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Hope Is the Ticket to Life: Insights From Disadvantaged African American Youth

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LOYOLA UNIVERSITY CHICAGO

“HOPE IS THE TICKET TO LIFE”: INSIGHTS FROM DISADVANTAGED AFRICAN AMERICAN YOUTH

A DISSERTATION SUBMITTED TO
THE FACULTY OF THE GRADUATE SCHOOL
IN CANDIDACY FOR THE DEGREE OF
DOCTOR OF PHILOSOPHY

PROGRAM IN SOCIAL WORK

BY
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For my husband, Brian
As everyone goes about their everyday life, hope is like the main key, it’s like the key that you have to your whole life. It’s like a ticket or whatever. Like it takes you everywhere you need to go, it gets you in everything you need to get in and it’s just there all the time so yes I do, now that I had this discussion with you, I do I think of hope a different way, cause I feel that like hope go about through your everyday life and you need hope; everyone needs hope.

R. W., Youth Participant
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ABSTRACT

It is important to look at strengths in populations, especially those termed “at-risk” or “disadvantaged.” Hope and compassion are positive qualities inner-city African American youth can possess, and further research on these constructs with this population is needed. This exploratory, mixed methods study included both quantitative measures of hope and compassion and qualitative interviews with inner-city African American youth who are participating in an after school program. The following research questions were addressed: (1) How do the youth describe hope?, (2) How do the youth’s relationships develop and maintain hope?, (3) How do the youth describe goal definition and pursuit as related to hope?, (4) How do the youth say the After School Matters program helps them develop hope and compassion?, and (5) What do the youth say is the relationship between experiences of compassion and the development of hope? Qualitative analysis yielded six overall themes: (1) Relationships with others, specifically caring, encouragement, and compassion from others, as these relate to developing and sustaining hope, (2) Religion and faith as these relate to hope, (3) Staying on track, staying focused, and perseverance as these relate to hope and goal achievement, (4) Hope as it relates to wanting something to happen or something that can happen, (5) Thinking positively (motivated, believing in yourself) as it related to sustaining hope, and (6) Hope as it relates to goals. Analysis of the quantitative scales found the youth to have above average levels of hope, average levels of compassion, and below average levels of empathy. A
significant positive correlation was found between the Children’s Hope Scale and the Compassionate Love Scale Stranger-Humanity Version. Key findings were that disadvantaged youth do have hope and their hope comes from relationships. The strengths and weaknesses of the qualitative and quantitative methodology are discussed. Implications for social work practice (specifically after school programming and individual interventions), policy, and research are also addressed.
CHAPTER ONE

INTRODUCTION

The exclusive focus on pathology that has dominated so much of our discipline results in a model of the human being lacking the positive features that make life worth living. Hope, wisdom, creativity, future mindedness, courage, spirituality, responsibility, and perseverance are ignored or explained as transformations of more authentic negative impulses...The aim of positive psychology is to begin to catalyze a change in the focus of psychology from preoccupation only with repairing the worst things in life to also building positive qualities.

Seligman and Csikszentmihalyi, 2000

Statement of the Study Issue

As much as Seligman and Cziksezentmihalyi’s (2000) point about the lack of explorations into more positive features of life is true, little research has been carried out on variables that reflect the strengths of human beings. Of particular interest to the present study is the quality of realistic, goal-laden hope since it is this author’s view that knowledge about this construct could be critical for developing social work knowledge about effective help for profoundly disadvantaged youth in overcoming the challenges of their environments. The current study explored hope in inner-city African American adolescents ages 14-18. Some initial research results with profoundly disadvantaged youth suggest that their experience of hope is born out of their having received care and compassion from others. Therefore, the relationship between compassion and hope in this population was also explored.
**Rationale**

It is important to look at strengths in populations, especially those termed “at-risk” or “disadvantaged.” Hope and compassion are positive qualities all youth, including inner-city African American youth, can possess (Adelabu, 2008; Hinton-Nelson, Roberts, & Snyder, 1996; Snyder, Hoza et al., 1997; Valle, Huebner, & Suldo, 2006) and further research on these constructs with this population is needed. When looking at hope in African American youth, only four articles were found that used 100% African American populations, and only two of those used Snyder's theory of hope (Snyder et al., 1991). The other two used a modified version of Kadzin’s hopelessness scale for children. As Snyder, Hoza and colleagues (1997) have found, measures of hope have discriminant validity from measures of hopelessness, and so are measuring different constructs. Research exploring the link between experiences of compassion and hopeful thought could not be found through literature searches, thus it appears this topic had not been looked at. A previous study this researcher was involved with explored compassion in disadvantaged African American youth (McCrea, Bulanda, Guthrie, & Ellison, n.d.). Themes of hope could be found in the data, as the participants discussed how experiences of compassion helped them to develop goals for themselves, which is a critical element of hope (Snyder et al., 1991; Snyder, 1995; Snyder, 2002).

