Waiting Well: Tips for Navigating Painful Uncertainty

Kate Sweeny*
University of California

Abstract
Waiting for uncertain news can be a source of anxiety and distraction. This paper explores the experience of waiting for news that is both uncertain and unchangeable and provides tips for waiting well under these circumstances. During difficult waiting periods people can mitigate anxiety, reduce disruptive rumination, and minimize later harm by (1) distracting themselves from their uncertainty, (2) managing their expectations, (3) looking for the silver lining in all outcomes, (4) keeping perspective regarding the news, and (5) planning ahead for the objective and psychological consequences of bad news.

A man who is a master of patience is master of everything else.
George Savile, English statesman, writer, and politician

All men commend patience, although few are willing to practice it.
Thomas Kempis

As George Savile and Thomas Kempis eloquently expressed, patience in the face of uncertainty is desirable, even laudable, but often quite difficult to achieve. People frequently face difficult waiting periods when they anticipate uncertain news regarding their or their loved ones’ health, relationships, professional prospects, and academic outcomes. Such experiences are sufficiently significant and ubiquitous as to inspire the familiar expression, “the waiting is the hardest part,” yet the strategies people use to navigate painful uncertainty have received little empirical attention. How do people manage their anxiety as they await uncertain news? Are there strategies people can use to be more patient as they wait? The purpose of this paper is to explore the experience of waiting under conditions of uncertainty and to provide a set of empirically-supported tips for waiting well.

The Experience of Waiting for Uncertain News

Undoubtedly, nearly everyone can bring to mind a time when they anxiously awaited some important news. In academic life, for example, the experience of waiting is nearly constant: academics must await decisions about manuscripts, grant proposals, tenure and promotion, and job offers. Thus, at the level of personal experience, the nature of waiting is likely all too familiar. In contrast, almost no empirical research has targeted this experience to determine the affective and cognitive qualities of waiting, the nature and consequences of strategies for coping with waiting periods, or the situational and individual moderators that might impinge upon the waiting experience. Fortunately, a number of disparate literatures address issues related to the experience of waiting, and this paper will draw from these literatures to provide empirical support for its claims. The focus of this paper is on waiting periods during which people can do little or nothing to alter their
inevitable outcomes, as is the case following a diagnostic medical procedure, job inter-
view, exam, performance evaluation, and the like.

The discussion also most clearly applies to situations in which the news could be good
or bad, not simply neutral, although it is intended to apply to situations in which the news
affords opportunity only for gain (e.g., winning an award or not), only for loss (e.g., being
diagnosed with an illness or not), and both (e.g., receiving a grade on an exam). Clearly all
uncertainty is not created equal, and psychological reactions to stressful uncertainty depend
on the importance, controllability, predictability, and chronicity of the circumstances sur-
rounding uncertainty (Folkman, Lazarus, Gruen, & DeLongis, 1986; Gruen, Folkman, &
Lazarus, 1988; Stone & Neale, 1984). Presumably, people would benefit most from strate-
gies to cope with waiting periods when the waiting is most difficult. However, anecdotal
experience suggests that uncertainty that may seem insignificant to others can be highly
anxiety-provoking to the person experiencing the uncertainty, and as such the tips
provided in this paper can aid in waiting well under a variety of circumstances.

The value of waiting well

Prior to tackling the strategies people can use to mitigate the discomfort of waiting, it is
worth establishing whether the experience of waiting is sufficiently consequential to war-
rant study. In fact, the experience of waiting can lead to anxiety and distraction from
other aspects of life, and the way in which people wait has downstream consequences
after the news is revealed.

