

Feelings of Hopelessness, Resilience and Social Support in Greece



Voulgaraki Krystalina

Social Worker, Special Educator, PhD Candidate, Democritus University of Thrace

ABSTRACT: The objectives of this study were to examine whether the sense of social support and resilience affect hope and are recognized as protective factors against hopelessness as well as the detection of demographic factors that may influence hope.

The survey was conducted in the region of Northern Greece and involved a total of 228 people aged 18 to 72 years.

The research tools used for the purpose of research, in addition to demographic data form, was the Adult Dispositional Hope Scale-ADHS, the Herth Hope Index-HHI, the Connor - Davidson Resilience Scale - CD-RISC-25 and the Interpersonal Support Evaluation List-ISEL.

The results of the survey are useful for mental health and social service professionals. The findings yield valuable information that contributes to the early identification of those elements that make up and reinforce the occurrence of hopelessness in the general population and the factors, such as mental resilience and social support, that protect and contribute to human well-being.

KEYWORDS: hope, hopelessness, resilience, social support.

INTRODUCTION

Hope and hopelessness

The concept of hope according to Johnston (1997) is rooted in psychological, theological, sociological and sociological literature, as well as in clinical fields such as nursing and psychiatry. He believes that hope is characterised by the belief that there is a way out and that with the help of others, each individual can take control of changes.

In recent decades, research has expanded and clarified the concept of hope so that it is now considered a measurable quantity with a multidimensional structure (Nowotny, 1989). Specifically, hope is an integral part of the individual's adaptive process and is influenced by many variables (Johnston, 1997). From Miller & Powers' (1988) perspective, hope is viewed as the expectation of a good future based on relationships with others, personal potential, psychological well-being, and the existence of purpose and meaning in life. Snyder (2002) argues that the absence of connection with other people means a loss of hope. According to Johnston (1997), people with a higher level of hope are considered to have better health, higher socioeconomic status, and a higher level of self-esteem and social support.

It has been found that adults who score high levels of hope are due to having strong connections with their family and spending a lot of time with them (Rieger, 1993). Also, hopeful adults have positive aspects of interpersonal relationships and develop strong connections with others (Snyder, Cheavens & Sympson, 1997). As expected, higher levels of hope are associated with less loneliness (Sympson, 1999) and greater sociability (Snyder et al., 1997).

Optimistic people perceive their goals as challenges and are empowered by them (Anderson, 1988; Snyder, Cheavens & Michael, 1999). Also, they are able to think of different ways to achieve their goals, showing perseverance even under stressful circumstances (Snyder et al., 2001). Similarly, optimistic versus pessimistic people find benefits in their efforts to cope with stress (Affleck & Tennen, 1996).

The opposite of hope is often said to be hopelessness (Lynch, 1965). For Johnston (1997) a person without hope is considered to be one who has no goals or desires. Hopelessness, according to Beck, Weissman, Lester & Trexler (1974), is a psychological construct that underlies a variety of mental disorders and has been hypothesized to be a causal factor for depression (Abramson, Metalsky & Alloy, 1989). According to Dixon, Heppner & Anderson (1991) hopelessness can be seen as an important indicator of low subjective well-being in the general population. Desperate individuals believe that they will never succeed in what they are trying to do, that their important goals can never be achieved and that their worst problems will never be solved (Beck & Steer, 1988). More than a few have linked hopelessness to factors in an individual's personality. For example, personality traits such as high neuroticism (Chioqueta & Stiles, 2005), dysfunctional beliefs, and inadequate problem-solving ability (Cannon, Mulroy, Otto, Rosenbaum,

Feelings of Hopelessness, Resilience and Social Support in Greece

Fava, & Nierenberg, 1999), as well as dimensions of perfectionism and coping style (O'Connor, & O'Connor, 2003) have been found to be associated with high levels of hopelessness.

Haatainen and colleagues (2004) found that reduced work ability, low economic status and poor health are significantly associated with hopelessness. In addition, life dissatisfaction, depressive symptoms, alexithymia and suicidal ideation were found to be the strongest factors associated with moderate to severe hopelessness. People with low hope tend to be lonely, afraid of interpersonal relationships and unforgiving of other people (Thompson et al., 2002).

Resilience

According to Brand (2007) and Adger (2000) resilience was originally used in ecology, where it refers to the ability of ecosystems to recover after significant shocks. The term found its way into medicine where it was used to describe the physical recovery of patients (Boyden & Cooper 2007). However, most of the literature indicates social psychology and psychiatry as the fields of origin of resilience (Bartley, Head, & Stansfeld, 2007; Manyena, 2006). The concept of resilience includes a sense of self-respect, humour, patience, adaptation to changing circumstances despite difficulties and a belief that problems can be solved (Connor & Davidson, 2003). Gilligan (2008) identifies three important components of resilience. The first component is the sense of having a secure base. The second component is self-worth and self-respect. Finally, the third component, always according to Gilligan, is a sense of efficacy. Haynes (2005) clarifies that individuals with mental resilience have three characteristics. Specifically, he refers to social, emotional and cognitive/academic traits.