As will be described in more detail in Chapter Two, research has demonstrated that hope is vitally connected to different types of professional and personal accomplishments, such as academic achievement (Adelabu, 2008), life satisfaction (Valle et al., 2006), and lower levels of internalizing behavior problems (Valle et al., 2006). The
National Association of Social Workers (2008) code of ethics also lays the groundwork for the importance of studying hope in this population. The preamble of the code states that the social work profession focuses on “the needs and empowerment of people who are vulnerable, oppressed, and living in poverty” (National Association of Social Workers, 2008, para. 1). In line with the values and ethics of social work practice, the present study aimed to understand hope in inner-city African American youth and how to increase hope in this population.

**Research Questions and Hypotheses**

The purpose of the study was to look at the following questions using the population of inner-city African American youth, who are in an After School Matters program on the South side of Chicago:

Research Question 1: How do the youth describe hope?

Research Question 2: How do the youth’s relationships develop and maintain hope?

Research Question 3: What do youth say is the connection between goal definition and pursuit and hope?

Research Question 4: How do the youth say the After School Matters program helps them develop hope and compassion?

Research Question 5: What is the relationship between experiences of compassion and the development of hope?

Four hypotheses were also postulated:

Hypothesis 1: Participants will define hope and describe experiences of hope in a way consistent with Snyder’s theory of hope.
Hypothesis 2: Youth will state that the relationships they experience in the After School Matters program with leaders, counselors and fellow youth helps them develop hope.

Hypothesis 3: Youth will state that experiences of receiving compassion help them to develop hope.

Hypothesis 4: Youth with higher levels of hope will also have higher levels of compassion (there is a positive correlation between scores on the Children’s Hope Scale and scores on the Balanced Emotional Empathy Scale and Compassionate Love Scale).
CHAPTER TWO
BACKGROUND

There is a paucity of research focusing on strengths in disadvantaged African American adolescents and the development of those strengths, and so more research in this area is needed (even though the field of social work has looked at clients from a strengths perspective throughout its history). Also, there has been a recent interest in strengths and positive psychology in other mental health fields, which is exemplified by the positive psychology movement (www.positivepsychology.com) and illustrated in the quote by Seligman and Csikszentmihalyi (2000) at the beginning of Chapter One.

This literature review will focus on ways previous research has conceptualized hope in African American adolescents and the areas in which research is lacking. Compassion will then be discussed, followed by the After School Matters program, with which the participants of this research were involved.

Hope Theory

The pre-eminent scholar on hope is C.R. Snyder because he unites into his theory of hope many contemporary related and empirically based concepts such as self-efficacy, a goal-oriented approach to human motivation and behavior, and agency-based understanding of people’s inner life. Snyder’s central work occurred from 1990 – 2002. In this study, hope is defined using his theory of hope (Snyder et al., 1991; Snyder, 1995; Snyder, 2002). Definitions have evolved throughout Snyder’s many publications, but all
include the same components. The following definitions have been used: hope is “a cognitive set that is composed of a reciprocally derived sense of successful (a) agency (goal-directed determination) and (b) pathways (planning of ways to meet goals)” (Snyder et al., 1991, p. 570); “hope is defined as the process of thinking about one’s goals, along with the motivation to move toward (agency) and the ways to achieve (pathways) those goals” (Snyder, 1995, p. 355); “hope is defined as the perceived capability to derive pathways to desired goals, and motivate oneself via agency thinking to use those pathways” (Snyder, 2002, p. 249). These definitions have three elements in common: goals, pathways thinking, and agency thinking. Snyder (2002) provides a thorough overview of these three elements, which will be discussed below. Snyder’s definition of hope was chosen for this study because he is the seminal researcher about the subjective experiences comprising hope. Furthermore, his emphasis on goals and goal directed behaviors are consonant with findings that African American youth believe that compassion, specifically supporting their experience of their own abilities and capacities for professional and personal fulfillment, is the basis for their hope (McCrea et al., n.d.).

**Goals.** The assumption underlying hope theory is that human behavior is goal-directed (Snyder, 1994a). Goals therefore serve as the cognitive component to this theory and provide the targets for hopeful thinking (Snyder, 2002). High hope and low hope individuals think about goals in different ways. When a high hope person is presented with a goal that has a high probability of being achieved, he or she will be likely to make goal achievement less certain in order to make it more of a challenge (Snyder, 2002).
High hope individuals may also achieve goals that seem impossible, whereas low hope individuals are more likely to give up when a goal seems impossible (Snyder, 2002).

**Pathways thinking.** Pathways thinking is the successful planning of ways to meet goals (Snyder et al., 1991). High hope people will think about how they want their future to be and find ways to achieve those goals. They will also create a feasible route to the goal; one that they feel confident will achieve the goal (Snyder, 2002). High hope individuals are also able to easily think of alternative routes when they reach an impediment to achieving their goal due to more flexibility in their thinking (Snyder, 2002). Low hope individuals, on the other hand, may have difficulty creating a well-articulated route to achieving a goal, are unlikely to produce alternative routes, and are less flexible in their thinking (Snyder, 2002). As an individual becomes closer to goal attainment high hope people, as compared to low hope people, are better able to quickly refine their actions to more effectively reach their goals (Snyder, 2002).

