Taylor et al., 1992)
* Optimists scan for threats to well-being but save their behavioral responses for threats that are truly meaningful (Aspinwall & Brunhart, 1996)
* For women with a family history of alcoholism, pessimists were more likely than optimists to report drinking problems (Ohannessian et al., 1993).
* Optimism predicted how fast one heals from an injury (Ebrecht et al., 2004)
* Optimism is positively related to the practice of health-enhancing behaviors (Robbins et al., 1991)
* Optimists are more likely than pessimists to engage in positive health practices (Scheier & Carver, 1992)
* 6 months post-surgery, optimists were significantly more likely than pessimists to have resumed vigorous physical exercise, and more likely to have returned to work on a full-time basis (Scheier & Carver, 1992)
* Optimism is a significant predictor of the rate of a patient's recovery during the immediate postsurgical period (Scheier & Carver, 1992).
	+ Optimists were faster to achieve behavioral milestone of recovery (sitting in bed, walking around the room) than pessimists and, optimists were rated by the rehabilitation staff members as showing a more favorable physical recovery in regard to the patient's specific medial profile
* Optimism was associated with perceived stress and mental health among caregivers for spouses diagnosed with Alzheimer’s disease (Hooker et al., 1992)
* Caregivers with higher levels of optimism had lower levels of negative emotion (Shifren & Hooker, 1995)
* Optimistic individuals who had been optimistic since childhood outlived their pessimistic counterparts by an average of almost 2 years (Peterson et al., 1998)

Stress and Coping

* Optimistic individuals adjust more favorably to life transitions (e.g., first year of college; Aspinwall & Taylor, 1992)
* Optimists cope more effectively with stressful events (Scheier et al., 1986)
* Optimists report fewer physical symptoms (Scheier & Carver, 1985).
* Optimism “is associated with the use of adaptive, engagement-coping strategies, such as rational problem solving, cognitive restructuring, expressing emotions or seeking social support when dealing with a stressful situation.” (Chang, 1996)
* Pessimists are more likely to display helplessness deficits when confronted with a bad event (Abramson et al, 1978; Seligman et al., 1979)
* Optimists experience fewer symptoms of stress, cope more effectively with stressful events, and adjust better to important life transitions (Macan, 2007)
* Optimists use adaptive and engaging coping strategies including: rational problem solving, cognitive restructuring, expressing emotions, and seeking social support during stressful times (Macan, 2007)
* Pessimists use maladaptive and disengaging coping strategies including: avoiding problems, impulsive and careless problem solving, being self-critical, and socially withdrawing from stressful situations (Macan, 2007)
* The positive emotions associated with optimism allow individuals to take a break from the demands of coping, can help the person persist in the face of obstacles, and can facilitate recovery from harm or loss by restoring depleted resources (Gottlieb, 1997; Lazarus et al., 1980)
* Individuals with higher levels of optimism are better able to adjust and to overcome stressful situations (Chang et al., 2000; Peterson, 2000; Scheier & Carver, 1985)
* Optimists take on more positive coping actions during demanding circumstances (Chemers et al.,2000; Gagne & Shepherd, 2001; Gillham, 2000).
* Optimists naturally manage better for the duration of difficult times (Carver & Scheier, 2002)
* Optimists cope using approach strategies, that is, they deal with problems by actively trying to solve them (Nes & Segerstrom, 2006).
	+ Contrary to popular belief, optimists may, therefore, be less likely to deny problems by actively trying to solve them.
	+ Pessimists on the other hand, cope using avoidance strategies, which may prevent them from solving problems (Carver et al., 1989)
* Greater optimism was associated with smaller increases in stress and depression and greater increases in perceived social support in a sample of incoming college students (Brissette et al., 2002)
* Optimists report being engaged and planning when confronted with a stressful event whereas pessimists disengage from the stressful event (Scheier & Carver, 1992)
	+ Optimists accept the reality of stressful events, while pessimists use tactics such as denial and substance abuse to lessen their awareness of the problem
* For patients of coronary artery bypass surgery, optimists, more than pessimists reported making plans for their future and setting goals for recovery. Optimists focused less on negative aspects of the experience (distress and symptoms). (Scheier et al., 1989)
	+ After surgery, optimists were more likely than pessimists to seek out information about what the physician would require of them in the months ahead.
	+ Optimists also were less likely to say they were suppressing thoughts about their symptoms and there was a positive impact of optimism on the quality of life 6 months later that occurred through the indirect effect of these differences in coping
* Optimists take credit for favorable events in their lives and distance themselves from unfavorable life events (Luthans et al., 2007).
* Optimism has a strong negative relationship to stress (Chan, 2004)
	+ Then mental perception and behavior of an optimist make them better able to cope with and buffer themselves from the effects of stress
* Optimism is negatively associated with stress, including environmental stress (Chang et al., 1994)
* Optimistic high school student reported significantly higher levels of self-esteem and lower levels of psychological distress (Creed et al., 2002)
	+ The pessimistic students reported significantly lower levels of self-esteem and more psychological distress