



Languishing: An Overview of Causes, Impacts and Interventions

^{*1}Indhu Priya D and ²Dr. Nithya R

^{*1}Ph.D. Research Scholar, Department of Psychology, Bharathiar University, Coimbatore, Tamil Nadu, India.

²Assistant Professor, Department of Psychology, Bharathiar University, Coimbatore, Tamil Nadu, India.

Abstract

Languishing, a term coined by Corey Keyes (2002), refers to the psychological state lying between flourishing and depression. While not technically a diagnosis, languishing has become an important mental health issue, especially following the COVID-19 pandemic. People who languish report feeling low on energy, emotionally numb, less motivated, and generally stagnant. This article presents a descriptive account of the etiologies, effects, and interventions pertaining to languishing. It draws on empirical research and theoretical constructs to discuss major contributors such as chronic stress, social isolation, interrupted routines, and structural disparities. The effects of languishing are discussed on psychological, occupational, educational, and physiological levels and show its correlation with decreased productivity, academic disengagement, and long-term health consequences. Although common, languishing is still under-documented in diagnostic guides and public health literature. Successful interventions like mindfulness, positive psychological practices, social reconnecting, and policy reforms are framed within the context of Keyes' Five Vitamins of Flourishing model. This review calls for the identification of languishing as a public mental health imperative and suggests multi-level interventions for early detection, prevention, and recovery.

Keywords: Languishing, mental health continuum, flourishing, psychological well-being, positive psychology.

Introduction

Worldwide mental health landscape has gone through drastic changes in the past few years, with underdiagnosed psychological conditions coming to the spotlight. One such state is called Languishing, coined by Corey Keyes (2002) ^[1] to explain a condition that is being sandwiched between depression and flourishing on the mental health continuum. This is not a disorder, yet an important condition that possess vulnerabilities to various psychological conditions (Keyes, 2002) ^[1]. Languishing is characterized by low energy, stagnation, lack of focus and a general sense of emptiness (Grant, 2021) ^[2].

The COVID-19 pandemic resulted in debates surrounding languishing as most of the world reported feeling "joyless" or "empty" but not depressed. Those experiences raised a window into a mental health deficit that had long been ignored in clinical and public conversation. Research has revealed that those who experience languishing are at a higher risk of developing depression and anxiety disorders if not treated (Grant, 2021) ^[2].

Although there is increasing recognition, languishing remains inadequately described in clinical guides, inadequately known among clinicians, and under-thought in treatment approaches. The aim of this paper is to present a conceptual, empirical, and applied summary of languishing, highlighting essential psychosocial effects, current interventions, and future

research priorities.

Materials and Methods

This study followed a narrative literature review methodology to study the psychological concept of Languishing. The following steps were carried:

- i). **Sources of Literature:** Electronic databases including PubMed, Google Scholar, Scopus and JSTOR were used.
- ii). **Search Terms:** Languishing, mental health continuum, flourishing, psychological distress, subclinical mental health and COVID-19 and mental health.
- iii). **Inclusion Criteria:** Peer-reviewed journal articles, book chapters and trustworthy mental health reports published between 2002 and 2025.
- iv). **Exclusion Criteria:** Articles that used languishing in non-psychological background or without empirical backing.
- v). **Analysis:** Studies were synthesized to identify and integrate conceptual definitions, prevalence, impact and interventions.

Conceptual Understanding of Languishing

According to Keyes and Haidt (2003) ^[3], languishing is a condition in which people lack a positive outlook on life, are not socially or psychologically functioning normally, and are neither not reaching their full potential or achieving their

objectives or dreams. Languishers can be characterised as having poor mental health; they are neither mentally ill nor mentally healthy.

Mental illness and well-being symptoms are low in those who are mentally unwell or insufficiently healthy (Keyes & Lopez, 2002) [4]. They just focus on a portion of what makes a person mentally well, which is why their well-being is incomplete and perceived as languishing. According to Grant and Cavanagh (2007) [5], lazy people don't feel good about themselves and aren't achieving their objectives. Emotional pain, psychosocial challenges, constraints on daily activities, and missed workdays are all associated with languishing. Languishing individuals may also experience sensations of emptiness and hollowness, as well as avoidance, stagnation, and quiet despair (Keyes, 2002) [1].