**Agency thinking.** Agency thought is the extent the individual perceives his or her ability to carry out pathways to achieve goals (Snyder, 2002). Snyder (2002) points out that agency thought is similar to Bandura’s concept of self-efficacy but is not the same. The difference is that self-efficacy focuses on whether an individual can carry out the pathways to goals, whereas agency thought focuses on whether the individual will carry out the pathways, which relates to intention. This difference is significant as hope theory posits that it is not whether one can carry out pathways towards a goal (self-efficacy), but rather whether one has the will that puts him or her on the pathway to begin with, which
is necessary in order to even consider whether one can (P. Hong, personal communication, February, 28, 2011).

Agency thought provides the motivation and energy to begin and continue goal pursuits (Snyder, 2002). When an individual faces barriers to achieving a goal, it is agency thought that helps to generate the motivation to create alternative pathways (Snyder, 1994a, as cited in Snyder 2002). High hope people tend to increase agency thought using positive self-talk that reinforces their ability to achieve the goal (Snyder, 2002). Agency thought and pathways thought are “reciprocal, additive, and positively related, although they are not synonymous” (Snyder et al., 1991, p 571). Neither is sufficient for hopeful thought and goal achievement, even though both are necessary (Snyder et al., 1991).

**History of Hope Research**

Snyder (2002) lays out the history of hope theory in a review article on hope. In 1989, he first articulated hope as the opposite of making excuses for mistakes or poor performance. Instead, hope was about striving for positive goals. From looking at the literature on motivation, Snyder saw a common theme, which was the desire to reach goals. He was influenced by the writings from the cognitive revolution on pathways-like thinking, which led to his emphasis on the significance of pathways thinking in goal pursuits. These ideas led to his research on thought processes. Snyder found that people think in terms of goals and are constantly thinking of ways to achieve those goals. Through discussions with Karl Menninger, Snyder developed cognitions as the basis of hope, with emotions playing a secondary, but still important role. In the final step in
developing his definition of hope, Snyder determined that hope could be both situational and trait-like. He states:

My interviews with people made it clear that hope was something more than the thoughts surrounding a specific goal. Superseding their thoughts about a specific goal, people appeared to have self-appraisals about their capabilities in goal pursuits more generally. That is to say, people had enduring, self-referential thoughts about their capacities to produce routes to goals, and their capacities to find the requisite motivations for those goal pursuits. (Snyder, 2002, p. 250)

The end result of the following process was the development of the definitions of hope stated in the above section.

Other Theories About Hope

In addition to Snyder’s development of his definition and theory of hope, there have been two other theories of hope. Stotland (1969, as cited in Snyder, 1995) developed a theory of hope based on cognitive schemas. He believed higher levels of hope resulted when a person believed there was a high likelihood of reaching a goal. He also thought it was necessary that a person perceive a goal as important in order for hope to be relevant. Stotland did not measure hope but instead inferred it from an individual’s behavior.

Averill, Caitlin, and Chon (1990, as cited in Snyder, 1995) developed a second theory of hope. They looked at hope primarily as an emotion with a cognitive component based on rules. “The emotion of hope is seen as being appropriate when a goal is important, under some control, at the mid-range in terms of probability of attainment, and socially acceptable” (Snyder, 1995, p. 356). Snyder (1995) stated that their conceptualization of hope is difficult to measure due to the emotion and rule-based nature of the definition. Snyder (1995) developed his conceptualization of hope partly from a
need for a measurable definition of hope, which is something the other definitions were lacking.

All three theories of hope discussed above have a cognitive basis and include the concept of goals, but differ mainly in the idea of measurability. The theory by Averill, Caitlin, and Chon focused more on emotions, whereas Snyder (1995) believed emotions were secondary to goals and cognitions and that the process of goal attainment (and the successes and failures within that process) lead to various emotions. Snyder’s theory, as compared to the other two, stressed the need for a measurable definition of hope.

**Development of Hopeful Thought**

Snyder (1994a) discussed the development of hope, starting in infancy. From birth, infants use their senses to experience the world around them. Through their senses, infants start to see that things are related, that one thing can lead to another and that some events can be anticipated. By age 2, children see that they can do things intentionally, and begin to realize that they have some control over their environment (pathways towards their goals). Children realize that by acting on the environment (pointing at a desired object or saying the name of it) they can reach their goals (the parent brings the child the object). The child then sees himself as the instigator for achieving goals (agency). This process starts in infancy and develops throughout life.

Children can develop hope through interactions with role models, such as caregivers, parents, teachers, and social workers. These role models can help children learn to create pathways towards goals and remain motivated (agency) to achieve those goals, thereby increasing their level of hope (Snyder, Hoza et al., 1997). For example,
Kliwer and Lewis (1995) found that parents’ use of active coping suggestions was positively correlated to the children’s level of hope when faced with Sickle Cell Disease. The parents served as a model for ways to cope with adversity, which raised the children’s level of hope.

