

spiritualpc.net / 2024 Volume: 9 Number: 3

**Research Article** 

# **Investigating the Mediating Roles of Hopelessness** and Psychological Distress in the Relationship between Psychological Vulnerability and Well-Being among Married Individuals\*

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<sup>\*</sup> This study was presented as an oral presentation at the 11th International Eurasian Educational Research Congress held on May 21-24, 2024.

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#### Abstract

The well-being of married individuals is shaped by various psychological factors, among which psychological vulnerability, hopelessness, and psychological distress play critical roles. This study investigates how psychological vulnerability impacts well-being through the mediating effects of hopelessness and psychological distress. The sample comprised 522 married individuals aged 23 to 67 (M = 36.70, SD = 10.77). Data were collected using the Psychological Vulnerability Scale, Patient Health Questionnaire-4, Beck Hopelessness Scale, and Mental Health Continuum Short Form. Internal consistency reliability coefficients and composite reliability of the variables were calculated. Pearson Correlation analysis was employed to examine the relationships between variables, and Structural Equation Modeling (SEM) was used to test the mediating roles. The significance of direct and indirect relationships was assessed using the bootstrap method. The analysis revealed significant correlations among the variables. SEM results indicated that **Corresponding author:** psychological vulnerability positively and significantly predicted hopelessness and psychological distress, while hopelessness and psychological distress E-mail: osmanhatun@sinop.edu.tr negatively predicted well-being. Additionally, the serial mediation of hopelessness and psychological distress in the relationship between psychological vulnerability and well-being was found to be significant. These eISSN: 2458-9675 findings suggest that psychological vulnerability can adversely affect the wellbeing of married individuals through the serial mediation of hopelessness Received: 27.06.2024 and psychological distress. This study may contribute valuable insights to the Revision: 27.07.2024 literature and offers practical implications for couple and family counseling. Accepted: 05.08.2024 Keywords: Psychological vulnerability • Hopelessness • Psychological distress • Well-©Copyright 2024 by Author(s) being • Married individuals

Citation: Hatun, O. (2024). Investigating the mediating roles of hopelessness and psychological distress in the relationship between psychological vulnerability and well-being among married individuals. Spiritual Psychology and Counseling, 9(3), 283-300. http://doi.org/10.37898/spiritualpc.1505961

### Introduction

Marriage has an important place in individuals' lives and can have both positive and negative psychological effects. The well-being of married individuals is shaped by the quality of the marital relationship and individual psychological factors. Furthermore, the psychological health of each spouse directly impacts the stability and quality of the marital relationship, the parenting experience of couples, child development, and overall family harmony (Kiecolt-Glaser & Newton, 2001). Previous studies have emphasized that marriage is often associated with higher physical health, subjective and psychological well-being, and financial stability (Carlson, 2012; Diener et al., 1999; Grover & Helliwell, 2017; Purol et al., 2020; Stanley et al., 2012). However, explaining individuals' well-being solely based on the marriage factor would be insufficient (Grover & Helliwell, 2017; Olson et al., 2019). Each married individual's experience and how they are affected by this experience can vary. Therefore, it is important to examine the factors that may influence the well-being of married individuals.

Alongside the various benefits that marriage brings, individuals also encounter unique stress factors such as balancing family responsibilities, raising children, financial difficulties, managing household chores, adapting to the stages of the family life cycle, and meeting the expectations of their spouse (Gladding, 2018). Individuals who can effectively cope with these stressors tend to have higher levels of well-being and, consequently, higher levels of marital adjustment (Karney & Bradbury, 1995). However, individuals with high levels of psychological vulnerability may experience greater stress due to these marital duties and responsibilities (Kiecolt-Glaser, 2018). As a result of social relationships, individuals may develop negative cognitive schemas in response to various expectations, making them more vulnerable (Sinclair & Wallston, 1999). Psychological vulnerability, which is associated with negative affect, low stress tolerance, depressive symptoms, and a predisposition to mental health problems, can increase hopelessness and psychological distress, thereby negatively impacting individuals' well-being (Sinclair & Wallston, 2004). Lower levels of well-being in individuals can lead to increased conflicts between couples and lower relationship and marital satisfaction. Therefore, examining how psychological vulnerability affects the well-being of married individuals and the role of factors influencing this relationship can offer significant contributions to the literature and the practice of couple and family counseling. Consequently, this study will investigate the mediating roles of hopelessness and psychological distress in the relationship between psychological vulnerability and well-being among married individuals.