According to Fredrickson and Losada (2005) [6], languishing happens when someone feels bad over an extended period of time. According to Compton and Hoffman (2012), those who are languishing are extremely unhappy and unfulfilled in life. Languishing includes symptoms like difficulty focusing, lack of motivation, and emotional flatness. It is not recognized as a clinical disorder in the DSM-5, but its prevalence and psychological cost are increasingly acknowledged.

Epidemiology and Societal Trends

Studies done during and following the COVID-19 pandemic have identified a stunning increase in incidents of languishing, especially among working adults, teenagers, and medical/frontline staff. The pandemic's distinctive psychological stressors—like prolonged isolation, interference with normal daily routines, unpredictability, and absence of social and occupational frameworks—have provided the perfect setting for this subclinical condition to emerge far and wide. Participants who didn't fit the clinical depression or anxiety criteria still described themselves as emotionally flat, unenthusiastic, and disconnected from purpose—characteristics of languishing.

In a much-covered article in *The New York Times*, organizational psychologist Adam Grant (2021) [2] referred to languishing as the "dominant emotion of 2021," bringing the term into public health conversation and popular discourse. Grant stressed that while nobody was clinically sick, they were also not exactly flourishing—a psychological neither-here-nor-there that resulted in work performance, focus, emotional states, engagement with others, and so on.

Empirical research backs up this increasing alarm. Population longitudinal data indicate that during their lifetimes, around 30% to 40% of adults worldwide might be experiencing episodes of languishing (Keyes, 2002; World Health Organization, 2022) [1, 9]. The rate is seemingly highest in cultures with a high stress on individual accomplishment but without related emotional or communal support structures.

This development highlights the importance of understanding languishing as a public, as well as private, mental health issue and framing policy and intervention that supports mental wellness, resilience, and community belonging both in post-pandemic recovery and in long-term mental health policy.

Characteristics of Languishing

Languishing is a psychological state between mental illness and mental well-being. First described by Corey L. M. Keyes (2002), it refers to a state of partial mental health—not mentally ill, but not mentally well. Considered the "neglected middle child" of mental health, languishing is characterized by a deep lack of vitality, purpose, and emotional investment

(Keyes, 2002; 2024) [1, 10].

One of the hallmark characteristics of languishing is a chronic feeling of stagnation, which is expressed as emotional flatness, lack of enthusiasm, and less interest in once-value-laden activities. People complain of trouble concentrating, procrastination, and lower ability for joy or enthusiasm (Keyes, 2024) [10]. The illness is not defined by the acute hopelessness or sadness of depression but by a flat emotional state that Adam Grant (2021) [2] has described as "the dulling of delight and the dwindling of drive."

Neuropsychological and psychological research indicates that this condition can result from disruptions in dopamine-mediated motivation systems, usually compounded by chronic stress, absence of goal-directed activity, and affective disconnection (Fredrickson, 2004; Keyes, 2024) [10]. Though not an identified clinical disorder within the DSM-5, languishing does have quantifiable cognitive, emotional, and behavioral manifestations that are similar to subthreshold expressions of mood and anxiety disorders (American Psychiatric Association, 2013).

Some of the symptoms commonly seen are:

- Emotional numbness and detachment
- Mental confusion or lack of concentration
- Social isolation or diminished interpersonal connections
- A "why-try" orientation or lack of motivation (Keyes, 2024)

Notably, the subtlety and gradual development of languishing make it challenging to identify in its earliest phases. In contrast to burnout, which is typically associated with identifiable stressors such as workload, languishing is more generalizing—arising from chronic stagnation in multiple domains of life including career, relationships, and personal development (Keyes, 2011; Grant, 2021) [11, 2].

In addition, COVID-19 pandemic research showed an increase in languishing among populations worldwide, with individuals experiencing emotional disconnection but not clinical depression—a testament to how socially and culturally prominent this state has become (World Health Organization, 2022; Grant, 2021) [9, 2].

Causes of Languishing

The underlying causes of languishing are multi-dimensional and complex. One major cause is ongoing stress, especially in emotionally unfulfilling or high-demand work settings. Longitudinal studies show that workers who experience poor support and control in the workplace are more likely to be psychologically distressed and languish (Keyes, 2024) [10].