Masten (2001) argues that for most of us resilience comes from the ordinary things, namely family love and strong friendships, as well as from our positive experiences in the world of education and work. Furthermore, according to Deegan (2005) we can enhance our own personal medicine to expand our inner reserves in order to give our lives greater meaning and purpose.

Protective factors according to Masten (2001) describe situations that soften, reduce or eliminate the risk or impact of difficulty and build healthy adaptation and competence. According to Burchardt & Huerta (2008) initially there are the most intrinsically individual factors, genes. Then there are psychological attributes, family characteristics, characteristics of the immediate environment and the wider social environment (such as social networks and community activity). According to Garmezy & Rutter and Werner & Smith (as cited in Mohaupt, 2008) the literature refers to internal protective factors. These include problem-solving skills, ambitions, social and cognitive skills and self-esteem. Some of the internal characteristics associated with resilience are self-respect, efficacy, perseverance, strong concentration of control skills and the ability to cope with situations and adapt (Karatas & Ersoy, 2011). Manyena (2006) identifies the strength of social support networks and the existence of positive school experiences as protective factors. O'Reilly (1988) also argues that resilience is strongly associated with social support.

Social support

The term social support is used to refer to the social processes that contribute to individual well-being and health. The existence of an extensive, integrated network of social relationships increases compliance with health-promoting behaviours and provides sources of appropriate information and assistance (Delistamati, Samakouri, Davis, Vorvolakos, Xenitidis & Livaditis, 2006). Mikulincer & Florian (1997) underline the importance of differentiating between the two main types of support, emotional support (the expression of caring, sharing feelings with others) and instrumental support (the provision of services and resources, problem solving). Social support acts as an 'insulation' that provides protection between adverse life events and the likelihood of subsequent risk (Alvarez & Hunt, 2005). Social support appears to insulate the individual from the negative effects of stressful life events (Harris & Molock, 2000). People with effective social skills are able to garner support from their social network when faced with stressors, and this helps to minimize the effects of stress.

The existence of social support has beneficial effects on emotional problems (Murberg & Bru, 2004). Increased social support is associated with better physical and mental well-being. According to Harris & Molock (2000) social support can mitigate the degree of human psychological distress. Those who have positive relationships with others according to Segrin & Taylor (2007) are characterized by intimacy, trust and concern. Also, individuals who have a good social network are happy, satisfied with life, hopeful, efficient and evaluate their quality of life and their environment positively. Finally, people who have positive experiences with others increase their feelings of happiness, hope and self-efficacy. A person with good social skills is able to achieve personal goals and gain the praise and admiration of others. Perhaps these positive experiences convey a sense of hope and satisfaction with life as well as a sense of mastery in the environment according to Segrin & Taylor (2007).

Interestingly, demographic factors such as marital status, gender and age are also found to be related to social support. In particular, according to Turner & Marino (1994) it is widely accepted that marriage provides a greater social support advantage for men than for women.

In general, there is evidence to suggest that the quantity and quality of social connections differ by gender. In particular, women appear to have larger and better quality social networks than men (Murberg & Bru, 2004).

Feelings of Hopelessness, Resilience and Social Support in Greece

METHOD

The research was conducted in the region of Northern Greece. A total of 228 participants aged 18 to 72 years participated. The survey sample included students, private, public and municipal employees, freelancers, retired and unemployed people. The research tools used for the purpose of research, in addition to demographic data form, was the Adult Dispositional Hope Scale-ADHS, the Herth Hope Index-HHI, the Connor - Davidson Resilience Scale - CD-RISC-25 and the Interpersonal Support Evaluation List-ISEL. Range, mean and standard deviation were used to describe the scores on the scales and subscales as well as the other quantitative variables. The absolute and relative frequency of observations were recorded to describe the qualitative variables. The correlation between the scores and the different quantitative variables was assessed using Pearson's correlation coefficient r .

RESULTS

As shown in Figure 1, the survey sample consists of men and women in almost equal proportions.

