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PSYCHOSOCIAL CORRELATES OF THE SHORT TERM COURSE OF MULTIPLE SCLEROSIS

A thesis presented in partial fulfilment of the requirements for the degree of Doctor of Philosophy in Psychology at Massey University

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ABSTRACT

The present investigation developed and tested a theoretical model, which attempted to depict some of the complex relations among the psychosocial and physical health experiences of multiple sclerosis (MS) patients. The model is comprised of five constructs: psychological well-being, physical health status, stressors, disposition and social support. The pivotal aspect of the model is psychological well-being, through which all other factors exert their influence.

The study consisted of a cross-sectional and a longitudinal phase. Participants in the cross-sectional phase were a convenience sample of 45 people diagnosed with MS. The longitudinal phase involved a subsample of 12 people for an additional six months. In the cross-sectional phase, one structured interview was conducted at the participant’s home. The longitudinal participants completed (six) monthly structured interviews and physical examinations (by a physician) at the rehabilitation unit of the local hospital.

Four strategies were used to analyze and interpret the data. Firstly, the cross-sectional data was analyzed using conventional between-subject regressions to examine aggregate relations at a single point in time. Secondly, the longitudinal data was analyzed using within-subject regressions to examine aggregate associations among changes in the variables. Thirdly, the longitudinal data was analyzed to examine intraindividual patterns. Lastly, a qualitative case study approach was used to interpret the factors preceding and following an exacerbation in one participant.

Results of the cross-sectional analysis revealed that disposition and stressors were both related to psychological well-being but, unexpectedly, physical health status and social support had no associations with well-being. Stressors demonstrated an association with physical health status, and disposition was related to social support. The within-subject regressions suggested that disposition and social support moderate how changes in stressors impact on changes in psychological well-being, and how changes in emotional states impact on changes in physical health status. An association was found between
stressors and physical health status. The intraindividual findings revealed that, in
general, the variables within each major construct related to one another in line with
conceptual expectations. When examining associations between constructs, aggregate
findings, for the most part, could not be replicated at the individual level. The case
study suggested that changes in stressors and psychological well-being precede and
follow a relapse in the disease.

Overall, the findings provided mixed support for the theoretical model. However, the
quantitative findings, in combination with contextual information and observational
evidence, contributed valuable insights regarding the MS illness process. During
relatively stable periods of the disease, in general, psychological functioning does not
appear to influence physical functioning, or vice versa. Persons with MS appear to use
denial and other defence mechanisms to help them cope with their illness. The
appropriateness of the methodological approaches used are discussed, and some of the
difficulties in conducting research with MS patients are highlighted. Finally, limitations
of the present study are noted and suggestions are made for future research.
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# TABLE OF CONTENTS

## CHAPTER 1: INTRODUCTION
Overview ................................................................. 1
Medical aspects of multiple sclerosis .................................. 3
The course of MS: Implications for research ......................... 5
Psychological aspects of MS: The early literature .................. 6

## CHAPTER 2: PSYCHOSOCIAL ASPECTS OF MULTIPLE SCLEROSIS
Stress ................................................................. 11
Psychological well-being .................................................. 16
Social support .......................................................... 26
Disposition .............................................................. 30
Summary and conclusions ............................................... 34

## CHAPTER 3: DEVELOPMENT OF THE THEORETICAL MODEL
Factors in the theoretical model ......................................... 38
  Psychological well-being .............................................. 38
  Stressors ............................................................... 41
  Disposition ............................................................. 43
    Dispositional optimism ............................................. 44
    Meaning in life ...................................................... 45
    Locus of control and health locus of control .................. 47
  Social Support ......................................................... 49
  Physical health status ............................................... 51
Relationships in the theoretical model ................................ 53
Research aims, analytic strategies and their rationale ............ 56