It also appears that hope is, to some degree, an interactive process as development proceeds. The initial resiliency conferred by hope makes it possible for children to overcome difficulties and achieve their goals and to then be more likely to believe that in the future they can achieve their goals when faced with adversity (Snyder, Hoza et al., 1997). Children with higher hope also tend to connect themselves to positive outcomes and remove themselves from negative outcomes, which means they feel more in control over positive events in their lives (Snyder, Hoza et al., 1997).

Additionally, when children have the experience of being resilient and overcoming obstacles, they gain more hope in the form of believing that they can reach desired goals. Thus, hope can be thought of as an interaction between the child’s inner life, experiences and actions, and reflections on those experiences and actions. The long-range impact of being able to think in the hopeful ways Snyder outlines is that the child can remain hopeful despite the occurrence of negative events or in the face of adversity. The complexity of the process associated with the development and maintenance of hope is one reason why it was important to study hope using a mixed-methods approach that would allow for further specification of these interactive variables.
**Adolescent Development**

Psychodynamic understanding of adolescents comes mainly from Erikson, who viewed the primary crisis of adolescence as identity versus role confusion (Austrian, 2002). Commonly, adolescents test out different roles without committing to any single one. When testing out these roles, the way he or she appears to others is very important to the adolescent (Austrian, 2002). Austrian (2002) explains that Erikson referred to the crisis of this stage as an identity crisis. If there is a positive resolution to this crisis, the result is a coherent identity. If there is a negative resolution, the result is a sense of role confusion, leaving the adolescent unsure of who he or she is. Erikson believed the identity crisis occurred because the rapid physical development adolescents experience brings up earlier crises. The adolescent is then not sure if the person he thought he was is the same person he still is (Austrian, 2002).

The adolescent stage of development also stresses the importance of peer relationships. Peers can serve as role models and provide feedback to each other in this process of identity development (Austrian, 2002). As discussed above, hope involves pathways and agency to achieve goals for the future. Since adolescents are attempting to find their identity, this involves setting goals for how they would like their future to be and finding ways to achieve those goals. In addition, since peers are so important in this stage, it is possible that having friends with higher hope will help an adolescent to be more hopeful.

When looking at the complexity of the developmental processes that embrace internal, familial, and community variables, a more appropriate theoretical approach may
be ecological systems theory. Spencer (1995) in particular underscored the relevance of ecological systems theory for understanding the many variables, including cultural variances, impacting the development of disadvantaged African American youth. Ecological systems theory, first developed by Bronfenbrenner (1977), looks at biopsychosocial development within a cultural, historical, and societal context. It views relationships between systems (the individual, family, community, and larger systems) as reciprocal and circular and behavior as a function of complex motivations acquired based on the interplay between person and environment.

**African American Adolescents**

As the present study examines experiences of hope in disadvantaged African American adolescents, it is important to have an understanding of the nature of the disadvantage facing this population (for an extensive review of all of the inequalities facing African American youth, see the Children’s Defense Fund’s 2011 publication).

The economic crisis of the last three years has pushed Black children and youth deeper and deeper into an abyss of poverty, hunger, homelessness and despair. Black children and youth continue to face multiple risks from birth and throughout life that increase the danger of their becoming part of the Cradle to Prison Pipeline crisis that leads to dead end lives. (Children’s Defense Fund, 2011, p. 1)

The Cradle to Prison Pipeline Campaign was launched by the Children’s Defense Fund (2008) to bring attention to the disproportionate number of minority youth who end up in prison:

A Black boy born in 2001 has a 1 in 3 chance of going to prison in his lifetime; a Latino boy a 1 in 6 chance; and a White boy a 1 in 17 chance. A Black girl born in 2001 has a 1 in 17 chance of going to prison in her lifetime; a Latino girl a 1 in 45 chance; and a White girl a 1 in 111 chance. (Children’s Defense Fund, 2008, p. 1)
The above statistic sounds alarming, but it is also important to look at the factors that lead to this reality. African American children are three times more likely to live in poverty and four times more likely to live in extreme poverty as Caucasian children (Children’s Defense Fund, 2008). In Illinois, 38.6% of African American children live in poverty, compared to 9.6% of Caucasian children and 21% of Latino children (Children’s Defense Fund, 2009). This higher level of poverty can lead to other difficulties. African American children are also twice as likely to have inadequate health insurance, even if a parent is working full time (Children’s Defense Fund, 2008). In education, they are more likely to read below grade level, be held back a grade, and receive a greater number of suspensions (Children’s Defense Fund, 2008). More specifically in Illinois, 86% of African American children do not read at grade level and 91% do not demonstrate mathematical skills at grade level (Children’s Defense Fund, 2009). The lack of an adequate education can make an adolescent more likely to have difficulties with substance abuse (Children’s Defense Fund, 2008).

