Key words: coping with stress, resiliency, cognitive optimism, magical behavior, people living with HIV

## Abstract

Research focuses on the aspect of the importance the subjective resource of resiliency and the role of cognitive optimims and magical behavior in the context of the well-being of people living with HIV. It was expected that there would be a connection between resiliency, cognitive optimism and magical behavior, the level of perceived stress and frequency of PTSD in the group of people living with HIV (PLWH). The work consists of four parts. The first part is devoted to medical and psychological issues related to HIV virus. Epidemiological data are also represented in this part. The second part is focused on the concept of stress, the concept of coping with stress and specific types of stress triggers to which PLWH are exposed. The third part of the dissertation covers the issues of selected subjective resources and remedial strategies. The fourth part is devoted to the description of the own research methodology. This part also discusses the obtained results. The study includes a comparison of five groups of test subjects, including people living with HIV.

Objective of Research

The main aim of the work was to verify hypotheses regarding the relationship between the subjective resource such as resilience and cognitive optimism and superstitious behavior, and the level of stress and frequency of PTSD in people infected with HIV.

Another goal of the work was to diagnose whether people living with HIV differed in their coping strategies, personal resources, stress levels, and frequency of PTSD, depending on whether they had struggled with an addiction diagnosis from psychoactive substances.

Method

To achieve the adopted research goals, questionnaire surveys were conducted during individual meetings of the researcher with respondents, amongst whom were people with a positive HIV diagnosis. We used six questionnaires: stress measurement scale (SPP-25), PTSD *Checklist for DSM-5* (PCL-5) Polish adaptation, stress questionnaire( KPS), cognitive

optimism scale, superstitious behavior questionnaire (MBQ) and *The HIV / AIDS Stress Scale* Polish version.

The next part of the research project was to study a group of respondents with HIV(-) and HIV (+) serological status (–). The study was conducted in 2024 using online questionnaires. At this stage of the study used: stress measurement scale (SPP-25), PTSD *Checklist for DSM-5* (PCL-5) Polish adaptation, stress questionnaire( KPS), cognitive optimism scale and superstitious behavior questionnaire (MBQ).

Results

The findings suggest that resilience as a personal resource can be an effective factor in reducing stress levels for people living with HIV. It has been shown that the use of a remedial strategy such as superstitious behavior is associated with higher levels of overall stress. The study also revealed associations between high levels of individual cognitive optimism, and more frequent use of superstitious behaviors and higher levels of stress and people living with HIV. However, the level of social cognitive optimism was not related to the level of stress.

This study also revealed some differences in the functioning of people living with HIV with and without a diagnosis of addiction. People living with HIV with a diagnosis of psychoactive substance dependence presented higher levels of emotional tension and a higher frequency of intrusion than people living with HIV free from addiction. There were also other differences between the two groups. Seropositive subjects without a diagnosis of addiction showed a higher intensity of personal resources such as perseverance and determination to act (which are components of resilience) than seropositive subjects with a diagnosis of addiction.

There were also differences in the frequency of PTSD between the group of people living with HIV and those with HIV(-). However, these results were inconclusive and require further research.

In studies, the frequency of superstitious behavior has been shown to be both a strong mediator in the relationship between variables: social and individual cognitive optimism, and the severity of symptoms of general stress and the severity of symptoms of PTSD, as well as a predictor of the severity of symptoms of stress associated with living with HIV and PTSD.

In this paper, I identified a resource called resilience that supports reducing the severity of stress and symptoms of PTSD. This knowledge can be useful when designing psychological interventions to support and improve the quality of life of seropositive individuals. Including efforts to develop and strengthen this resource in people living with HIV can reduce psychological discomfort and facilitate adaptation to the current situation. Especially for a group of people living with HIV and struggling with addiction, this resource can play a key role, especially in terms of building perseverance and determination in action, as well as strengthening the ability to tolerate failure.

The study also emphasizes that superstitious behavior, which is associated with a higher intensity of stress, can perform various functions (mediation and predictive).
It is necessary to further verify the role of this strategy in the area of dealing with stress by seropositive people.

It is crucial to accept the importance of the role of individual cognitive optimism in the aspect of seropositive stress. Lack of confidence in science significantly affects the functioning of the individual. HIV positive people's beliefs can play an important role in making important life decisions, such as starting or continuing treatment, seeking reliable information about living with HIV, or seeing a specialist if your health deteriorates.
It is important to take into account individual cognitive optimism in understanding the phenomena associated with stress experienced by seropositive people.