Numerous theorists and researchers have established a link between uncertainty and anx-
xiety based on both self-report and physiological measures (Knyazev, Savostyanov, & Levin,
2005; Mishel, 1981; Penrod, 2001, 2002; Reiman, Fusselman, Fox, & Raichle, 1989;
Ellsberg, 1961; Izard, 1991; Parsons, 1980). Not surprisingly, people are motivated to
eliminate this anxiety by reducing uncertainty if possible (Afifi & Weiner, 2004; Loewen-
stein, 1994). However, in many cases people do not have immediate access to the desired
information, and in these situations uncertainty may be particularly anxiety-inducing. For
example, women who were diagnosed with a precursor to cervical cancer reported intense
distress and worry as they waited to see if cancer would develop (Mortensen & Adeler,
2010), and women discharged following a mastectomy reported anxiety related to their
uncertainty over whether the treatment was effective (Wong & Bramwell, 1992). In fact,
waiting is often more anxiety-provoking than even dire medical procedures and diagnoses.
Patients in a study of surgical wait times were more anxious about waiting for the surgery
than about the surgery itself (Janzen & Hadjistavropoulos, 2008), and women awaiting a
breast biopsy were more anxious than a comparison group of patients who were receiving
treatment for diagnosed medical conditions (Flory, Faintuch, & Lang, 2008). Other evi-
dence suggests that even when people know that their likelihood of facing a bad outcome
is low, they nonetheless experience anxiety as they wait (Epstein & Roupenian, 1970).

Anxiety over uncertainty is not only unpleasant but can also interfere with the ability to
proceed with other tasks. Research on rumination suggests that the persistent and repetitive
thoughts that are likely to arise when awaiting uncertain news can have a host of negative
consequences (Lyubomirsky & Tkach, 2003; Nolen-Hoeksema, Wisco, & Lyubomirsky,
2008). Rumination can impair memory (Hertel, 1998), reading comprehension (Lyubo-
mirsky, Boehm, Kasri, & Zehm, forthcoming), and problem-solving ability (Lyubomirsky
& Nolen-Hoeksema, 1995; Lyubomirsky, Tucker, Caldwell, & Berg, 1999; Strack, Blaney,
Ganellen, & Coyne, 1985). One study further found that ruminators were less likely than
nonruminators to commit to plans they formulated, in part due to reduced satisfaction with
and confidence in their plans (Ward, Lyubomirsky, Sousa, & Nolen-Hoeksema, 2003). Similarly, ruminators are less likely to take action even when failing to do so could be life-threatening. A study of breast cancer survivors revealed that ruminators reported longer delays between first noticing breast cancer symptoms and contacting their healthcare provider (Lyubomirsky, Kasri, Chang, & Chung, 2006).

In addition to these deficits in performance and instrumental behavior, rumination also has negative social consequences. A study that examined coping styles following the loss of a loved one found that although ruminators requested more social support, they were less likely than nonruminators to receive it (Nolen-Hoeksema & Davis, 1999). Ruminators may receive less social support in part because people perceive ruminators in an unfavorable light (Schwartz & McCombs-Thomas, 1995). Taken together, these findings suggest to the extent that people ruminate on their uncertainty as they wait, they are likely to suffer cognitive, social, and behavioral consequences in other areas of life.

The way in which people navigate uncertainty can also have consequences once the uncertain news is revealed. Research on proactive coping suggests that people who prepare in advance for a stressful event by accumulating resources, gathering information, and engaging in psychological preparation experience fewer negative consequences in the face of an aversive event (Aspinwall & Taylor, 1997; Mallett & Swim, 2005, 2009). Actions taken (and opportunities missed) during a waiting period can have objective consequences, particularly following bad news. For example, an employee awaiting news about lay-offs can make preemptive preparations for the possibility of unemployment by delaying large purchases, reducing spending, and investigating other job opportunities, and to the extent the employee engages in such behavior during the waiting period the financial consequences of a lay-off will be minimized. Of course, such preparations could waste time and resources if the feared outcome (in this case, being laid-off) does not occur, a point that will be addressed later in this paper.

Similarly, waiting strategies can increase or decrease the emotional impact of bad news. For example, people who manage their expectations appropriately or look in advance for the silver lining in all outcomes may be better prepared to cope with bad news (Davis, Nolen-Hoeksema, & Larson, 1998; Shepperd & McNulty, 2002; Sweeny & Shepperd, 2010). A primary goal of this paper is to provide strategies that can not only minimize anxiety and disruption during waiting periods but also minimize harm and maximize benefit once the uncertainty is resolved.

