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The Duality of Hope and Hopelessness: Impacts on Relationship Intimacy, Mental Health, and Community Engagement

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Hope and hopelessness are pivotal in shaping emotional resilience, mental health, and social practices. This review redefines hope and hopelessness, analyzes generational differences, and evaluates potential impacts on interpersonal relationships. We analyzed existing literature and created a framework of how intersectional factors and lived experience dictate one's perception of hope and hopelessness. Our findings suggest that hope is positively correlated with stronger interpersonal bonds and safer relational practices, whilst hopelessness is associated with heightened stress, reduced sociability, and increased intimate violence (IPV). This understanding offers practical insights for interventions aimed at cultivating hope and mitigating hopelessness across generations, ultimately fostering stronger relationships and improving well-being among populations.

INTRODUCTION

Hope, often defined as the driving force that sustains perseverance and quality of life, contrasts with hopelessness, which represents the absence of this force.[1] Although commonly perceived as opposing states, hope and hopelessness emerge from distinct causes and have unique effects on emotional resilience, mental health, and motivation. Modern challenges, including economic instability, rapid technological advancements, and evolving social norms, have intensified emotional complexities across generations. Typically, hope peaks during young adulthood and declines with age.[2] However, Generation Z, born from 1997 to 2012, reports markedly lower levels of hope than preceding generational cohorts.[3]

Incorporating an intersectional lens into this discussion is crucial, as it recognizes that individuals' experiences of hope and hopelessness are shaped by the complex interplay of their various identities and social contexts.[4] Intersectionality prompts us to acknowledge that factors such as race, class, gender, sexuality, ability, and other social identities intersect to create unique lived experiences that influence one's outlook on life and mental health.[5] At a population level, these factors can result in significant public health impact.

It has been suggested that Baby Boomers (1946–1964), Generation X (1965–1980), Millennials (1981–1996), and Generation Z (1997–2012) display diverse attitudes toward societal expectations, prospects, and personal well-being.[6] Despite this, systematic research exploring generational variations in hope, hopelessness, and their effects on relationships and intimacy remains limited.

Intersectional issues can affect feelings of hope and hopelessness and must be examined to address health disparities across generations.[7] Through an intersectional lens, we aim to uncover how cultural and economic conditions shape generational attitudes toward hope. These findings could provide actionable insights for designing public health interventions that enhance well-being, resilience, and relationship quality among populations while addressing the unique needs of diverse subgroups within each generation.

This research advances the broader goal of health equity by highlighting how intersecting factors such as race, class, gender, and generational experiences influence levels of hope and hopelessness. Understanding these complex interactions enables public health professionals to create more targeted and effective strategies to promote mental health and well-being, ultimately contributing to a more equitable distribution of health outcomes.

METHODS

To analyze the effects of hope and hopelessness on individuals, we conducted a non-systematic literature review (NSLR), examining relationships between hope, hopelessness, and factors such as interpersonal relationship quality, digital media usage, and generational differences.

The review began with a focus on hopelessness, evaluating its measurement across studies using tools such as the Beck and Kazdin Scales. The Beck Hopelessness Scale (BHS) is a 22-item true/false questionnaire and is frequently used to assess levels of depression and stress, with higher scores indicating greater hopelessness.[8] For adolescents, the Kazdin Hopelessness Scale for Children (HSC) provided a

six-item test to evaluate negative expectations about the self and the future.[9] Although literature on hopelessness was relatively more established, research on hope was limited, which promoted a broader approach. As we progressed throughout the review, it became apparent that hope and hopelessness were distinct constructs influenced by separate variables. This realization expanded our focus to include the study of hope, particularly in its relationship to intimacy and broader socioeconomic factors, such as economic prosperity, political stability, and generational contexts.

To synthesize findings and identify potential intervention pathways, we developed a causal loop diagram (CLD) to map the interactions among key variables influencing hope and hopelessness. These diagrams function as a conceptual framework, visualizing potential causal relationships and feedback loops within the system. By analyzing the CLD, we identified factors that contribute to hope and hopelessness, providing a foundation for designing targeted interventions and formulating generation-specific hypotheses. The CLD was constructed using Vensim Software, enabling a precise and dynamic representation of the complex interconnections that shape hope and hopelessness.[10]

RESULTS

(RE)DEFINING HOPE AND HOPELESSNESS

The literature review revealed contrasting definitions of hope and hopelessness. Hopelessness is often described as a pervasive collection of negative expectations about oneself and the future, closely tied to depression.[9,11] Hope, in contrast, is associated with perseverance of achieving a high quality of life, or building on a sense of agency and belief in being able to accomplish the goal.[11] These initial definitions suggest that hopelessness is not simply the absence of hope but a distinct cognitive and emotional state.