Statistically, African American children have different family compositions than other children. Less than 40% of African American children live in two parent households, in contrast to about 75% of Caucasian children (U.S. Census Bureau, 2010). The African American children who do not live in two parent households are more likely to live with only their mother. Almost 50% of African American Children live with only their mother, compared to 18% of Caucasian children (U.S. Census Bureau, 2010). Also, African American children are four times more likely than Caucasian children and twice as likely as Latino children to live with neither parent (U.S. Census Bureau, 2010).
African American children also represent 32% of the foster care system even though they comprise 16% of the population (Children’s Defense Fund, 2008). Being in the foster care system can lead to a lack of social support as children are removed from their homes and families, which can subsequently lead to greater mental health problems, substance abuse, and contact with the juvenile justice system (Children’s Defense Fund, 2008). These real adversities have tended to skew social and behavioral research towards a negative view of African American adolescents (e.g., a focus on their difficulties and pathology). Their strengths have been neglected, yet clearly it is at least as important to recognize and nurture strengths as it is to understand and treat pathology.

As a result of some of the conditions they face, African American adolescents are more likely to live in inner-city neighborhoods with high levels of violence. A few suggestive studies have looked at the relationship between living in these communities and an adolescent’s level of hope, and found that overall the adolescents have moderate to high levels of hope and are able to find ways of coping with living in communities where there is violence (Brown & Gourdine, 1998; Brown & Gourdine, 2001; Davis-Maye & Perry, 2007). While much research has focused on neighborhood violence causing stress among inner city African American adolescents, in a youth-driven, mixed-methods study with this population, the teens reported their greatest sources of stress coming from school, friends, and family (Chandra & Batada, 2006). Chandra and Batada (2006) state there is so much focus in the literature on the impact of violence and the neighborhood, but that more attention should be paid to school and relationship stresses, as those are what the teens reported as being most salient to them.
In a focus group of 30 African American female adolescents living in an urban area, Brown and Gourdine (1998) found that the girls rated the following problems as the causes of the current conditions of their neighborhoods (in order of importance):

1. lack of jobs, 
2. lack of respect for each other; 
3. racism, 
4. teen pregnancy; 
5. glorification of a negative lifestyle, such as is portrayed in rap records; 
6. the disproportionate imprisonment of Black men who return to their communities and carry on a culture of crime and violence; and 
7. negative experiences at home. (p. 119)

These adolescents were very perceptive about the problems in their communities, and their assessment is very much in line with the risks and stressors facing African-American youth.

**Exposure to violence among African American adolescents.** “Family violence, gun violence and community violence threaten children’s sense of security, hope and vision for the future” (Children’s Defense Fund, 2011, p. 5). It is therefore important to understand the exposure to violence among African American youth and how that impacts their sense of hope. Brown and Gourdine (1998) looked at experiences of violence, a fear of violence, and the impact of violence on hopefulness and anger in 30 African American female adolescents. They found that 78% of the adolescents feared violence in their neighborhood and 63% feared violence in their school. When looking at exposure to violence, 62% had a relative or close friend that was killed by violence and 33% percent had attacked or hurt someone else. The same girls stated in a focus group that girls were as violent as boys and they felt that girls were violent due to jealousy over material possessions and a lack of respect for other girls. They also felt it was appropriate to lose control of one’s anger if provoked by someone else.
Brown and Gourdine (2001) then looked at more specific types of violence in another study of 75 inner-city African American female adolescents. They found: 22% had been physically abused, 23% had been sexually abused, 54% had a relative or close friend killed by an act of violence, 22% had attempted suicide, 55% knew someone who had attempted suicide, 21% had been forced to have sex, and 40% had attacked or hurt someone. In this study, 65% of the girls feared violence in their neighborhood, 61% feared violence in the school, 35% feared violence within the family, 31% feared violence with friends, and 32% feared all of the above. Sixty-four percent of the girls also reported being afraid to walk in their neighborhood. In a focus group with these girls, they also said that girls are just as violent as boys, and that most of the fights between girls are over boys.

In addition, the girls in the Brown and Gourdine (2001) study believe there is a relationship between child abuse and violence, and that children who witness violence within their families are more likely to be in violent relationships as adolescents or adults. The girls also reported a need to be aware of their surroundings and remain vigilant while in their neighborhoods, communities and schools as a way to cope with the violence. They all had plans in case someone was following them or they felt in danger. In addition, the girls felt like there was a lack of cohesion in their neighborhoods and that the adults did not feel empowered to make changes within the community.

**Synthesis of the literature on hope among African American adolescents.**

Perhaps it is surprising that, despite the fear and violence represented in the studies cited above, overall, inner-city African American adolescents have moderate to high levels of
hope (Adelabu, 2008; Hinton-Nelson et al., 1996; Roesch, Duangado, Vaughn, Aldridge, & Villodas, 2010; Valle, Huebner, & Suldo, 2006). Some studies expected to find differences between African American adolescents and other ethnic groups or were expecting low levels of hope due to a fear of and exposure to violence, but these were not found (ex: Hinton-Nelson et al., 1996). Although higher levels of hope were found in adolescents with less direct exposure to violence, the adolescents with more exposure did not display a lack of hope (Hinton-Nelson et al., 1996).