Previous research related to waiting

In light of the affective, cognitive, and social consequences of the waiting experience, the value of establishing strategies to reduce the negative impact of waiting is clear. Fortunately, several areas of psychological research speak to the issue of waiting well, albeit incompletely. The vast literature on stress and coping (e.g., Carver & Connor-Smith, 2010; Carver & Scheier, 1999; Folkman & Moskowitz, 2004; Lazarus & Folkman, 1991) provides insight into the typical and most effective responses to various stressful situations. Waiting for uncertain news is anxiety-provoking and thus likely to be stressful, and as such it may be informative to consider research on the adaptiveness of appraisal and coping strategies (Cignac & Gottlieb, 1997; Folkman & Moskowitz, 2000; Somerfield & McCrae, 2000). However, the relevance of this research is limited in that the literature on stress and coping typically examines appraisal and coping responses to identified threats, and the processes that target a known stressor surely differ in notable ways from the processes that target an uncertain outcome.
More relevant to uncertain situations is the literature that addresses judgment under uncertainty (e.g., Kahneman & Tversky, 1982; Tversky & Kahneman, 1974), but neither is this research a perfect fit. Waiting by definition is a temporary state, or at least one that people anticipate to be temporary, and thus the most relevant considerations are not how people make decisions and form judgments while they wait but rather how they psychologically “survive” the uncertainty for as long as it persists.

Two literatures provide clear insight into the waiting experience. Consumer research has investigated the consequences of waiting for known outcomes that will occur at an unknown time (e.g., being seated at a restaurant, having a customer service call answered; Munichor & Rafaeli, 2007). For example, one study examined the effects of objective and perceived wait times in check-out lines at supermarkets and found that in general, longer wait times were related to lower customer satisfaction with the server and the store (Tom & Lucey, 1997). Other studies examine the effectiveness of tactics for improving the waiting experience (e.g., Katz, Larson, & Larson, 1991; North, Hargreaves, & McKendrick, 1999). Although these studies point to potentially useful strategies for mitigating the pain of waiting, they limit their investigations to relatively inconsequential circumstances and limit their outcome measures to customer behavior and customer satisfaction rather than self-focused psychological outcomes (e.g., anxiety, affect, rumination, etc.). Furthermore, they examine situations in which the outcome is known (albeit occurring at an unknown time) rather than uncertain, thus limiting the relevance of their conclusions.

The research most relevant to the experience of waiting examines the phenomenon of bracing for bad news (see Carroll, Sweeny, & Shepperd, 2006 for a review). This topic will be addressed in more detail later in the paper, but in broad terms this research finds that people shift away from optimism and lower their expectations for their outcomes as feedback draws near (e.g., Shepperd, Ouellette, & Fernandez, 1996; Taylor & Shepperd, 1998). A number of factors contribute to this downward shift in expectations, but one reason people become more pessimistic at the moment of truth is to protect themselves from disappointment in the face of bad news (Shepperd & McNulty, 2002; Sweeny, Carroll, & Shepperd, 2006; Sweeny & Shepperd, 2010).

Research on bracing suggests that one way people manage uncertainty is by calibrating their expectations in an effort to minimize the pain of negative feedback. However, it seems likely that awaiting a possible emotional and psychological blow entails more than simply setting up a desirable contrast between expectations and outcomes. People not only consider their emotional reactions to the news when it comes; they must also find ways to tolerate the anxiety that inevitably accompanies uncertainty. Thus, the literature on bracing provides a starting point but does not offer a complete picture of the strategies people use to endure difficult waiting periods. However, a recent theoretical paper (Sweeny & Cavanaugh, 2010) presents a model of uncertainty navigation that applies related but disconnected literatures to the issue of waiting in an attempt to understand how people typically manage the waiting experience and what the consequences of these strategies might be. This model will serve as the basis for the following tips for waiting well.