Social isolation and loneliness are also major contributors. The decline of warm, trusting relationships—facilitated by the COVID-19 pandemic and increasing digital solitude—has resulted in a shared decline in emotional health (Keyes, 2024) [10]. Younger populations, including adolescents and young adults, seem particularly susceptible because of developmental changes and precarious social identities (Keyes, 2024) [10].

Life changes—such as giving birth, losing a job, or aging—may further enhance the risk. Furthermore, environmental factors such as racism, discrimination, and economic uncertainty add to feelings of purposelessness and alienation, particularly among vulnerable populations (Keyes & Simoes, 2012; Wang, 2023) [12, 13].

Languishing results from multiple psychosocial and environmental causes. Chief among these are:

- Chronic stress without adequate recovery periods

(Fredrickson, 2004)

- Social isolation and lack of support, particularly during emergencies like the COVID-19 pandemic (WHO, 2022)
- Routine or lack of challenge in both personal and work life
- Disturbance of daily routines and goal structures, including adolescents and employees
- Fuzzy identity or meaning, which can decrease intrinsic motivation and satisfaction

Keyes (2011) ^[11] emphasized that failure to fulfil basic psychological needs—autonomy, competence, and relatedness—can result in languishing.

Impact of Languishing

While languishing is not a mental illness, its effects on psychological health, work performance, academic success, and even physical health are deep and long-reaching. It is an insidious disruptor—suppressing motivation, undermining purpose, and degrading resilience—and yet commonly overlooked because it does not produce the showy symptoms of a clinical condition like depression or anxiety (Keyes, 2002; Grant, 2021) ^[1, 2].

Psychological and Emotional Effects: Fundamentally, languishing results in a strong decline in psychological resilience—the ability to adapt in situations involving stress or adversity. Those who languish have lessened emotional range and greater impairment in mood regulation, thus a higher susceptibility to eventual onset of clinical disorder. Longitudinal studies show that languishing individuals are two to three times more probable than those flourishing to get depression or anxiety in the long run (Keyes, 2005). The hazard develops as a result of continued emotional disengagement, hence fostering conditions for poor mental health to creep in gradually and imperceptibly.

Occupational and Workplace Consequences: Languishing similarly carries severe occupational and workplace ramifications. Presenteeism—being present at work but operating at below-capacity levels—is far more prevalent among those who are languishing (Keyes, 2024) ^[10]. Based on Keyes' study of U.S. adults, those in a state of languishing miss approximately six additional days of work per year compared to their flourishing peers, and they exhibit significant productivity loss even when present (Keyes, 2024) ^[10]. This has economic and organizational implications in that it is a precursor to disengagement, ineffective collaboration, and dampened innovation.

In high-performing settings, such as medicine, law, or academia, languishing can display itself in moral disengagement and ethical compromise, with people becoming psychologically disconnected from purpose and consequence. Research among medical students and residents finds that languishing is strongly associated with increased burnout, cynicism, and even unethical behavior (Keyes, 2024) ^[10].

Educational Impact: In school contexts, especially among youths and young adults, languishing translates to decreased academic motivation, low GPA, and higher rates of procrastination. Students who languish do not read deeply into their course of studies and are prone to test anxiety, low self-efficacy, and drop-out risk (Schotanus-Dijkstra *et al.*, 2016) ^[14]. Low goal orientation and positive emotion also translate to low creativity and involvement in extracurricular or leadership experiences.

Physical and Biological Health Consequences: The physical

effect of languishing is not any less compelling. Studies indicate that those who languish have higher levels of inflammation, impaired immune function, and markers of cardiometabolic risk (Keyes & Simoes, 2012) ^[12]. These biological consequences are mediated by stress response systems that are triggered—even at low levels—by the chronic malaise and emotional exhaustion defining languishing. Over time, this can lead to an increased risk of premature death, particularly when combined with unhealthy lifestyle behaviors and social disengagement (Fuller-Thomson *et al.*, 2020) ^[15].