Several studies have used Snyder’s definition of hope. Adelabu (2008) found that hope agency was positively related to academic achievement (GPA) but hope pathways were not significantly related to academic achievement. Hope agency and ethnic identity significantly predicted academic achievement in adolescents living in an urban environment. The researcher used the Adult Hope Scale (Snyder et al., 1991) in this study, which has the same underlying theoretical base as the Children’s Hope Scale (Snyder, Hoza et al., 1997), but asks different questions. Valle et al. (2006) and Hinton-Nelson et al. (1996) both used the Children’s Hope Scale. Valle et al. (2006) found that hope scores predicted life satisfaction and internalizing behavior problems a year later, but not externalizing behavior problems when controlling for initial levels of the mental health variables. Hope also served to lessen the negative effects of stressful life events. They saw that for children with low hope, as the number of stressful life events increased, internalizing behaviors increased and life satisfaction decreased. Hinton-Nelson et al. (1996) found higher hope related to witnessing acts of violence and less personal experience of violence. Overall, as long as the adolescents did not personally experience
much violence, even though they knew there was a lot of violence around them, they could remain hopeful.

However, three articles did not use Snyder’s definition of hope. Davis-Maye and Perry (2007) found that maternal social support (maternal support of the child) was a predictor of hope. Brown and Gourdine (1998) found a statistically significant negative relationship between exposure to violence and hopefulness and a statistically significant positive relationship between anger and exposure to violence. Brown and Gourdine (2001) found lower exposure to violence was correlated with a higher hopefulness score. These results taken together with the Hinton-Nelson et al. (1996) results suggest that less exposure to violence can lead to higher levels of hope, but more important is the adolescent’s personal experience of violence. Adolescents who have a greater sense that violence can be directed towards them personally will be more likely to have lower hope scores.

Several different definitions and measures of hope were used, so it is difficult to compare across the studies. Half of the studies used Snyder’s definition of hope as evidenced by using the Adult Hope Scale (Snyder et al., 1991) or the Children’s Hope Scale (Snyder, Hoza et al., 1997). The other studies used different definitions, but not all even specified the definitions used. Davis-Maye and Perry (2007) defined hope as the ability to use self-care in response to stressful life events. The Brown and Gourdine (1998, 2001) articles used Kazdin’s Hopelessness Scale for Children, but did not give information about this measure or the theoretical basis behind it.
There were also some mixed results when looking at the relationship between exposure to violence and hope. The Brown and Gourdine (1998, 2001) studies stressed that exposure to violence can lead to lower levels of hope, whereas Hinton-Nelson et al. (1996) found higher hope could be maintained in adolescents who witnessed acts of violence but were not physically hurt themselves. The other three studies discussed above addressed different topics: academic achievement, maternal support, internalizing behavior problems, and externalizing behavior problems. Except for the topic of violence (Brown & Gourdine, 1998, 2001; Hinton-Nelson et al., 1996), there were not similar studies or replication of any of the other topics in the previous research on hope in African American adolescents.

Overall, in the studies discussed above, researchers found hope to be related to higher levels of maternal support, higher academic achievement, and less exposure to and direct experiences of violence in African American adolescent populations. In adolescent populations with a large percentage of African Americans, hope was related to less personal experiences with violence, higher life satisfaction, and less internalizing behavior problems when faced with stressful life circumstances.

Out of the four articles specifically focusing on African American adolescents, three of them used 100% female populations (Brown & Gourdine, 1998, 2001; Davis-Maye & Perry, 2007), and only one had a sample of both males and females, even though there were more females (Adelabu, 2008). It appears there is a need for more research with male and female samples and with all male samples. Gender differences, however, have not been found in men and women who took the Adult Hope Scale (Snyder, 1995).
and boys and girls who took the Children’s Hope Scale (Snyder, Hoza et al., 1997). Snyder, Hoza and colleagues (1997) suggest that there may actually be no differences, or that boys and girls may envision different types of goals when answering the questions. “Thus, it may be that both genders are equally high in agency and pathway thoughts for goals they view as ‘appropriate’ for their gender” (pp. 414-415).

Four of the studies discussed above used samples of African American adolescents. These were the only studies that could be found which looked at this population. Other studies (Valle et al., 2006; Hinton-Nelson et al., 1996) had samples with a high percentage of African American adolescents. More research on hope in this population is needed. During the validation of the Children’s Hope Scale, Snyder and colleagues (1997) had two samples that allowed them to look at racial differences in hope, but they suggest that more samples are needed in order to determine if there really are racial differences in scores on the Children’s Hope Scale. When looking at the difficulties that African American adolescents may be more likely to experience, the above studies mostly focused on violent neighborhoods.

More research should look at hope from the adolescent’s perspectives, as that may yield different results. The Children’s Hope Scale is a useful way to look at hope as research has validated it on different populations, such as children in public schools, children with health problems, and children with a psychiatric diagnosis (Snyder, Hoza et al., 2007), but more qualitative research is needed. The two studies discussed above that used focus groups (Brown & Gourdine, 1998, 2001) did not use the Children’s Hope Scale. A study is needed that uses the Children’s Hope Scale in addition to qualitative
measures such as in depth interviews and focus groups. Qualitative measures can be used to put the quantitative data in perspective and see more of the subjective experiences of the adolescents.