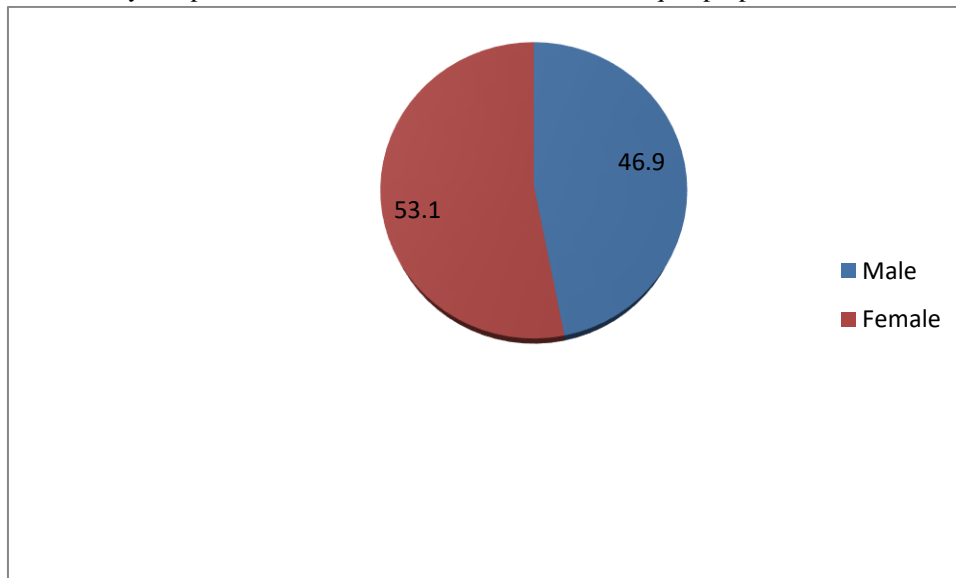


Figure 1. Gender of the sample.

The age of the participants ranged from 18 to 72 years. As shown in Figure 2, there was adequate representation of all age groups.

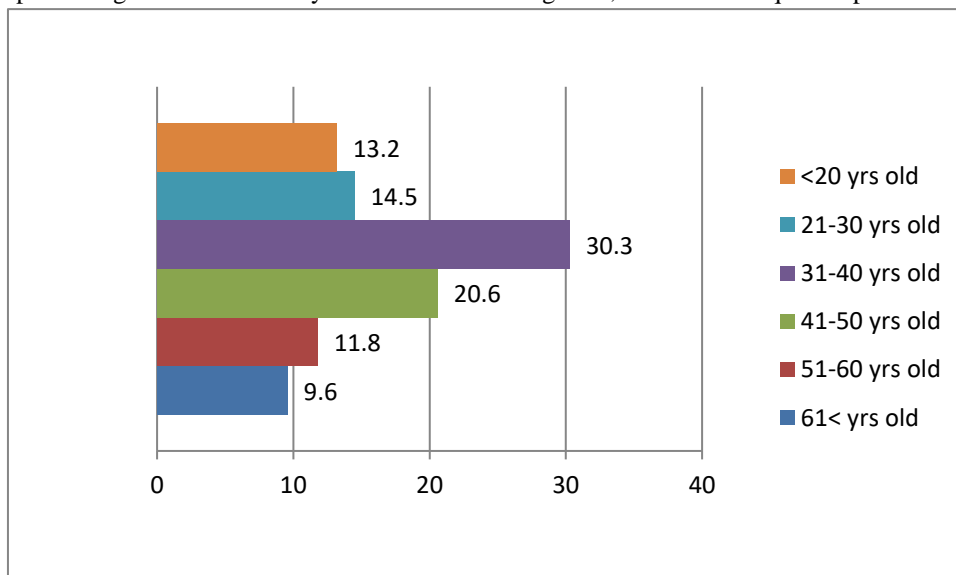


Figure 2. Age distribution of the sample by decade.

In terms of occupation, according to Figure 3, there was very good representation of all occupational categories. The majority of the respondents were civil servants and unemployed, while the next highest percentages were occupied by students, private employees as well as retired persons.