#### **Psychological Vulnerability and Well-being**

Psychological vulnerability, which refers to having negative cognitive schemas that make individuals more susceptible to stress, can be defined as a cognitive belief in self-worth that is dependent on success or the approval of others (Sinclair & Wallston, 1999). This vulnerability, which denotes the difficulty and susceptibility individuals face in coping with emotional and psychological challenges, can weaken their capacity to manage stress (Sinclair & Wallston, 2004). In the context of married individuals, psychological vulnerability can be exacerbated by factors such as conflicts between spouses, lack of support, and communication issues. Those who are more vulnerable to marital stressors may be at risk of experiencing depression, anxiety, and other psychological problems (Ingram & Price, 2010). Vulnerable individuals tend to withdraw more quickly when faced with challenging life experiences (Levine, 2004) and experience more negative emotions (Lyubomirsky & Lepper, 1999). Individuals with high levels of psychological vulnerability need constant approval from others to feel good about themselves, feel devastated when confronted with criticism or failure, and struggle to cope with uncertainties, stressors, or negative experiences (Sinclair & Wallston, 1999).

Research has shown that psychological vulnerability can increase the risk of depression, anxiety, and other mental health issues (Cox et al., 2001; Ingram & Luxton, 2005) and is negatively associated with positive affect, life satisfaction, subjective happiness, and optimism (Satıcı & Uysal, 2017; Sinclair & Wallston, 1999; Uysal, 2015). Psychological vulnerability can lower individuals' levels of life satisfaction and the quality of their social relationships (Karney & Bradbury, 1995). Additionally, individuals with high psychological vulnerability may experience negative emotions more frequently, have weaker relationships, and face significant challenges in maintaining their well-being (Hankin, 2008; Sinclair & Wallston, 1999).

Psychological vulnerability plays a significant role in influencing individuals' levels of well-being (Satici, 2016; Satici & Uysal, 2016; Yelpaze et al., 2021). Wellbeing in married individuals is a comprehensive concept comprising psychological, emotional, and social dimensions. Psychological well-being encompasses how individuals perceive themselves positively, find purpose in life, experience personal growth, nurture positive relationships, maintain independence, and effectively manage their environment (Ryff, 1989). Seligman's (2011) PERMA model delineates psychological well-being through five key components: Positive emotions, engagement, relationships, meaning, and accomplishment. Emotional well-being focuses on individuals' management of negative emotions, enhancement of positive emotional experiences, and their frequency and intensity (Diener, 1984; Fredrickson, 2001; Lyubomirsky et al., 2005). Social well-being centers on the quality of social experiences, contributions to society, and the strength of social bonds (Keyes, 1998). Collectively, these dimensions significantly influence the quality of life and marital satisfaction among married individuals.