## CHAPTER 4: METHOD
Participants ............................................................. 59
  Demographic information ............................................. 60
<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Procedure</td>
<td>63</td>
</tr>
<tr>
<td>Measures</td>
<td>64</td>
</tr>
<tr>
<td>Psychosocial measures</td>
<td>66</td>
</tr>
<tr>
<td>Stressors</td>
<td>66</td>
</tr>
<tr>
<td>Hassles</td>
<td>66</td>
</tr>
<tr>
<td>Life events</td>
<td>66</td>
</tr>
<tr>
<td>Disposition</td>
<td>66</td>
</tr>
<tr>
<td>Meaning in life</td>
<td>66</td>
</tr>
<tr>
<td>Locus of control</td>
<td>68</td>
</tr>
<tr>
<td>Health locus of control</td>
<td>68</td>
</tr>
<tr>
<td>Optimism</td>
<td>69</td>
</tr>
<tr>
<td>Social support</td>
<td>70</td>
</tr>
<tr>
<td>Perceived social support</td>
<td>70</td>
</tr>
<tr>
<td>Sexual satisfaction</td>
<td>71</td>
</tr>
<tr>
<td>Psychological well-being</td>
<td>71</td>
</tr>
<tr>
<td>Hopelessness</td>
<td>71</td>
</tr>
<tr>
<td>Depression and anxiety</td>
<td>72</td>
</tr>
<tr>
<td>Positive and negative affect</td>
<td>72</td>
</tr>
<tr>
<td>Life satisfaction</td>
<td>73</td>
</tr>
<tr>
<td>Physical health status measures</td>
<td>73</td>
</tr>
<tr>
<td>Disability (ADL)</td>
<td>73</td>
</tr>
<tr>
<td>Physical symptoms</td>
<td>74</td>
</tr>
<tr>
<td>Self-rated health change</td>
<td>75</td>
</tr>
<tr>
<td>Physical examination measures</td>
<td>75</td>
</tr>
<tr>
<td>Disability (FIM)</td>
<td>75</td>
</tr>
<tr>
<td>Impairment and neurologic dysfunction</td>
<td>76</td>
</tr>
<tr>
<td>Other-rated health change</td>
<td>77</td>
</tr>
<tr>
<td>Screening measure</td>
<td>77</td>
</tr>
<tr>
<td>Cognitive function</td>
<td>77</td>
</tr>
<tr>
<td>Data analysis</td>
<td>79</td>
</tr>
<tr>
<td>Ethical considerations</td>
<td>82</td>
</tr>
</tbody>
</table>
CHAPTER 5: CROSS-SECTIONAL RESULTS: EXAMINING RELATIONSHIPS IN THE MODEL

Univariate characteristics ................................................. 83
Bivariate analyses ........................................................... 86
  Interrelationships within constructs ................................. 86
  Associations between psychological well-being
  and other constructs ................................................. 89
  Associations among physical health status, social support,
  stressor and psychological well-being variables ............... 92
Multiple regression analyses ............................................. 92
  Determinants of psychological well-being ......................... 93
    Hopelessness ........................................................ 94
    Anxiety ................................................................... 95
    Depression .............................................................. 97
    Negative affect ....................................................... 99
    Positive affect ....................................................... 101
    Life satisfaction ..................................................... 103
Summary ......................................................................... 105
  Determinants of physical health status ............................ 106
  Determinants of social support ....................................... 107
  Determinants of stressors .............................................. 108
Conclusion ...................................................................... 109

CHAPTER 6: LONGITUDINAL RESULTS: TESTING FOR CHANGE OVER TIME

Univariate characteristics ................................................. 112
Bivariate analyses ........................................................... 112
  Interrelationships within constructs ................................. 113
  Associations between psychological well-being and other
  constructs in the model ................................................. 115
  Associations among health status, social support, stressor
  and dispositional variables ............................................. 117
Within-subject multiple regression analyses ........................................ 119
  Determinants of psychological well-being ....................................... 119
    Hopelessness .............................................................................. 120
    Life satisfaction ......................................................................... 123
  Summary ..................................................................................... 126
  Determinants of health status ........................................................ 126
    Self-rated health change .............................................................. 127
    Disability (ADL) ......................................................................... 129
    Impairment status ....................................................................... 131
    Self-rated health change (2) ......................................................... 134
    Impairment status (2) .................................................................. 136
    Neurologic dysfunction (2) ............................................................. 138
  Summary ..................................................................................... 140
  Determinants of stressors .................................................................. 140
  Conclusion .................................................................................... 141

CHAPTER 7: INDIVIDUAL RESPONSE PATTERNS

Single variable and construct patterns .............................................. 145
  Stressor variables .......................................................................... 145
  Stressor construct .......................................................................... 147
  Psychological well-being variables ............................................... 148
  Psychological well-being construct ................................................ 151
  Physical health status variables ...................................................... 154
  Physical health status construct ....................................................... 157
  Summary ..................................................................................... 160
Between construct patterns ............................................................... 161
  Determinants of psychological well-being ....................................... 162
  Determinants of physical health status ............................................. 163
  Determinants of stressors ................................................................. 166
  Summary ..................................................................................... 168
LIST OF FIGURES