Feelings of Hopelessness, Resilience and Social Support in Greece

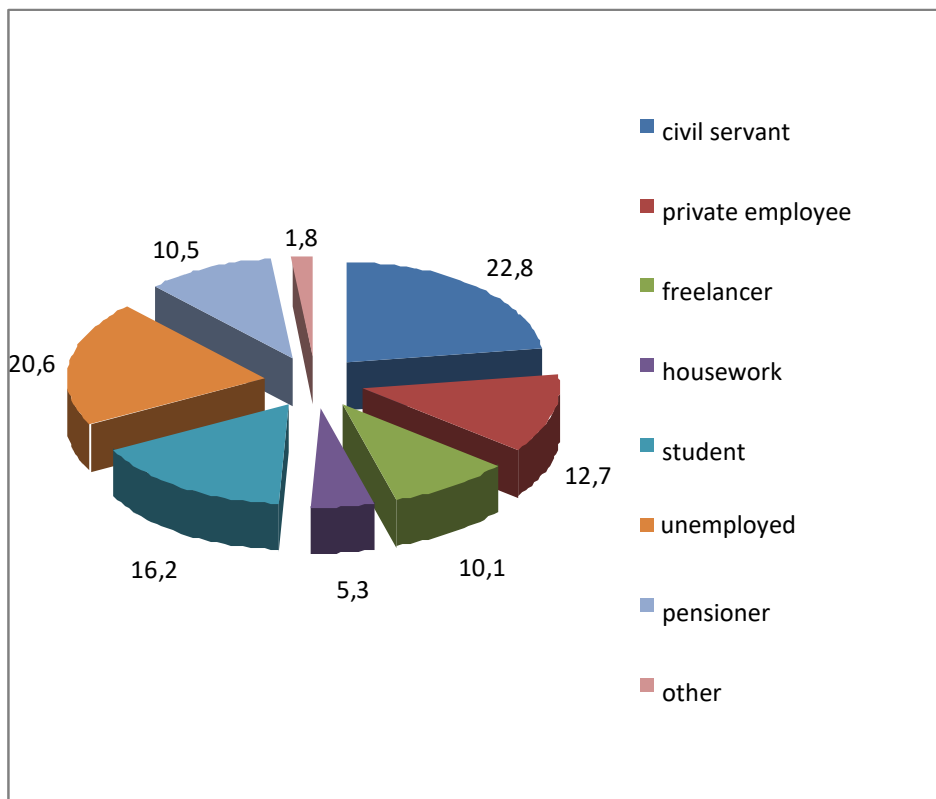


Figure 3. Distribution of occupational status of the sample.

As shown in Figure 4, about half of the survey participants were married.

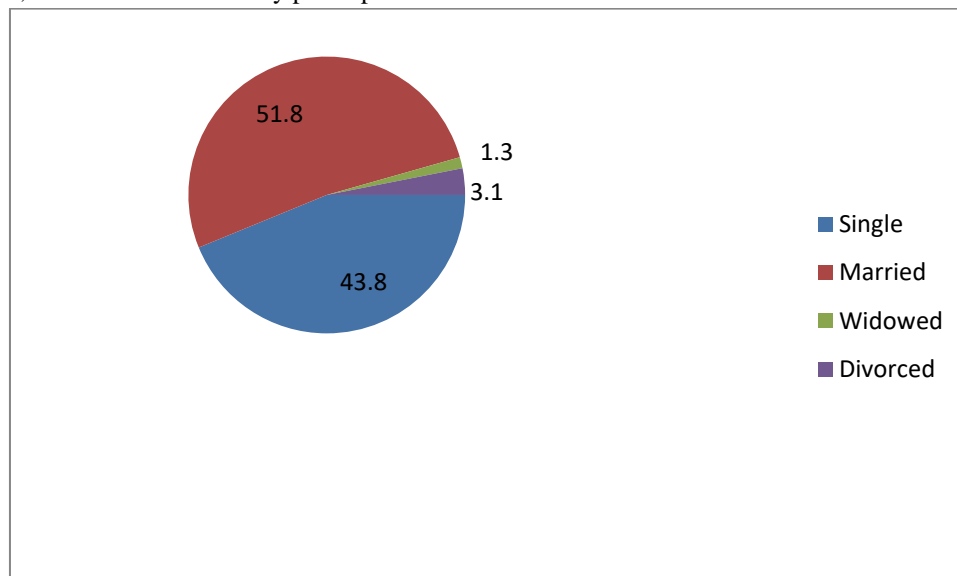


Figure 4. Marital status of the individuals in the sample.

More than 50% of the participants reported being parents (Figure 5), and of these, most reported having two children.