**Compassion**

In addition to exploring hope in African American adolescents, the present study also looked at how experiences of compassion can lead to hopeful thought. Gilbert (2005a) conceptualizes compassion as the openness to one’s own suffering and the suffering of others in a way that is non-judgmental and non-defensive. He says it involves motives (the desire to alleviate suffering), emotions, thoughts (understanding the causes of suffering), and behaviors (acting with compassion). Compassion is associated with loving-kindness, or *metta*, in the Buddhist tradition (Gilbert, 2005a). *Metta* “occurs when one can consider the joys, sorrows, and well-being of others, even those considered to be enemies” (Eisenberg, 2002, p. 133). Loving in a compassionate way is not about the desire for others or the search for attachments with them. Rather it is the creating of a safe relationship with another, the regulating of one’s own fears and hostile urges, and the simultaneous displaying of warmth (Gilbert, 2005b).

Compassion is an important part of any psychotherapy relationship, but systematic studies of it as a basis for constructive personality change are sparse, especially if one carefully differentiates compassion from its constituents of empathy and unconditional positive regard, or from what it contributes to, such as the working alliance (McCrea & Guthrie, n.d.):

In psychotherapy, compassion has been viewed as crucial, but again, often under different names – empathy, unconditional positive regard, containment or holding,
client-therapist rapport, and working alliance. Compassion appears, partially disguised, in the literature on good parenting, under headings such as availability, sensitivity, and responsiveness. In recent years compassion has become visible in its own right, partly because of the growing emphasis in educated circles on Buddhism, which highlights compassion (Dalai Lama, 2001, 2002), and partly because of the tendency for compassion to wear thin in cases of ‘compassion fatigue’ (e.g. Keidel, 2002), a common problem in helping professions. (Gillath, Shaver, & Mikulincer, 2005, p. 121)

**Compassion and related constructs.** Gilbert (2005b) described compassion as involving different components: being sensitive to distress, being able to tolerate distress, sympathy, empathy, non-judgment, caring for the well being of others, and creating opportunities for growth and change through the provision of warmth.

Compassionate relating emerges from complex interactions between motives to be concerned for and improve the well-being of others, and competencies to be sensitive to others’ distress with sympathy for, and understanding of, their position—with a complex array of cognitive competencies. At the same time one must be able to tolerate distress in others and in self to avoid defensive withdrawal or over-control. Empathic abilities that may begin with emotional resonance mature with cognitive abilities (for example, theory of mind and metacognitions); these abilities allied with a non-condemning or non-shaming judgment, support motives for care…Warmth, with its elements of kindness, gentleness, safe-making and soothing signals, interpenetrates these elements of compassion. (Gilbert, 2005b, pp. 52-53)

All of these components are interrelated and important to caring for others in a compassionate way.

Other important and related components of compassion are empathy and sympathy. Empathy occurs when “an individual feels the same emotion as another or understands what is in the mind of another” (Gilbert, 2005b, p. 41). Similarly, Eisenberg (2002) defines empathy as:

an affective response that stems from the apprehension or comprehension of another’s emotional state or condition, and that is similar to what the other person
is feeling or would be expected to feel. Thus, if a person views another person crying and is sad as a consequence, he or she is experiencing empathy. (p. 135)

According to Gilbert (2005b), empathy is the best way to create safeness for another person. Empathy, which allows one to feel the same emotions as another, can also show someone how to properly nurture another, based on what it is that particular person needs to feel safe. Also, the ability to show empathy towards others is related to one’s own sense of safety. This sense of safety is usually based in early attachment relationships because “an early secure relationship enables us to understand, tolerate, and integrate a range of feelings” (Gilbert, 2005b, p. 43).

Sympathy, which typically comes from empathy, is about feeling concern for the distress in another person (Eisenberg, 2002). Eisenberg (2002) stated that this definition of sympathy is similar to the Buddhist concept of metta. In this case though, one does not need to match the emotion in the other person (Gilbert, 2005b). Sympathy is a key emotion for compassion because, in feeling sympathy, one connects emotionally with the suffering of another person, which is a first step towards the desire to alleviate that suffering. This understanding of emotions, however, may not be accurate because feelings and emotions elicited by sympathy do not necessarily match those in the other person (Gilbert, 2005b). Both empathy and sympathy are important in understanding compassion because care and compassion require that one can understand the feelings and needs of others (Gilbert, 2005b).

**Compassion and attachment theory.** Since compassion has been so little studied in the psychotherapy relationship, it seemed important to consider other research that has relevance to compassion, most notably, attachment theory. Since it is often assumed that
compassion is born out of positive, nurturing relationships and sound early attachments (Gillath et al., 2005), a brief review of attachment theory is an important foundation for considering compassion.