After further exploring the differences in attitudes toward hope and hopelessness across generations, we found that while existing articles emphasize perseverance and amotivation, these definitions fail to capture three key ideas.

First, we observed that the underlying patterns of what hope means to each generation remains consistent. While each generation has faced distinct adversities—such as war, economic recessions, or pandemics—they have also experienced unique positive influences, such as advancement in technology and improvements in quality of life. Despite these differences, the core motivations for maintaining hope, or being "hopeful," stay largely the same across generations and associated with the sense of having agency and ability to achieve a goal.[12]

Second, we identified that hope and hopelessness can coexist. Individuals may experience hope in certain aspects of their lives, such as personal growth or relationships, while simultaneously feeling hopeless about external circumstances, like societal or political challenges. This coexistence of hope and hopelessness challenges traditional views and suggests a more nuanced understanding of these emotional states. Additionally, literature has raised questions about extending the definition of hope to include internal and external loci of control.[11] The ability to influence aspects of one's life is believed to impact the perception and experience of hope.[11]

Thirdly, we identified that some authors assumed that hopelessness exists only in the absence of hope, often linking hopelessness to a main cognitive sense of depression.[11] However, we argue that this perspective oversimplifies the relationship between hope and hopelessness, and we argue that they should viewed as more complex and interrelated constructs rather than opposites.

With all these considerations, we propose the following updated definitions for hope and hopelessness that reflect the changes in generations and coexistence:

1. Hope: An individual's internalized, resilient expectation of optimistic futures for their personal being or society.
2. Hopelessness: An individual's persistent belief in pessimistic futures for their personal being or society.

These definitions emphasize that hope and hopelessness are two sides of the same coin rather than being direct opposites. For example, one can retain hope for personal well-being while harboring hopelessness about societal challenges—and vice versa. This perspective better captures the resilience of hope across generations and the entrenched nature of hopelessness. Through these definitions, we posit that our review provides a foundation for programs that nurture hope, minimize hopelessness, and strengthen interpersonal relationships across populations.

EFFECTS OF HOPE AND HOPELESSNESS

RELATIONSHIP INTIMACY

Our analysis highlights the intricate role(s) of hope and hopelessness in shaping the quality and stability of romantic relationships, specifically how hope appears to enhance while hopelessness can significantly undermine these partnerships. Hope can act as a buffer against conflict and negativity, enabling partners to accommodate and adapt to challenges, even when destructive behaviors (intimate partner violence, domestic disputes, etc.) arise.[11] Hope can facilitate communication, and improve relationships – a research study from BYU found that relationship hope was strongly correlated with relationship happiness, with married couples thinking about divorce (a sign of low relationship hope) scoring a full point lower on hope and happiness scales than healthy couples.[13] Additionally, hopeful partners demonstrate greater empathy and emotional intimacy, with hopeful partners scoring slightly higher on empathy tests ($r = 0.134$, $p = 0.016$).[14]

Meanwhile, hopelessness undermines relationship stability by fostering uncertainty and disillusionment. Hopelessness, through qualitative interviews, was also found to increasethe likelihood of interpreting a partner's actions negatively, contributing to harmful communication patterns.[15] Hopelessness diminishes motivation to address challenges or invest in improving relationships, contribut-

ing to gradual erosion of connection and commitment and isolation.[16] Overall, hopelessness significant reduces commitment, increases stress, and decreases intimacy in relationships, as well as decreasing number of interpersonal relationships.

MENTAL HEALTH

Hope and hopelessness exert profound influences on mental health. Hopelessness is strongly associated with increased risk of depression and is also a key predictor of suicidal ideation and suicide: from adolescents who took the Beck Hopelessness Scale, each one-scale unit increase of the hopelessness scale was related to a 6.3% increase in expected suicidal ideation.[17]

On a individual level, hopelessness impacts various life domains. Longitudinal data from 2007 to 2017 show that hopelessness indirectly led to unstable employment, limited work opportunities, and increased co-residency with parents, which could further contribute to increased social isolation and psychological distress and decreased interpersonal relationships.[17]

Hope, however, is associated with resilience and self-efficacy, both of which contribute to enhanced psychological well-being, and is associated with goal-setting and the motivation to pursue and achieve these goals.[18] Public health interventions such as mobile-based logotherapy, which focuses on finding meaning and hope, have been effective in reducing depression and suicidal ideation in patients with major depressive disorder.[19] Through our analysis, hope supports mental health by promoting positive coping mechanisms and enhancing individuals' confidence in overcoming challenges.