Feelings of Hopelessness, Resilience and Social Support in Greece

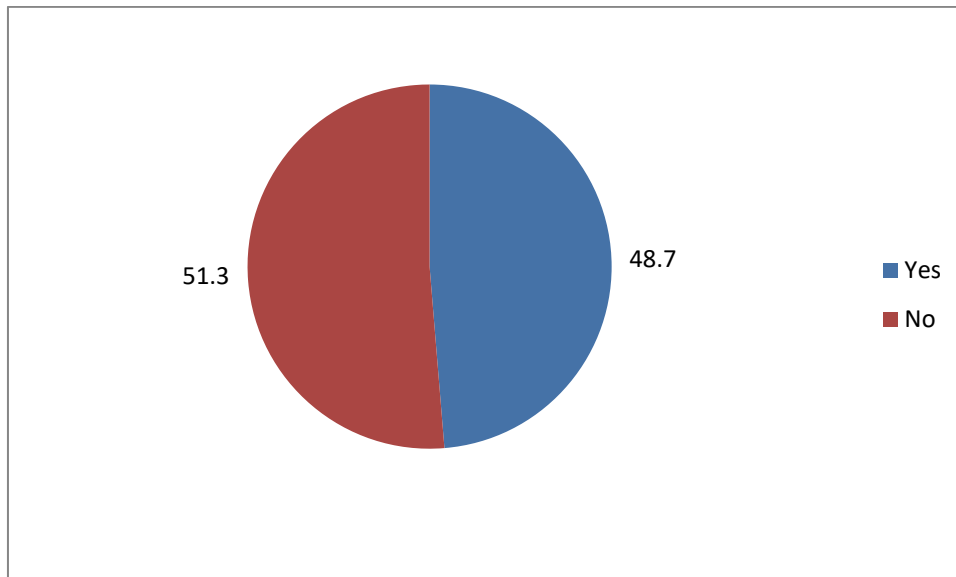


Figure 5. Existence of children for the individuals in the sample.

As shown in Figure 6, 90% of the participants stated that they have a monthly personal income between 500 and 1500 euros, which demonstrates the significant decrease in the income of employees in Greece. Around one third of the sample had an income of up to EUR 500 per month, which probably corresponds to the unemployed.

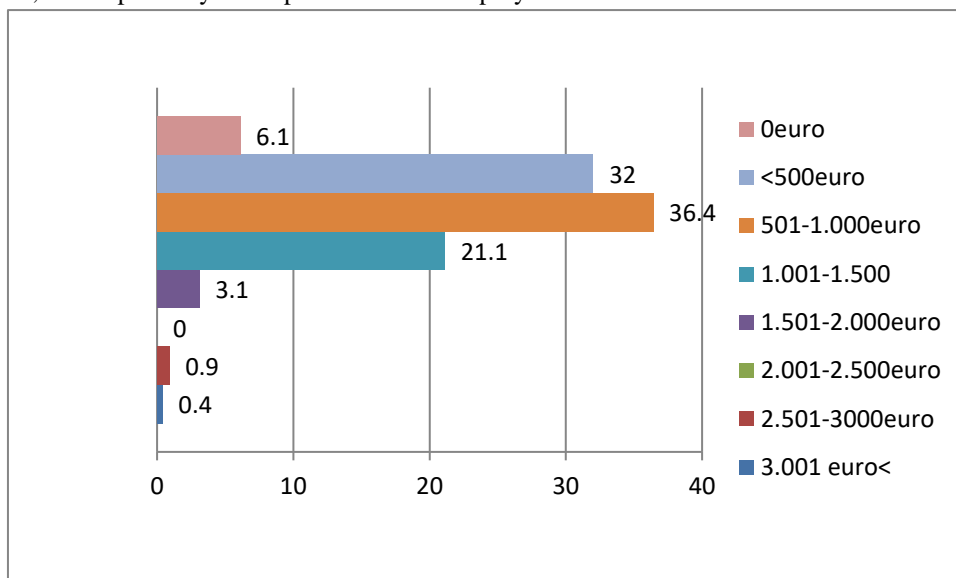


Figure 6. Description of monthly personal income

Table 1. Effect of gender and marital status on scale scores.

Scale	Gender		Marital Status	
	<i>t</i>	<i>p</i>	<i>t</i>	<i>p</i>
HHI	0,890	0,375	2,605	0,010
ADHS	0,679	0,498	2,297	0,023
ISEL	4,322	0,001	0,964	0,336
CDRISC	0,833	0,406	3,169	0,002

Table 2. Effect of age and income on scale scores.

Scale	Age		Income	
	<i>r</i>	<i>p</i>	<i>r</i>	<i>p</i>

Feelings of Hopelessness, Resilience and Social Support in Greece

HHI	-0,159	0,016	0,143	0,031
ADHS	-0,053	0,423	0,180	0,006
ISEL	-0,238	0,001	0,088	0,184
CDRISC	-0,018	0,789	0,125	0,060

Gender had a statistically significant effect on the social support scale, with women reporting more support than men.

Married people reported higher levels of hope and resilience than unmarried people. However, it is worth noting that women were more often married than men in our sample.

Age was mildly negatively associated with social support and even less so with hope, as measured by the HHI, while income was mildly positively associated with hope, as measured by both scales, and marginally significantly associated with resilience.

However, it is worth noting that age and income were significantly positively correlated with each other ($r= 0.274, p< 0.001$). Figure 7 illustrates the scores of the different occupational groups on the scales used.