Figure 1: Model relating psychosocial and physical factors in multiple sclerosis .................................................. 53
Figure 2: Model relating psychosocial and physical factors in multiple sclerosis .................................................. 84
Figure 3: Intraindividual changes in hassles and life events over seven months (case 2) ........................................ 147
Figure 4: Intraindividual changes in hassles and life events over seven months (case 8) ........................................ 148
Figure 5: Intraindividual changes in hopelessness, depression, anxiety and negative affect over seven months (case 1) ........................................ 152
Figure 6: Intraindividual changes in hopelessness, depression, anxiety and negative affect over seven months (case 11) ........................................ 152
Figure 7: Intraindividual changes in positive affect and life satisfaction over seven months (case 5) ........................................ 153
Figure 8: Intraindividual changes in positive affect and life satisfaction over seven months (case 7) ........................................ 154
Figure 9: Intraindividual changes in symptom frequency, symptom intensity, self-rated health change and other-rated health change over seven months (case 1) ........................................ 158
Figure 10: Intraindividual changes in symptom frequency, symptom intensity, self-rated health change and other-rated health change over seven months (case 3) ........................................ 158
Figure 11: Intraindividual changes in disability (FIM), disability (ADL), neurologic dysfunction and impairment status over seven months (case 6) ........................................ 160
Figure 12: Intraindividual changes in hassles and hopelessness over seven months, for a person with an internal locus of control orientation (case 1) ........................................ 162
Figure 13: Intraindividual changes in hassles and life satisfaction over seven months, for a person with high meaning in life (case 5) .................................................. 163

Figure 14: Intraindividual changes in anxiety and impairment status over seven months, for a person with low meaning in life (case 6) .................................................. 165

Figure 15: Intraindividual changes in depression and self-rated health change over seven months, for a person with strong perceived social support (case 11) .................................................. 166

Figure 16: Intraindividual changes in self-rated health change and hassles over seven months (case 1) .................................................. 167

Figure 17: Intraindividual changes in self-rated health change and hassles over seven months (case 5) .................................................. 168
LIST OF TABLES

Table 1: Demographic information about participants .......................... 62
Table 2: Variables assessed and data collection times .......................... 65
Table 3: Means and standard deviations of cross-sectional
variables ............................................................................. 85
Table 4: Intercorrelations of dispositional variables .............................. 87
Table 5: Intercorrelations of psychological well-being
variables .................................................................................. 88
Table 6: Intercorrelations of physical health status
variables .................................................................................. 89
Table 7: Correlations of psychological well-being variables
with stressor, dispositional, social support and
physical health status variables .................................................. 90
Table 8: Correlations of social support and stressor variables with
physical health status and dispositional variables ......................... 92
Table 9: Results for hopelessness regressed on stressors,
disposition, social support and health status ............................... 94
Table 10: Results for anxiety regressed on stressors,
disposition, social support and health status .............................. 96
Table 11: Results for depression regressed on stressors,
disposition, social support and health status ............................. 98
Table 12: Results for negative affect regressed on stressors,
disposition, social support and health status ............................ 100
Table 13: Results for positive affect regressed on stressors,
disposition, social support and health status ............................ 102
Table 14: Results for life satisfaction regressed on stressors,
disposition, social support and health status ............................ 104
Table 15: Variables present in the longitudinal analyses, type
of score and number of assessments ........................................... 111
<table>
<thead>
<tr>
<th>Table</th>
<th>Description</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>16</td>
<td>Intercorrelations of psychological well-being variables</td>
<td>113</td>
</tr>
<tr>
<td>17</td>
<td>Intercorrelations of physical health status variables</td>
<td>115</td>
</tr>
<tr>
<td>18</td>
<td>Correlations of well-being variables with stressor, dispositional, social support and health status variables</td>
<td>116</td>
</tr>
<tr>
<td>19</td>
<td>Correlations of social support and stressor variables with health status and dispositional variables</td>
<td>118</td>
</tr>
<tr>
<td>20</td>
<td>Results for hopelessness regressed on stressors, disposition, social support, health status and time</td>
<td>121</td>
</tr>
<tr>
<td>21</td>
<td>Results for life satisfaction regressed on stressors, disposition, social support, health status and time</td>
<td>124</td>
</tr>
<tr>
<td>22</td>
<td>Results for self-rated health change regressed on well-being, disposition and time</td>
<td>128</td>
</tr>
<tr>
<td>23</td>
<td>Results for disability (ADL) regressed on well-being, disposition and time</td>
<td>130</td>
</tr>
<tr>
<td>24</td>
<td>Results for impairment status regressed on well-being, disposition and time</td>
<td>132</td>
</tr>
<tr>
<td>25</td>
<td>Results for self-rated health change regressed on well-being, social support and time</td>
<td>135</td>
</tr>
<tr>
<td>26</td>
<td>Results for impairment status regressed on well-being, social support and time</td>
<td>137</td>
</tr>
<tr>
<td>27</td>
<td>Results for neurologic dysfunction regressed on well-being, social support and time</td>
<td>139</td>
</tr>
<tr>
<td>28</td>
<td>Summary of significant within-subject multiple regression results</td>
<td>142</td>
</tr>
</tbody>
</table>