ENVIRONMENT AND COMMUNITY

As discussed, hope and hopelessness significantly influence mental health, with many attributing the rise in mental health challenges to environmental turmoil, whether political or communal. Over time, societal shifts—such as economic prosperity and downtowns or political stability and turmoil—have had profound impacts on individuals' mental and emotional states.

Hope plays a crucial role in motivating community engagement and activism. It gives individuals the belief that their efforts can lead to positive change, even in the face of significant challenges. This sense of possibility drives people to engage in community activities and work towards collective goals.[20] Hope involves setting goals, identifying pathways to achieve them, and fostering a sense of agency.[21] It serves as a framework for individuals' involvement in community efforts, guiding them in pursuing common objectives.[22] Those with higher levels of hope are often more motivated to participate in activism and share a collective vision for societal change.

Moreover, hope supports resilience by encouraging individuals to seek alternative strategies when facing obstacles, rather than giving up.[23] This resilience fosters community building, as people collaborate to achieve shared goals and experience a sense of collective reward. Individuals with higher levels of hope are more likely to make effective decisions, succeed in their endeavors, pursue their goals, and experience improved physical and psychological well-being. Hope helps maintain commitment to community work overtime, even when immediate results are not evident.

On the other hand, hopelessness can severely decrease community engagement, leading to social withdrawal and diminished participation. Feelings of hopelessness are often associated with social isolation, which can prevent individuals from participating in communal activities. For example, a study focusing on older Chinese adults in the United States found that depression, often linked to hopelessness, is a significant health problem that contributes to disengagement from community events. Hopelessness may also crease psychological barriers to participation, such as negative perception of one's ability to make a difference, which can hinder individuals from taking initial steps towards involvement, such as joining local groups or attending community events.[23]

CAUSAL LOOP DIAGRAM

We developed a Causal Loop Diagram (CLD) to summarize the associations various factors have on hope and hopelessness (Figure 1). We identified a reinforcing loop between hopelessness, motivation, and commitment to relationships. Specifically, hopelessness reduces motivation, which in turn decreases commitment to relationships, thereby increasing hopelessness. This cycle illustrates how hopelessness can perpetuate itself through reduced relational engagement.

We identified another reinforcing loop between hopelessness, stress, and commitment to relationships. Here, we observed how hopelessness increases stress, which then diminishes commitment to relationships, ultimately exacerbating feelings of hopelessness. We also found a reinforcing loop between hopelessness, stress, and depression. As hopelessness increases stress, this stress can lead to depression, which further intensifies hopelessness.

We also found a reinforcing loop linking hopelessness, suicidal ideation, social isolation, and community engagement. Hopelessness was found to increase suicidal ideation, which in turn contributes to social isolation. This isolation decreases community engagement, further intensifying hopelessness. Meanwhile, we identified a reinforcing loop between hope, motivation, work, economic prosperity, political turmoil, and community engagement. We hypothesize that hope increases motivation, which in turn enhances work and economic prosperity. Economic success can lead to political turmoil, which prompts increased community engagement, thereby reinforcing hope.

Overall, we posit that hope and hopelessness are predominantly impacted by factors such as depression, commitments to relationships, motivation, social isolation, and community engagement. As a result, hope and hopelessness relate to various destructive influences throughout interpersonal relationships.