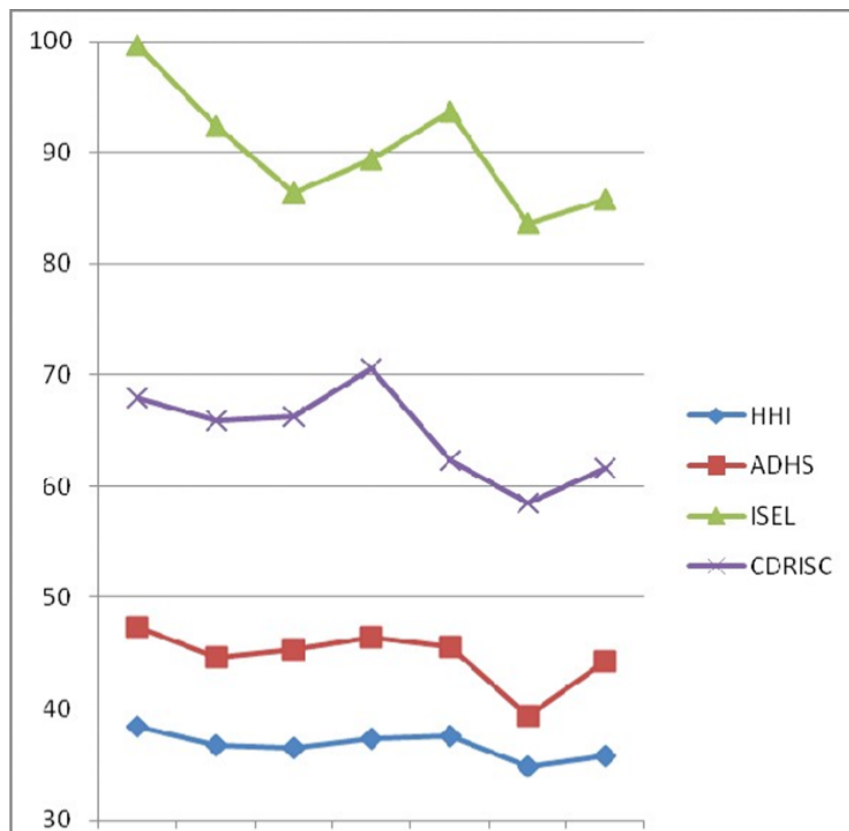


Figure 7. Mean scores on the scales of the different occupational groups.

In all scales, the lowest scores were obtained by the unemployed, followed by the retired. Civil servants had the highest scores in all scales except resilience, in which those involved in domestic work had the highest score. Marital status, youth and higher income seem to be the main demographic predictors of hope and resilience.

CONCLUSION

A variety of thematic areas emerged from the analysis of the results. In particular, gender has a statistically significant effect on social support and less so on hope and mental resilience, with women reporting greater support than men.

Hope and mental resilience are influenced by the marital status of the individual and more specifically by marriage as married individuals report higher levels of hope and mental resilience.

Income appears to be mildly positively correlated with hope, as indicated by both measurement scales, and not so much with social support and mental resilience. In other words, people with high income have higher levels of hope.

Feelings of Hopelessness, Resilience and Social Support in Greece

People who are engaged in household chores seem to have higher mental resilience in contrast to the unemployed who have the lowest scores.

Higher levels of hope are noted by civil servants and those engaged in domestic work while more hopelessness is expressed by the unemployed and retired.

The highest levels of social networking and support are shown by civil servants and students, while the unemployed and professionals seem to lack these.

The influence of demographic factors on the survey metrics was interesting. In particular, it was found that gender had a statistically significant effect on the scale for social support with women reporting more support than men. This result is consistent with Mulberg & Bru (2004) who reported that women have larger and better social networks than men.

It is evident from the results that married men reported higher levels of hope than unmarried men. This finding is in agreement with the result of Haatainen and colleagues' (2004) research where it is reported that marriage provides greater levels of hope. In addition, Sympson (1999) also reports that higher levels of hope are associated with less loneliness and Snyder and colleagues argues that higher levels of hope are associated with greater sociability (1997).

Masten (2001) argues that resilience arises from the ordinary things, namely family love and close friendships, a finding that is consistent with the result of the present study which reports that the highest levels of hope were scored by married people. In general, marital status appears to be one of the main demographic predictors of resilience. Age was mildly negatively associated with social support a result that is in agreement with Turner & Marino's (1994) research where they report the highest levels are observed in people aged 35-45 years.

The analyses revealed that income was mildly positively associated with hope. The conclusion that poor economic situation is significantly related to hopelessness was also reached by Haatainen and his colleagues in 2004. Furthermore, according to Johnston (1997), individuals with a higher level of hope were considered to have higher socioeconomic status. Unemployed and retired people were those who had the lowest scores on all scales. Also, in this case Haatainen and colleagues (2004) highlight that reduced work ability is associated with a lack of hope.

