Researchers and clinicians have focused efforts on identifying and mitigating psychological distress among persons who seek genetic counseling and testing for inherited cancers. Elevated levels of distress may impact a person’s ability to understand and cope with complex information provided during genetic counseling, interfere with health decisions, and negatively affect quality of life. This study evaluated the relationship of demographic, family history, and psychosocial factors to depression, state anxiety and cancer-specific distress among 268 adult women who underwent genetic counseling for hereditary breast and ovarian cancer. Before counseling, women completed questionnaires that assessed demographic and psychosocial characteristics. Data regarding cancer family history was obtained from genetic counseling records. The association of independent variables with each outcome measure of psychological distress was evaluated in univariate and multivariate analysis. Multivariate analysis showed that lower income and having a blunting coping style were associated with higher mean state anxiety scores. Having at least one female first-degree relative with breast cancer was associated with higher mean depression scores. Higher perceived risk of carrying a \textit{BRCA1} or \textit{BRCA2} mutation was associated with higher cancer-specific distress. Having a greater number of sisters affected with breast cancer was associated with higher mean scores on a measure of intrusive thoughts about cancer. Women who were more likely to anticipate negative emotional reactions to positive genetic test results also were more likely to have higher mean scores on all distress measures. These findings suggest that specific factors may be associated with increased psychological distress among persons who seek genetic counseling and testing for HBOC. Awareness of such factors may help genetic counselors to identify individuals who may benefit from additional psychosocial support during the genetic counseling and testing process.