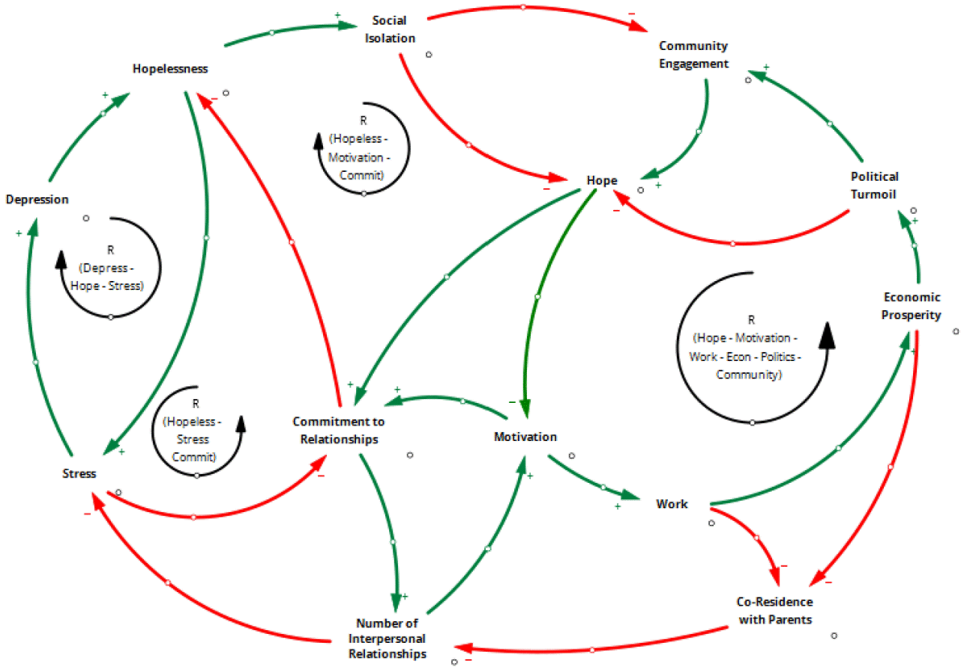

Figure 1. Causal Loop Diagram of hope, hopelessness and surrounding factors.

DISCUSSION

POSSIBLE INTERVENTIONS

To disrupt the reinforcing cycles of hopelessness and nurture hope, programs or interventions could target several nodes in the diagram representing structural and psychological factors.

One important structural measure for intervention is economic stability, which serves as a key factor in reducing hopelessness.[24] Policies that promote stable employment, fair wages, and affordable housing are critical for mitigating baseline stress.[24] Specifically, possible solutions include increasing job opportunities and reducing social isolation and creating policies that decrease the necessity of co-residence with parents. Psychological interventions could include the development of stress-management workshops and therapies that help reduce depression and its cognitive symptoms.[25] Evidence-based therapies, such as cognitive-behavioral therapy (CBT) and mobile-based logotherapy, can equip individuals with the tools to reframe negative perceptions and foster hope.[25] Peer support groups tailored to specific adversities or intersectional contexts could create a sense of community and shared purpose.[26] Concurrently, community engagement programs designed to encourage civic participation can provide opportunities for collective hope, fostering trust and connection through shared efforts.[27]

Public awareness campaigns and educational programs targeting youth and marginalized communities can teach resilience and coping strategies while normalizing conversations around hope and hopelessness.[28] Lastly, systemic advocacy for intersectional policy reforms addressing discrimination and inequities is essential to dismantle the external barriers to hope and create environments where individuals can thrive.[29]

LIMITATIONS

This study acknowledges several limitations that shape its scope and implications. First, this literature review does not consider the possible different perceptions of hope between generations. Further research exploring differences within generational cohorts could lead to more insight on how hope is changing throughout different time periods.

The reliance on a non-systematic literature review limits the generalizability of findings. Future research employing longitudinal or experimental designs could provide more robust insights into causal relationships. Lastly, despite incorporating intersectionality, the study does not exhaustively address how intersecting identities—such as race, gender, and socioeconomic status—interact with systemic structures to influence hope and hopelessness. Further research is needed to explore these complex dynamics in depth.

CONCLUSION

This review demonstrates the complex interplay between hope and hopelessness and offers a comprehensive analysis of how these constructs influence interpersonal relationships, mental health, and community engagement. The findings highlight how hope strengthens relationship quality and intimacy, while hopelessness undermines these bonds. Community activism emerges as a critical factor in fostering hope within societal structures.

This study also reframes hope and hopelessness as mirrored but distinct constructs that coexist within individ-

uals, shaping their psychological and social landscapes. Through an intersectional lens, we recognize their nuanced dynamics and varied influences across generations, emphasizing the importance of targeted interventions that address both structural inequities and individual resilience.

Public health professionals, policymakers, and community leaders must prioritize efforts to foster hope while mitigating the detrimental effects of hopelessness. Structural reforms aimed at equitable economic opportunities, accessible mental health resources, and robust community engagement are pivotal in disrupting cycles of hopelessness. Concurrently, inclusive policies that address systemic barriers can empower individuals and communities, creating environments where hope can thrive.

Hope is not just a personal virtue; it is a collective imperative. By advancing interventions that promote resilience and equity, we can build a society where hope is a driving force that enriches relationships, strengthens communities, and propels progress toward health equity and social justice.

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Author Biographies

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