Public Health and Societal Implications: At the societal level, large-scale languishing is associated with a reduction in social capital because emotionally disengaged citizens are less likely to engage in civic, volunteer, or communal activities. It also raises demand on healthcare systems—not in acute crises, but in subclinical mental health loads that are more difficult to diagnose and treat. Without explicit diagnostic criteria, they tend not to be detected until symptoms intensify, resulting in greater public health expenditure and lost opportunities for early treatment (World Health Organization, 2022) ^[9].

Interventions to combat Languishing: While languishing is not a clinical condition, it represents an important public mental health issue as it has a subtle but insidious effect on emotional well-being and functional ability. Treating languishing involves multi-level intervention that cuts across individual, relational, institutional, and systemic levels.

Keyes' "Five Vitamins of Flourishing" Framework: As defined by Keyes (2024) ^[10], unwinding languishing is developing psychological "nutrients" he refers to as the Five Vitamins of Flourishing. They are critical domains of life that foster growth, resilience, and subjective well-being:

- **Meaning and Purpose:** Developing a feeling of purpose in daily life serves as a psychological anchor. People with a clear life purpose experience less psychological distress and are more resilient to survive existential crises (Keyes, 2024; Seligman *et al.*, 2005) ^[10, 16].
- **Connectedness and Belonging:** The social relationship is central to human flourishing. It has been consistent evidence that quality interpersonal relationship, be it family, community, or workplace, acts as a defense against emotional numbness and social withdrawal (Fredrickson & Joiner, 2002) ^[17].
- **Engagement in Activities of Life:** Actively doing things that challenge, interest, and capture us sparks intrinsic motivation and fights stagnation. Participation in "flow" activities (Csikszentmihalyi, 1990) ^[18] has been found to replenish positive affect and enhance satisfaction.
- **Self-Acceptance and Development:** Self-acceptance and improvement-oriented striving promote a healthy self-concept. Self-compassion, self-reflection journaling, and strengths-based interventions assist in transitioning individuals from self-doubt to growth orientation (Neff, 2003; Keyes, 2024) ^[19, 10].
- **Gratitude and Positive Emotion Practices:** Regularly practicing gratitude rewires the brain to notice and savor positive experiences. These interventions, drawn from positive psychology, enhance emotional well-being and can reverse the affective dullness of languishing (Seligman *et al.*, 2005) ^[16].

Mindfulness-Based Approaches: Mindfulness meditation, body scan, and mindful breathing have been found to reduce symptoms of emotional numbing and promote awareness and

presence (Kabat-Zinn, 2003) ^[20]. These interventions enable individuals to observe emotional and physical states non-judgmentally, thereby regaining control over mental states. Reflective activities such as journaling improve emotional clarity and cognitive processing, which are usually compromised during periods of languishing (Keyes, 2024) ^[10].

Relational and Social Interventions: An increasing body of research highlights the value of social reconnection to overcome languishing. Elementary relational activities such as beginning small talk, cooperative work, or volunteering can restore feelings of community and trust. In organizational settings, resilience can be enhanced through team bonding, psychological safety, and systems of recognition (Grant, 2021) ^[2]. Community discussions and peer support groups can also allow for collective healing and mutual responsibility.

Public Health and Policy-Level Solutions: Treating languishing at scale demands confronting structural determinants of mental health. Systemic problems like racism, poverty, job insecurity, and unavailability of healthcare cause collective emotional exhaustion and existential alienation. Public policy can be instrumental in:

- Increasing access to school and workplace mental health services.
- Instituting universal basic wellness programs.
- Establishing safe and welcoming space for historically oppressed groups (Fuller-Thomson *et al.*, 2020) ^[15].

Governments and institutions need to also understand that well-being is not only the lack of sickness, but the presence of vitality, purpose, and connection. Policies need to be framed from a proactive approach to mental health that incorporates flourishing as a desired outcome.

Conclusion

Languishing is a significant, though underdiagnosed, mental health state that deserves more attention from psychological researchers and mental health professionals. Situated between flourishing and depression, it encompasses a wide population living with hidden distress that could develop into clinical disorders if early intervention is not provided.

This summary emphasizes the necessity for further empirical research, diagnostic specificity, and public health practices to address languishing. Incorporation of positive psychology, routine-based recovery, and community-based care can be useful tools in reducing this psychological state and enhancing general well-being.