# Hopelessness and Psychological Distress as Mediators

Psychological vulnerability, often closely linked with negative emotional states and susceptibility to stress, can lead individuals to experience hopelessness (Haeffel, 2010; Haeffel et al., 2008; Ingram, 2003; Ong et al., 2018; Satici & Uysal, 2017). Hopelessness can be described as the absence of positive emotions and expectations about the future, lacking a positive and predictable outlook (Beck et al., 1974). It is largely associated with a decrease in positive expectations (Donaldson et al., 2000; Marchetti, 2018) and is linked with high vulnerability to psychopathology and mood disorders, as well as depression and poor psychological functioning (Beck et al., 1975; Ong et al., 2018). When individuals feel hopeless, they may struggle to find meaning and purpose in life, thereby reducing their overall well-being. A study conducted with unemployed adults (Lynd-Stevenson, 1997) found that hopelessness mediated the relationship between vulnerability factors and depression. In a study by Satici and Uysal (2017) with university students, hopelessness was found to mediate the relationship between psychological vulnerability and subjective happiness. Another study (Satici, 2016) found a meaningful mediating role of hope in the relationship between psychological vulnerability and subjective well-being. Therefore, hopelessness can act as a mediator, explaining how psychological vulnerability reduces individuals' levels of well-being.

Hopelessness can lead to increased levels of psychological distress, including depression and anxiety (Marchetti et al., 2016; Palacio-Gonzalez & Clark, 2015). It can predict rises in depressive mood immediately following negative outcomes linked to psychological vulnerability (Abela & Seligman, 2000). Hopelessness may mediate the relationship between various stress factors and psychological distress (e.g., depression and anxiety) (Manne & Glassman, 2000). Research has identified hopelessness as a significant factor influencing individuals' psychological wellbeing, with a positive correlation between hopelessness and psychological distress (Parwez & Rahim, 2022). Psychological distress is associated with psychological vulnerability, which can be impacted by various stress factors (Almeida & Kessler, 1998; Cox et al., 2001). Individuals with psychological vulnerability may experience heightened levels of psychological distress (Nogueira et al., 2017; Sinclair & Wallston, 1999). Psychological distress includes intense experiences of depression and anxiety, significantly affecting individuals' overall mental health (Kroenke et al., 2009). Daily stress factors, particularly within marriage, can heavily influence psychological distress (Almeida & Kessler, 1998). Moreover, psychological distress, shaped by factors such as coping strategies, hope, and social support, plays a crucial role in mental health outcomes and can negatively impact well-being (Huda et al., 2021; Wang & Wang, 2019).

#### The Present Study

Previous studies have highlighted the negative relationship between psychological vulnerability and well-being (Anjum & Aziz, 2024; Satıcı, 2016; Satıcı & Uysal, 2017; Yelpaze et al., 2021). However, the relationships between psychological vulnerability and well-being among married individuals have not been sufficiently examined. These relationships among married individuals can be complex and multifaceted. The mediating roles of hopelessness and psychological distress may help to understand the relationship between psychological vulnerability and wellbeing among married individuals. Understanding these connections could be crucial for developing interventions and support systems aimed at enhancing the mental health and overall well-being of married individuals. In the literature, the relationship between psychological vulnerability and well-being has not been examined with the mediating roles of hopelessness and psychological distress together. Therefore, investigating how psychological vulnerability affects the well-being of married individuals and the role of factors influencing this relationship could contribute significantly to the literature and to couple and family counseling practices. Hence, this study aims to examine the relationships among psychological vulnerability, hopelessness, psychological distress, and well-being among married individuals. Additionally, the mediating roles of hopelessness and psychological distress in the relationship between psychological vulnerability and well-being are also examined. The following hypotheses were tested in line with the objectives of the study:

H1. Psychological vulnerability is positively associated with hopelessness and psychological distress.

H2. Psychological vulnerability is negatively associated with well-being.

H3. Hopelessness and psychological distress are negatively associated with wellbeing.

H4. Hopelessness and psychological distress mediate the relationship between psychological vulnerability and well-being.

## Method

# **Participants and Procedure**

The participants of the study consisted of 522 married individuals selected through convenience sampling methods, comprising 270 (51.72%) females and 252 (48.28%) males. Their mean age was 36.70 years (SD = 10.27, range = 23—67). Among the participants, 142 (27.20%) did not have children, while the remaining participants had at least one child. Regarding education, 269 participants (51.53%) were

university graduates. In terms of employment status, 340 participants (65.13%) were employed in some capacity, while 118 (22.61%) were unemployed or homemakers. Demographic data of the participants are presented in Table 1.