**Tips for Waiting Well**

**Tip #1: Distract yourself**

Perhaps the most intuitive way to endure a difficult waiting period is simply to not think about it. In fact, coping researchers have concluded that distraction is an appropriate coping strategy when a situation is uncontrollable and thus does not present opportunities for
more active responses (Lazarus, 1985), as is the case when people await uncertain news. Research on rumination provides further support for the effectiveness of distraction. Distraction from self-focused, repetitive thoughts improves problem-solving abilities, reduces distress, and encourages a positive outlook (Lyubomirsky & Nolen-Hoeksema, 1995; Lyubomirsky et al., 1999; Nolen-Hoeksema et al., 2008).

In many ways distraction is similar to denial, and as such distraction may seem at first glance to be an undesirable strategy for navigating uncertainty. However, many common beliefs about coping, including the belief that denial denotes maladjustment, are myths (Wortman & Silver, 1989, 2001). Numerous researchers and physicians have concluded that short-term denial is a typical and even beneficial response to difficult life events (Bor, Miller, Goldman, & Scher, 1993; Faulkner, 1998; Greer, Morris, & Pettingale, 1979; Radziewicz & Baile, 2001). Of course, not all distraction techniques are equally effective. Aside from the obvious suggestion to avoid self-destructive distractions such as binge-drinking and drug use, it may also be ineffective to bounce from one distraction to another without fully investing in any particular activity (Nolen-Hoeksema et al., 2008). Instead, it is best to find a particularly enjoyable and absorbing activity to distract from thoughts of uncertainty during difficult waiting periods. In addition, a growing body of evidence supports the effectiveness of mindfulness meditation for reducing rumination (Chambers, Lo, & Allen, 2008; Jain et al., 2007; Ramel, Goldin, Carmona, & McQuaid, 2004; Shapiro, Oman, Thoresen, Plante, & Flinders, 2008).

Tip #2: Manage your expectations

Distraction may be an effective strategy for waiting well, but often it is difficult or even impossible to avoid reminders of the uncertainty. In these cases, people must instead attempt to manage their thoughts about the situation to best mitigate anxiety during the waiting period and to minimize negative consequences upon learning the uncertain news. One key strategy to this end is expectation management, which can take two forms during the course of a waiting period: bracing for bad news and maintaining hope or optimism. Although these two forms of expectation management may seem in conflict, in fact pessimism about the likelihood of a good outcome and hope for that good outcome can coexist (Bruininks & Sweeny, 2008). Furthermore, optimism and pessimism typically are fluid over the course of a waiting period, such that people become less optimistic over time in a strategic effort to maximize the benefits of optimism (e.g., Segerstrom, Taylor, Kemeny, & Fahey, 1998; Taylor & Brown, 1988; Taylor, Lichtman, & Wood, 1984) while also bracing for the worst at the moment of truth (Carroll et al., 2006).

Turning first to bracing for bad news, as discussed earlier people often manage their anxiety about upcoming feedback by lowering their expectations as feedback draws near (Carroll et al., 2006; Sweeny & Krizan, forthcoming). Numerous studies that measure predictions over time find that people will shelve optimism in favor of a more realistic or even pessimistic outlook as the moment of truth draws near and have documented these downward shifts in contexts ranging from predictions of starting salaries to predictions of performance in a scavenger hunt (Armor & Sackett, 2006; Gilovich, Kerr, & Medvec, 1993; Savitsky, Medvec, Charlton, & Gilovich, 1998; Shepperd et al., 1996; Sweeny & Shepperd, 2007; Sweeny, Shepperd, & Carroll, 2009). Although common wisdom suggests that adopting a pessimistic outlook is unwise (e.g., James, 1987; Sully, 1877), research reveals that pessimism carries few or no costs in the moments before the end of a waiting period and confers emotional protection from disappointment and other negative emotions in the face of bad news (Sweeny & Shepperd, 2010).
Alternatively, people can manage their expectations toward hope or optimism. A hopeful outlook has numerous benefits, including increased protection and speedier recovery from illness (Richman et al., 2005; Segerstrom et al., 1998) and better psychological adjustment in the face of difficult circumstances (Taylor et al., 1984). Uncertainty can even feel pleasurable when people are optimistic about their likely outcomes (Wilson, Centerbar, Kermer, & Gilbert, 2005). As noted earlier, the best advice may be to maintain optimism early in a waiting period and then shift toward pessimism just prior to learning the uncertain news (Armor, Massey, & Sackett, 2008; Sweeney et al., 2006), all the while maintaining hope for (but not necessarily expectation of) a good outcome.