One of the strengths of the survey is that there was a good representation of all age groups, educational levels and a very good representation of all occupational categories in the sample.

In conclusion, the survey results are useful for mental health and social service professionals. All the information presented may contribute to the early identification of those elements that make up and reinforce the occurrence of hopelessness in the general population as well as the factors, such as resilience and social support, that protect and contribute to people's wellbeing.

Further research is necessary, as the literature so far has not offered any significant studies on the relationship between hope and resilience in order to investigate whether resilience is indeed an aspect of hope or even whether we are talking about two concepts that overlap completely. In addition, the interaction between hope and other factors should be investigated in order to clarify the reasons why hope is an important component of a person's psychological balance and a protective factor against various psychiatric disorders.

REFERENCES

- 1) Abramson, L. Y., Metalsky, G. I. & Alloy, L. B. (1989). Hopelessness depression: A theory based subtype of depression. *Psychological Review*, 96, 358-372.
- 2) Adger, W. (2000). Social and ecological resilience: are they related? *Progress in Human Geography*, 24(3), 347-364.
- 3) Affleck, G. & Tennen, H. (1996). Construing benefits from adversity: Adaptational significance and dispositional underpinnings. *Journal of Personality*, 64, 899-922.
- 4) Alvarez, J. & Hunt, M. (2005). Risk and Resilience in Canine Search and Rescue Handlers After 9/11. *Journal of Traumatic Stress*, 18(5), 497-505.
- 5) Anderson, J. R. (1988). The role of hope in appraisal, goal-setting, expectancy and coping. Unpublished doctoral dissertation, Department of Psychology, University of Kansas, Lawrence.
- 6) Bartley, M., Head, J. & Stansfeld, S. (2007). Is attachment style a source of resilience against health inequalities at work? *Social Science & Medicine*, 64, 765-775.
- 7) Beck, A. T., Weissman, A., Lester, D. & Trexler, L. (1974). The measurement of pessimism: The Hopelessness Scale. *Journal of Consulting and Clinical Psychology*, 42, 861-865.
- 8) Beck, A. T. & Steerr, A. (1988). *Manual for Beck Hopelessness Scale*. San Antonio, TX: Psychological Corp.
- 9) Boyden, J. & Cooper, E. (2006). Questioning the Power of Resilience: Are Children Up To the Task of Disrupting the Transmission of Poverty? This paper was presented at the CPRC Workshop on Concepts and Methods for Analysing Poverty Dynamics and Chronic Poverty. University of Manchester, UK.
- 10) Brand, F. S. & Jax, K. (2007). Focusing the meaning(s) of resilience: resilience as a descriptive concept and a boundary object. *Ecology and Society*, 12(1), 23. Buhrmester, D., Furman, W., Wittenberg, M. T. & Reis, H. T. (1988). Five Domains of Interpersonal Competence in Peer Relationships. *Journal of Personality and Social Psychology*, 55(6), 991-1008.