Variable	Grup	N (Mean, SD)	% (range)
Age		$36.70\pm10.27$	23—67
Gender	Female	270	51.72
	Male	252	48.28
Number of children	0	142	27.20
	1	107	20.50
	2	181	34.67
	3+	92	17.63
Education Level	Primary School	75	14.368
	Middle School	36	6.897
	High School	142	27.20
	University Graduates	269	51.53
Socioeconomic Status	Low	164	31.41
	Medium	259	49.62
	High	99	18.97
Employment Status	Unemployed	118	22.61
	Employed	340	65.13
	Retired	64	12.26

 Table 1

 Participants' demographic characteristics

The data were collected through Google Forms, which were distributed via the researcher's social media accounts. Participation was limited to individuals aged 18 and older who were married. Informed consent was obtained from all participants, and the consent form provided details about the study's purpose, assurance of confidentiality for personal information, the use of data solely for research purposes, participants' right to withdraw from the study at any time, and the voluntary nature of participation.

# Measures

# Psychological Vulnerability

Psychological vulnerability levels of the participants were assessed using the Psychological Vulnerability Scale (PWS), adapted into Turkish by Akın and Eker (2011) from the scale developed by Sinclair and Wallston (1999). The scale consists of 6 items rated on a 5-point Likert scale (1 = Not at all like me, 5 = Exactly like me). Sample items include "I need approval from others to feel good about myself." Scores on the scale range from 6 to 30, with higher scores indicating higher levels of psychological vulnerability. The internal consistency coefficient (Cronbach's  $\alpha$ ) for the scale was found to be .75 (Akın & Eker, 2011). In the current study, the reliability coefficients for the scale were also found to be good ( $\alpha$  = .748,  $\omega$  = .751).

#### Hopelessness

Participants' levels of hopelessness were measured using the Beck Hopelessness Scale (BHS; Beck et al., 1974), adapted into Turkish by Durak and Palabıyıkoğlu (1994). The scale consists of 20 items divided into three factors (feelings about the future, loss of motivation, expectations about the future). Each item is scored as either true (1 point) or false (0 points). Sample items include "I might as well give up because I can't make things better for myself." Scores on the scale range from 0 to 20, with higher scores indicating higher levels of hopelessness. The reliability coefficients for the subscales of the scale range from .72 to .78 (Durak & Palabıyıkoğlu, 1994). In the current study, the reliability coefficients for the BHS were high ( $\alpha = .864$ ,  $\omega = .870$ ).

#### **Psychological Distress**

Participants' levels of psychological distress (depression and anxiety) were assessed using the Patient Health Questionnaire-4 (PHQ-4; Kroenke et al., 2009). The scale consists of 4 items rated on a 4-point Likert scale (0 = Not at all; 3 = Nearly every day). PHQ-4 includes items such as "Feeling nervous, anxious, or on edge" and "Little interest or pleasure in doing things." The Turkish version of PHQ-4 was translated by Demirci and Ekşi (2018). Scores on the scale range from 0 to 12, with higher scores indicating higher levels of psychological distress. Confirmatory factor analysis for the one-factor model yielded good fit indices (SRMR = .008, RMSEA = .000, CFI = 1.00, TLI = 1.00). The Cronbach's  $\alpha$  coefficient for PHQ-4 was found to be .83 (Demirci & Ekşi, 2018). In the current study, the reliability coefficients for PHQ-4 were also found to be good ( $\alpha$  = .807,  $\omega$  = .816).