**Tip #3: Look for the silver lining in all outcomes**

A key aspect of most difficult waiting periods is fear of a bad outcome, such as a dire diagnosis, a failing grade, or a poor performance evaluation. To mitigate this painful aspect of waiting, people can engage in reappraisal by looking for the benefits in undesirable outcomes and reducing the importance or value of desirable outcomes. Research on benefit-finding following loss or trauma finds that people can reevaluate such experiences as opportunities for growth and personal improvement (Davis et al., 1998; Janoff-Bulman & Frantz, 1997), and doing so reduces distress and depression and boosts well-being and psychological adjustment (Carver & Antoni, 2004; Davis et al., 1998; Littlewood, Vanable, Carey, & Blair, 2008). Although no empirical work has examined benefit-finding during a waiting period, it requires only a small leap to infer that generating potential benefits in advance of bad news would both reduce the fear of the bad outcome and promote more positive responses to the outcome if it occurs.

People can also reduce their fear of a bad outcome by reducing their attachment to the hoped-for outcome. In a sense, this strategy is the flip-side of looking for the silver lining, but both strategies have the same goal: to derail the emotional roller-coaster of hope and fear. Studies of patients with chronic and deteriorating illnesses often find that their well-being does not decline as the disease progresses because these patients repeatedly redefine their standard for an acceptable level of health to adjust for each new setback (Bach & Tilton, 1994; Schwartz, Sprangers, Carey, & Reed, 2004; Schwartz et al., 2006; Sprangers & Schwartz, 1999). People can engage in a similar process during a waiting period by considering whether the hoped-for outcome is perhaps not as important or desirable as they initially believed. Similarly, the literature on goal management concludes that disengagement from unattainable goals and subsequent reengagement with alternative goals is related to physical and psychological well-being, including decreased cortisol levels, fewer physical health problems, less psychological distress, and better sleep (Wrosch, Miller, Scheier, & de Pontet, 2007). Of course, during waiting periods it remains unclear whether a good outcome is still an attainable goal, but people who minimize their attachment to that goal and even reconsider the definition of a good outcome will likely experience less anxiety as they wait and less distress in the face of bad news.

**Tip #4: Keep things in perspective**

Another option for reducing anxiety in anticipation of uncertain news is to reappraise the implications of the news. That is, people can reduce the potential sting of a bad outcome by calling into question the validity of the news as a gauge of their self-worth or aptitude, or by casting doubt on the reliability of the news source. People frequently engage in this type of reappraisal upon receiving negative feedback. Studies have demonstrated that
people doubt the validity of negative performance evaluations, poor intelligence test results, and feedback indicating a lack of social sensitivity (Pyszczynski, Greenberg, & Holt, 1985; Wyer & Frey, 1983). In fact, one challenge in communicating critical health information is overcoming people’s tendency to reject or meet with skepticism any feedback that paints them in an unfavorable light (Gilovich, 1991). For example, heavy caffeine drinkers are particularly skeptical of information on caffeine’s risks (Kunda, 1987), and smokers are particularly unconvinced by the Surgeon General’s warnings against smoking (Kassarjian & Cohen, 1965). In a similar way, people can reduce their anxiety over the potential impact of bad news by concocting reasons to doubt the feedback or its implications even before they receive it. This strategy could be problematic if it undermines the enjoyment of good news or, worse yet, undermines the motivation to respond appropriately to bad news, but in the face of paralyzing anxiety over uncertainty it nonetheless may be an effective way to make the waiting bearable.