Feelings of Hopelessness, Resilience and Social Support in Greece

- 11) Burchardt, T. & Huerta, M.C. (2008). Introduction: Resilience and Social Exclusion. *Social Policy & Society*, 8(1), 59–61
- 12) Chioqueta, A. P. & Stiles, T. C. (2005). Personality traits and the development of depression, hopelessness, and suicide ideation. *Personality and Individual Differences*, 38, 1283–1291.
- 13) Cannon, B., Mulroy, R., Otto, M. W., Rosenbaum, J. F., Fava, M. & Nierenberg, A. A. (1999). Dysfunctional attitudes and poor problem solving skills predict hopelessness in major depression. *Journal of Affective Disorders*, 55, 45–49.
- 14) Connor, K. & Davidson, J. (2003). Development of a new resilience scale: The Connor-Davidson Resilience Scale (CDRISC). *Depression and Anxiety*, 18, 76–82.
- 15) Deegan, P. (2005). The importance of personal medicine: A qualitative study of resilience in people with psychiatric disabilities. *Scandinavian Journal of Public Health*, 33, 1-7.
- 16) Delistamati, E., Samakouri, M. A., Davis, E., Vorvolakos, T., Xenitidis, K. & Livaditis, M. (2006). Interpersonal Support Evaluation List (ISEL) - College Version: Validation and Application in a Greek Sample. *International Journal of Social Psychiatry*, 52(6), 552-560.
- 17) Dixon, W. A., Heppner, P. P. & Anderson, W. P. (1991). Problem-Solving Appraisal, Stress, Hopelessness and Suicide Ideation in a College Population. *Journal of Counseling Psychology*, 38(1), 51-56.
- 18) Garmezy, N., Rutter, M. (eds) (1983). *Stress, Coping and Development in Children*. McGraw Hill, New York.
- 19) Gilligan, R (2008). Promoting resilience in young people in long-term care - The relevance of roles and relationships in the domains of recreation and work. *Journal of Social work*, 22(1), 37-50.
- 20) Haatainen, K., Tanskanen, A., Kylmä, J., Honkalampi, K., Koivumaa-Honkanen, H., Hintikka, J. & Viinamaki, H. (2004). Factors Associated with Hopelessness: A Population Study. *International Journal of Social Psychiatry*, 50(2), 142-152.
- 21) Harris, T.S. & Molock, S.D. (2000). Cultural Orientation, Family Cohesion, and Family Support in Suicide Ideation and Depression among African American College Students. *Suicide and Life-Threatening Behavior*, 30(4), 341-353.
- 22) Haynes, N. M. (2005). Personalized leadership for effective schooling. [Online] Διαθέσιμο στη διεύθυνση: www.atdp.berkeley.edu/haynes_keynote_04.ppt
- 23) Johnston, S.F. (1997). Assessment of Patient Hope as a Predictor of Stroke Rehabilitation Outcome. Thesis, Department of Psychology, Carleton University Ottawa, Ontario.
- 24) Karatas, Z. & Ersoy, M. (2011). Self-Esteem and hopelessness, and resiliency: An exploratory study of adolescents in Turkey. *International Education Studies*, 4, 84-91.
- 25) Lynch, W. F. (1965). *Images of hope: Imagination as healer of the hopeless*. Baltimore, MD: Helicon.
- 26) Manyena, S. B. (2006). The concept of resilience revisited. *Disasters*, 30(4), 433–450.
- 27) Masten, A. (2001). Ordinary Magic. Resilience Processes in Development. *American Psychologist*, 56(3), 227-238.
- 28) Mikulincer, M. & Florian, V. (1997). Are emotional and instrumental supportive interactions beneficial in times of stress? The impact of attachment style. *Anxiety, Stress & Coping: An International Journal*, 10(2), 109-127.
- 29) Miller, J. F., & Powers, M. J. (1988). Development of an instrument to measure hope. *Nursing Research*, 37(1), 6-10.
- 30) Mohaupt, S. (2008). Review Article: Resilience and Social Exclusion. *Social Policy & Society*, 8(1), 63–71.
- 31) Murberg T.A. & Bru, E. (2004). Social Support, Negative Life Events and Emotional Problems Among Norwegian Adolescents. *School Psychology International*, 25, 387-403.
- 32) O'Connor, R.C. & Sheehy, N.P. (2000). *Understanding suicidal behaviour*. Leicester: BPS Books.
- 33) O'Reilly, P. (1988). Methodological issues in social support and social network research. *Society Sciences of Medicine*, 26(8), 863-873.
- 34) Rieger, E. (1993). Correlates of adult hope, including high- and low-hope adults' recollection of parents. Psychology honors thesis, Department of Psychology, University of Kansas, Lawrence.
- 35) Segrin, C. & Taylor, M. (2007). Positive interpersonal relationships mediate the association between social skills and psychological well-being. *Personality and Individual Differences*, 43, 637–646.
- 36) Snyder, C. R. (2002). Hope Theory: Rainbows in the Mind. *Psychological Inquiry: An International Journal for the Advancement of Psychological Theory*, 13(4), 249-275.
- 37) Snyder, C.R., Cheavens, J. & Sympson, S.C. (1997). Hope: An individual motive for social commerce. *Group Dynamics: Theory, Research, and Practice*, 1, 107–118.
- 38) Snyder, C.R., Cheavens, J., & Michael, S.T. (1999). Hoping. In C. R. Snyder (Ed.), *Coping: The psychology of what works* (pp. 205–231). New York: Oxford University Press.
- 39) Snyder, C.R., Taylor, J.D., Gum, A., Rand, K.L., Kahle, K.E., Brown, J. et al. (2001). Hope and physical pain tolerance. Unpublished manuscript, Department of Psychology, University of Kansas, Lawrence.
- 40) Thompson, L.Y., Snyder, C.R., Hoffman, L., Michael, S.T., Rosmussen, H.N., Billings, L.S. et al. (2002). Dispositional forgiveness of self, others, and situations. Unpublished manuscript, University of Kansas, Lawrence.
- 41) Turner, R.J. & Marino, F. (1994). Social Support and Social Structure: A Descriptive Epidemiology. *Journal of Health and Social Behavior*, 35(3), 193-212.



There is an Open Access article, distributed under the term of the Creative Commons Attribution – Non Commercial 4.0 International (CC BY-NC 4.0) (<https://creativecommons.org/licenses/by-nc/4.0/>), which permits remixing, adapting and building upon the work for non-commercial use, provided the original work is properly cited.