#### Well-being

Participants' levels of well-being were assessed using the Mental Health Continuum Short Form, adapted into Turkish by Demirci and Akın (2015) from the scale developed by Keyes et al. (2008). The scale consists of 14 items divided into 3 subscales (emotional well-being, social well-being, psychological well-being) and is rated on a 6-point Likert scale (0 = Never, 5 = Every day). Sample items include "I felt that my life had a direction and purpose." Scores on the scale range from 0 to 70, with higher scores indicating higher levels of well-being. The scale demonstrated good fit indices in previous research ( $\chi^2/df = 3.26$ , RMSEA = .079, NFI = .96, IFI = .97, CFI = .97, GFI = .92, SRMR = .049). The reliability coefficient for the total score of the scale was found to be .90 (Demirci & Akın, 2015). In the current study, the reliability coefficients for the scale were also found to be high ( $\alpha = .913$ ,  $\omega = .913$ ).

#### **Data Analysis**

Firstly, descriptive statistics, tests of normality assumptions, and internal consistency coefficients were calculated for the variables. In order to meet the normality assumption,

skewness and kurtosis values between -1.5 and +1.5 are recommended (Tabachnick & Fidell, 2013). Pearson product-moment correlations were conducted to examine relationships between variables. Cronbach's  $\alpha$  and McDonald's  $\omega$  coefficients were computed to assess the reliability levels of the variables.

Structural equation modeling (SEM) was used to test the mediating role of psychological distress and hopelessness in the relationship between psychological vulnerability and well-being (Kline, 2015). In SEM analysis, the measurement model was first evaluated, followed by the analysis of the structural model. Fit indices such as root-mean-square error of approximation (RMSEA), standardized root-mean-square residual (SRMR), goodness of fit index (GFI), comparative fit index (CFI), and normed fit index (NFI) were examined to assess model fit. RMSEA and SRMR values below .08, and GFI, CFI, NFI, and IFI values above .90 indicate acceptable model fit (Hu & Bentler, 1999; Kline, 2015). Additionally, to reduce measurement errors in single-factor measurements, a parceling technique was used (Little et al., 2002). Therefore, the single-dimensional PVS was divided into two parcels. Bootstrap analyses with 5000 resamples and 95% confidence intervals were conducted to provide additional evidence regarding the significance of direct and indirect effects of the variables in the tested models (Preacher & Hayes, 2008). In Bootstrap analysis, an effect is considered significant when its confidence interval does not include zero. Data were analyzed using IBM SPSS Statistics 22 and AMOS 24 software programs.

#### Results

#### **Preliminary Analysis**

The analysis results (Table 2) indicated that the variables' kurtosis and skewness values were within the range of -1.5 to 1.5, demonstrating normal distribution of the data. Correlation analysis results showed that psychological vulnerability was positively associated with hopelessness (r = .468, p < .001) and psychological distress (r = .378, p < .001), and negatively associated with well-being (r = -.321, p < .001). Psychological well-being was negatively correlated with hopelessness (r = ..570, p < .001) and psychological distress (r = ..350, p < .001). Furthermore, a positive correlation was found between hopelessness and psychological distress (r = .423, p < .001).

Table 2

Descriptive statistics, reliability coefficients, and correlation values

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Variables	Mean	SD	Skew.	Kur.	CR	AVE	α	ω	1	2	3
(1) PV	17.79	5.48	0.03	-0.71	.764	.618	.748	.751	_		
(2) Hopelessness	5.44	4.48	1.08	0.46	.808	.586	.864	.870	.468*	_	
(3) PD	4.90	2.66	0.68	0.23	.783	.644	.807	.816	.378*	.423*	_
(4) Well-being	41.96	13.43	-0.28	-0.12	.830	.619	.913	.913	321*	570*	350*

Note. PV= psychological vulnerability, PD = psychological distress, SD= standart deviation, Skew.= Skewness, Kur.= Kurtosis, CR = composite reliability, AVE = average variance extracted,  $\alpha$  = Cronbach's alpha,  $\omega$  = McDonald's omega, \* p < .001