**Tip #5: Plan ahead**

A final tip for waiting well is to plan ahead for the potential objective and psychological consequences of bad news. This strategy can reduce the detrimental impact of a bad outcome if one occurs, but it can also provide comfort during a waiting period by conferring a sense of control (Peterson, 1999; Taylor & Brown, 1988). Regarding preparation for objective consequences, people might take action during a waiting period to mitigate financial, professional, and interpersonal costs or costs of time and effort that could result from bad news. To return to an earlier example, the employee awaiting news about layoffs can prepare for the worst by preemptively adjusting the family budget or investigating other job opportunities, thereby minimizing the impact of bad news. Such efforts constitute a type of proactive coping (Aspinwall & Taylor, 1997), and research suggests that people who engage in proactive coping suffer fewer negative consequences in the face of stressful or traumatic events (e.g., Mallett & Swim, 2005, 2009).

Regarding preparation for psychological consequences, people can evaluate potential coping strategies or rehearse their plans for successfully coping with bad news (Feldman & Hayes, 2005; Taylor, Pham, Rivkin, & Armor, 1998). For example, interviews with women undergoing chemotherapy revealed that the women prepared themselves for the possibility of hair loss by contemplating various possible coping strategies and by trying on wigs and scarves to reassure themselves that they would be able to cope with hair loss if it occurred (Frith, Harcourt, & Fussell, 2007).

Like the previous tip, planning ahead is not without costs. Any time, effort, or money spent on preparing for bad news essentially goes to waste if people instead receive the hoped-for good news. As mentioned earlier, such preparations may also be beneficial during the waiting period by providing a sense of control in an otherwise uncontrollable situation, but people should weigh this benefit against the potential cost of preparing for a nonevent.

**Summary and Implications**

The goals of this paper were to delineate the challenges of waiting for uncertain news and to provide strategies for navigating this familiar but often difficult experience. The value of these strategies is in their potential to mitigate anxiety and distracting rumination during waiting periods and to maximize benefit and minimize harm in the face of bad news. To this end, people can distract themselves from their uncertainty, manage their
expectations, reappraise the value of their potential outcomes and the validity of the news source, and plan ahead for objective and psychological consequences of bad news. These strategies for waiting well vary in their emotional, cognitive, and objective benefits, but taken together they provide a roadmap for reducing the pain of uncertainty. Further to that end, I tentatively propose that over the course of a difficult waiting period the optimal time course for these strategies may to plan ahead at the outset when the uncertainty is still fresh in one’s mind and distraction is unlikely to be effective, then to proceed to distraction if possible. To the extent that distraction fails and uncertainty sneaks into awareness, managing expectations, finding the silver lining, and keeping things in perspective can serve to mitigate anxiety and rumination even as the uncertain information weighs heavy on the mind.

To be clear, this paper is not intended to promote a one-size-fits-all approach to waiting well. The presentation of a variety of coping strategies emphasizes that patience is not as simple as the popular advice to “think positively” or “just take your mind off it.” Such myths of coping can be harmful to people who find it difficult to follow the common wisdom and instead find themselves drawn toward pessimism or rumination (Wortman & Silver, 1989, 2001). A number of different strategies may be equally effective for reducing anxiety over uncertainty, and characteristics of the situation or person likely influence the ease and effectiveness of one strategy over another. For example, dispositional optimists may be particularly successful at finding the silver lining in all outcomes (Affleck & Tennen, 1996; Carver et al., 1993), and the temporal proximity of feedback in part determines the effectiveness of adopting an optimistic or pessimistic outlook (Carroll et al., 2006). Additional research can pin down the relative costs and benefits of each strategy and the key moderators of their effectiveness, but ultimately people must determine for themselves which strategies they find most satisfying and most successful for waiting well. As such, this paper can serve as a starting point for people who find themselves in a difficult waiting period and are unsure how best to endure it.

Short Biography

Kate Sweeney’s research encompasses interests in both social and health psychology, with a focus on threat management: how people give news of, prepare for, and respond to negative life events. Her research program incorporates the study of risk judgments, coping, decision-making, emotions, social cognition, health, and communication. She has authored and co-authored papers on these topics in numerous peer-reviewed journals in social, health, and general psychology, in addition to several book chapters. She received her PhD from the University of Florida and is now an assistant professor in the psychology department at the University of California, Riverside.

Endnote

* Correspondence address: University of California, 900 University Ave., Riverside, CA 92521, USA. Email: ksweeny@ucr.edu

References