References

1. Keyes CLM. *The mental health continuum: From languishing to flourishing in life*. *Journal of Health and Social Behavior*. 2002; 43(2):207–222. <https://doi.org/10.2307/3090197>
2. Grant A. *There's a name for the blah you're feeling: It's called languishing*. *The New York Times*, 2021. <https://www.nytimes.com/2021/04/19/well/mind/covid-mental-health-languishing.html>
3. Keyes CLM & Haidt J. *Flourishing: Positive psychology and the life well-lived*. American Psychological Association, 2003.
4. Keyes CLM & Lopez SJ. *Toward a science of mental health: Positive directions in diagnosis and interventions*. In C.R. Snyder & S.J. Lopez (Eds.), *Handbook of positive psychology*. Oxford University Press, 2002, 45–59.
5. Grant AM & Cavanagh MJ. The goal-focused coaching skills questionnaire: Preliminary findings. *Social Behavior and Personality: An International Journal*. 2007; 35(6):751–760.
6. Fredrickson BL & Losada MF. Positive affect and the complex dynamics of human flourishing. *American Psychologist*. 2005; 60(7):678–686. <https://doi.org/10.1037/0003-066X.60.7.678>
7. Compton WC & Hoffman E. *Positive psychology: The science of happiness and flourishing* (2nd ed.). Wadsworth, 2012.
8. American Psychiatric Association. *Diagnostic and statistical manual of mental disorders* (5th ed.), 2013. <https://doi.org/10.1176/appi.books.9780890425596>
9. World Health Organization. *Mental health and COVID-19: Early evidence of the pandemic's impact*, 2022. https://www.who.int/publications/i/item/WHO-2019-nCoV-Sci_Brief-Mental_health-2022.1
10. Keyes CLM. *Languishing: How to feel alive again in a world that wears you down*. Crown Publishing, 2024.
11. Keyes CLM. Authentic purpose: The spiritual infrastructure for flourishing. *Journal of Management, Spirituality & Religion*. 2011; 8(4):281–297. <https://doi.org/10.1080/14766086.2011.630131>
12. Keyes CLM & Simoes EJ. To flourish or not: Positive mental health and all-cause mortality. *American Journal of Public Health*. 2012; 102(11):2164–2172. <https://doi.org/10.2105/AJPH.2012.300918>
13. Wang SC. Counseling marginalized communities in the face of cultural trauma. *The New York Times*, 2023. <https://www.nytimes.com/>
14. Schotanus-Dijkstra M, Ten Have M, Lamers SM, de Graaf R & Bohlmeijer ET. Measuring mental well-being: A critical review. *BMC Psychology*. 2016; 4(1):1–15. <https://doi.org/10.1186/s40359-016-0121-1>
15. Fuller-Thomson E *et al.* Suboptimal baseline mental health associated with premature all-cause mortality: Findings from 18 years of follow-up in a national sample. *Journal of Psychosomatic Research*. 2020; 136:110176. <https://doi.org/10.1016/j.jpsychores.2020.110176>
16. Seligman MEP, Steen TA, Park N & Peterson C. Positive psychology progress: Empirical validation of interventions. *American Psychologist*. 2005; 60(5):410–421. <https://doi.org/10.1037/0003-066X.60.5.410>
17. Fredrickson BL & Joiner T. Positive emotions trigger upward spirals toward emotional well-being. *Psychological Science*. 2002; 13(2):172–175. <https://doi.org/10.1111/1467-9280.00431>
18. Csikszentmihalyi M. *Flow: The psychology of optimal experience*. Harper & Row, 1990.
19. Neff KD. The development and validation of a scale to measure self-compassion. *Self and Identity*. 2003; 2(3):223–250. <https://doi.org/10.1080/15298860309027>
20. Kabat-Zinn J. Mindfulness-based interventions in context: Past, present, and future. *Clinical Psychology: Science and Practice*. 2003; 10(2):144–156. <https://doi.org/10.1093/clipsy.bpg016>
21. Lyubomirsky S, Sheldon KM & Schkade D. Pursuing happiness: The architecture of sustainable change. *Review of General Psychology*. 2005; 9(2):111–131. <https://doi.org/10.1037/1089-2680.9.2.111>