# **Measurement Model**

Before testing the hypothesis model, the measurement model was first evaluated. The measurement model includes four latent variables (psychological vulnerability, hopelessness, psychological distress, and well-being) and ten observed variables. The analysis results indicated that the measurement model had acceptable fit indices (Table 3). Additionally, composite reliability (CR), average variance extracted (AVE), and reliability coefficients (Cronbach's  $\alpha$  and McDonald's  $\omega$ ) were examined to assess the convergent validity of the constructs in the measurement model (see Table 2). The analysis results showed that CRs were above .70 and AVEs were greater than .50, indicating that the measurement model demonstrated convergent and discriminant validity (Bagozzi & Yi, 1988; Fornell & Larcker, 1981). Cronbach's alpha reliability coefficients of the variables ranged from .748 to .913, while McDonald's omega coefficients varied between .751 and .913.

# **Structural Equation Modeling**

The study utilized SEM to examine the mediating role of hopelessness and psychological distress in the relationship between psychological vulnerability and well-being. Three different structural models were tested (Table 3). Initially, Model 1 explored the partial mediating role of psychological distress and hopelessness in the relationship between psychological vulnerability and well-being, revealing that the model had acceptable fit indices. However, it was found that the direct path coefficient from psychological vulnerability to well-being was not significant. Subsequently, Model 2 investigated the full mediating role of psychological distress and hopelessness, demonstrating acceptable fit. Finally, considering modification suggestions from Model 2, Model 3 was tested by adding a path from hopelessness to psychological distress. Model 3 exhibited good fit indices. Upon examination, Model 3 showed better fit indices and smaller AIC and ECVI values compared to the other tested models. Fit indices for the tested models are presented in Table 3. Standardized path coefficients for accepted Model 3 are shown in Figure 1.

The indices for the measurement model and alternative structural models										
Models	χ2	df	GFI	CFI	NFI	IFI	SRMR	RMSEA	AIC	ECVI
Measurement Model	180.48	29	.94	.93	.92	.93	.049	.080	232.490	.446
Model 1	203.43	30	.93	.92	.91	.92	.064	.100	253.43	.486
Model 2	204.35	21	.93	.92	.91	.93	.062	.085	252.35	.484
Model 3	180.79	30	.94	.94	.93	.93	.050	.078	230.79	.432

 Table 3

 Fit indices for the measurement model and alternative structural models

Figure 1.

Standardized values for the mediating role of hopelessness and psychological distress in the relationship between psychological vulnerability and well-being. (Note. vpar = psychological vulnerability parcell, FaF = feeling about future, LoM = loss of motivation, Expect =expectation.)



When analyzing the results, it was found that psychological vulnerability positively predicted hopelessness ( $\beta = .59$ , p < .001) and psychological distress ( $\beta = .29$ , p < .01). Hopelessness positively predicted psychological distress ( $\beta = .34$ , p < .001) and negatively predicted well-being ( $\beta = -.62$ , p < .001). Psychological distress also negatively predicted well-being ( $\beta = -.14$ , p < .05). Additionally, the direct effect of psychological vulnerability on well-being was non-significant; however, its indirect effect through hopelessness and psychological distress on well-being ( $\beta = -.43$ , 95% CI [-.50, -.37]) was significant. Together, the dependent and mediating variables accounted for 49% of the variance in well-being scores. Bootstrap analysis results regarding direct and indirect effects between variables are presented in Table 4.

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Bootstrap analysis results regarding standardized direct and indirect effects.

Paths		Coefficients	LB	UB	
Direct effects					
PV	$\rightarrow$ PD	.290	.134	.435	
PV	$\rightarrow$ Hopelessness	.593	.512	.668	
Hopelessness	$\rightarrow$ PD	.344	.182	.494	
Hopelessness	$\rightarrow$ Well-being	615	738	496	
PD	$\rightarrow$ Well-being	140	287	079	
Indirect effects					
PV	$\rightarrow$ PD	.204	.109	.301	
Hopelessness	$\rightarrow$ Well-being	048	-103	012	
PV	$\rightarrow$ Hopelessness + PD $\rightarrow$ Well-being	434	501	366	

Note. CI = confidence interval, LB = lower bound, UB = upper bound, PV= psychological vulnerability, PD = psychological distress. Number of bootstrap samples for percentile bootstrap confidence intervals: 5.000

# Discussion

This study sheds light on the relationships between psychological vulnerability and well-being among married individuals. The results emphasize that psychological vulnerability plays a critical role in influencing well-being through the mediation of hopelessness and psychological distress. The research findings can contribute to a more comprehensive understanding of the psychological mechanisms underlying well-being among married individuals.

This study underscores the negative relationship between psychological vulnerability and well-being. However, in the tested model, the direct effect of psychological vulnerability on well-being was not significant. This might be due to its full mediating role through hopelessness and psychological distress. These results confirm that psychological vulnerability is a significant determinant of well-being and aligns with previous research highlighting its association with various negative psychological outcomes (Ingram & Price, 2010). For instance, several studies conducted with university students have demonstrated the negative relationship of psychological vulnerability with subjective well-being (Satici, 2016; Satici, 2019), subjective happiness (Satici & Uysal, 2017), and flourishing (Uysal, 2015). Psychological vulnerability can affect individuals' psychological, physiological, and social functioning by creating stress and anxiety, ultimately leading to mental health problems (Rogers, 1997). These findings suggest that individuals with high psychological vulnerability are at a higher risk of experiencing lower levels of well-being due to increased sensitivity to stressors and negative emotions.

The results showed that psychological vulnerability positively predicted hopelessness, and hopelessness negatively predicted well-being. This finding is consistent with previous research (Eraslan-Capan, 2016; Haeffel et al., 2008; Ingram, 2003; Satıcı, 2016; Satıcı & Uysal, 2017). Additionally, this finding emphasizes the importance of cognitive assessments associated with psychological vulnerability. Hopelessness, linked to negative expectations about the future and a pessimistic outlook, can reduce well-being by contributing to various psychological distresses, particularly depression (Beck, 1967).

The results indicated that hopelessness not only contributes to psychological distress but also mediates the impact of psychological vulnerability on well-being. Previous studies have also emphasized the mediating role of hopelessness. For example, in a study by Satici and Uysal (2017) with university students, hopelessness was found to play a full mediating role in the relationship between vulnerability and subjective happiness. Another study with university students found that hope mediated the relationship between psychological vulnerability, resilience, and subjective well-being (Satici, 2016). In another study, the mediating role of hopelessness was confirmed in the relationship between social connectedness and flourishing (Eraslan-Capan, 2016). Lynd-Stevenson (1997), in a study with unemployed adults, observed that hopelessness mediated the relationship between vulnerability factors and depression. These findings suggest that interventions aimed at reducing hopelessness could be effective in mitigating the negative effects of psychological vulnerability on well-being."

This study indicated that psychological distress, including symptoms of depression and anxiety, mediates the relationship between psychological vulnerability and wellbeing. These findings indicate that individuals with high psychological vulnerability are more likely to experience greater distress in response to stressors (Lazarus & Folkman, 1984). Consistent with these findings, previous research has demonstrated the positive relationship between psychological vulnerability and depression and anxiety, suggesting increased risk for other mental health issues (Cox et al., 2001; Ingram & Luxton, 2005; Nogueira et al., 2017; Struijs et al., 2018). Higher levels of psychological distress may negatively impact the well-being of married individuals. A longitudinal study with cancer patients found that psychological distress and life satisfaction predict each other in the adaptation process to cancer (Hou & Lam, 2014). The results of this study further indicate that psychological distress could exacerbate the negative impact of psychological vulnerability on well-being. A study with adolescents found that depression mediates the relationship between stressful life events and subjective well-being (Ouyang et al., 2021). Thompson et al. (2005) examined the mediating roles of depression, anxiety, and hopelessness in predicting suicidal behavior among high school students, revealing that depression and hopelessness directly affect suicidal behaviors in males, while hopelessness plays a direct role in females. In a study with cardiovascular disease patients (Mei et al., 2021), depression and anxiety were found to fully mediate the relationship between life satisfaction and quality of life. The mediating role of psychological distress underscores the importance of addressing both emotional and cognitive factors in interventions aimed at enhancing well-being.

One of the most original findings of this study is the serial mediation of hopelessness and psychological distress in the relationship between psychological vulnerability and well-being. This serial mediation model demonstrates that psychological vulnerability predicts hopelessness, hopelessness predicts psychological distress, and in turn, this predicts lower levels of well-being. Hopelessness can trigger the development of depressive symptoms, thus negatively impacting well-being (Lynd-Stevenson, 1997). A study with young adults found that hopelessness and depression serially mediate the relationship between loneliness and life satisfaction. Tan Dat et al. (2023) showed in their study with university students that psychological distress and hopelessness serially mediate the relationship between self-esteem and suicidal ideation. The serial mediation of hopelessness and psychological distress highlights the complex and multifaceted nature of psychological processes affecting the levels of well-being among married individuals. These findings provide important clues for effective psychological counseling interventions aimed at supporting the wellbeing of married individuals. For instance, interventions targeting the simultaneous reduction of hopelessness and psychological distress could be the most promising approach to support well-being in vulnerable individuals.

# **Limitations and Future Research**

While our study provides valuable insights, it also has several limitations. Due to its cross-sectional nature, strong causal inferences cannot be made. Experimental and longitudinal studies would be necessary to determine the directionality of relationships. The participants in the study were exclusively Turkish married individuals, limiting the generalizability of findings to other populations or cultural contexts. Future research could replicate the model tested in this study in different cultural contexts to enhance the generalizability of the results. Additionally, the study's model could be tested comparatively between married and unmarried adults.

This study focused on the levels of well-being among married individuals in terms of risk factors. Future research could yield more comprehensive results by examining the mediating roles of personality traits, coping styles, social support, resilience, and other factors in the relationship between psychological vulnerability and well-being. Moreover, experimental studies are needed to test the effectiveness of strategies aimed at reducing hopelessness and psychological distress in improving the well-being of psychologically vulnerable individuals. Finally, qualitative research designs could be beneficial in obtaining more in-depth information about maladaptive schemas, life experiences, and coping strategies among individuals with high psychological vulnerability.

#### Conclusion

This study can make a significant contribution to the literature by demonstrating how psychological vulnerability diminishes well-being among married individuals. The research reveals that increased hopelessness and psychological distress mediate the impact of psychological vulnerability on well-being. These findings offer valuable insights for couple and family counseling practices, guiding interventions aimed at enhancing marital satisfaction and mental health.

In conclusion, addressing hopelessness and psychological distress is crucial for improving well-being among married individuals. Interventions focusing on cognitive and emotional processes can help mitigate the adverse effects of psychological vulnerability, leading to better psychological outcomes. This study enriches the well-being literature and provides valuable insights for counseling and preventive interventions. Future research should further explore the complex relationships between psychological factors and well-being to develop more effective interventions.

*Acknowledgement.* The author would like to thank all the participants for making this research possible with their valuable commitment.

*Ethical approval.* The study protocol has been approved by the Human Research Ethics Committee of Sinop University (No: 2024/127; Date: 02.05.2024). Informed consent was obtained from all participants.

*Peer-review.* This research was rigorously evaluated by two or more

experts in the field, and the study was refined based on their recommendations.

*Funding.* No funding support was received for this research.

*Disclosure statement.* No potential conflict of interest was reported by the author.

**Data Availability Statements.** The datasets generated and/or analyzed during the current study are available from the author on reasonable request.

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