**Attachment theory.** Basham and Miehls (2004) discuss attachment theory and how it relates to adult interpersonal relationships. They delineate the four types of attachment categorized by Ainsworth (1982) and Main and Solomon (1990): secure, avoidant, ambivalent, and disorganized. A securely attached child feels safe enough to explore his or her environment, but also will look for and can be easily soothed by the caregiver when distressed. A child with an avoidant attachment does not look for the caregiver when distressed and may ignore the caregiver’s attempts at reconnecting after a separation. A child with an ambivalent, or anxious, attachment will look for the caregiver when distressed but then resist because he does not feel soothed by the caregiver. Disorganized children are unpredictable in their attachment style when separated from the caregiver and may also display fear towards the caregiver. This attachment style is often seen in children who have experienced trauma. They can fear the same caregiver whom they desire to be close to.

Basham and Miehls (2004) then relate these child attachment styles to the adult attachment styles described by Main, Kaplan, and Cassidy (1985). A secure attachment in childhood relates to a secure attachment in adulthood, characterized by the ability to form intimate relationships that are fulfilling for the individual. Avoidant attachment in childhood relates to dismissing attachment in adulthood. These individuals tend to be emotionally distant from others and fail to recognize the importance of attachment
relationships, which makes them more likely to be self-reliant. Ambivalent childhood attachment relates to preoccupied adult attachment. These adults may seek out relationships with others but then feel conflicted about the closeness or distance of that relationship. They can also become extremely angry when disappointed in relationships. Lastly, disorganized childhood attachment relates to a disorganized attachment in adulthood. This style of attachment is characterized by approach and avoidance in relationships, and chaotic and possibly violent behaviors. When relating attachment theory to compassion, mostly secure, avoidant, and ambivalent attachment are discussed.

*The development of compassion and attachment theory.* Since Snyder (1994a) stated that hope is developed from infancy and caregivers play a primary role in the development of hope, it is important to understand early attachment relationships and how they can also develop compassion. “Attachment security provides a foundation for compassion and caregiving…attachment theory therefore provides a well-validated conceptual framework for further exploration of the development and social-relational roots of compassion” (Mikulincer & Shaver, 2005). The way an individual is cared for earlier in life impacts how caring of and compassionate towards others that person may be later in life. Additionally, secure attachment is related to higher levels of empathy and more helping behaviors shown towards others (Gillath et al., 2005). People are better able to develop compassion for others if they have experienced compassion themselves (Gilbert, 2005b).

There is hope, however, for those who do not experience compassion from early caregivers. According to Bowlby (1988), interactions with important others throughout
life can update the working models that an individual has for attachment (as cited in Gillath et al., 2005). More research is needed in this area, specifically looking at how those who did not experience compassion and warmth from early caregivers can still grow up to show these behaviors towards others and decide that they do not want others to suffer in the same way they did as children (Gilbert, 2005b).

Gillath et al. (2005) discuss the ways individuals with secure and insecure or anxious attachments follow different paths in the development of compassion. The premise, based on Bowlby’s ideas of internal working models, is that individuals internalize attachment figures and use them as a model for future relationships. Individuals with secure attachment have internal working models of others who are caring and available, and so they are more likely to care for others and see that they need and deserve compassion. They are then more likely to provide compassion and support to the person in need because that support was provided to them earlier in life (Gillath et al., 2005).

Individuals with insecure attachments are less likely to feel compassion for others because they do not feel secure themselves (Gillath et al., 2005). Individuals with anxious attachments tend to be too focused on the threats around them and on their own unsatisfied attachment needs to be able to care for others or attempt to alleviate the suffering of others by showing them compassion. Additionally, they can become overwhelmed when others close to them are suffering (Gillath et al., 2005). Individuals with avoidant attachments are more likely to detach from others in need and therefore they are unlikely to show compassion towards them (Gillath et al., 2005). It appears that
individuals with secure attachment styles are the most likely to have the skills necessary to care for others in a compassionate way, whereas individuals with insecure, anxious, or avoidant attachments, are less likely to show compassion towards others. This, however, does not mean that individuals with insecure attachments can neither show compassion towards others nor have a desire to alleviate the suffering of others.

Gillath et al. (2005) also compared adult attachment styles with how individuals care for (and therefore show compassion towards) their children and romantic partners. They found that adults with secure attachments were more likely to care for their children in responsive ways that made the children feel secure. They were also better able to respond to their children’s needs. In romantic relationships, adults with secure attachments “were more sensitive to their partners’ needs, reported more cooperative caregiving, and described themselves as more likely to provide emotional support than insecure individuals” (Gillath et al., 2005, p. 130). Securely attached individuals are also more likely to respond to their partners based on their partners’ needs, and act in a warm and supportive way when their partners are suffering. Individuals with avoidant attachments are less likely to care for their partners because their caregiving system deactivates when around others, leaving them unable to respond to others in an empathic and compassionate way (Gilleth et al., 2005).

Since most of the research done by Gilleth and colleagues (2005) was correlational in nature, they set out to conduct experimental research to predict the effects of attachment style on compassion in a more causal way. They enhanced attachment security (by priming participants with words that evoke images of safety and security)
and positive affect. They found across many studies that it was enhancing attachment security, and not just increasing positive affect, that allowed individuals to show more compassion towards the suffering of others, and to not become as stressed themselves when confronted with the suffering of others (Gilleth et al., 2005; Mikulincer, Shaver, Gillath, & Nitzberg, 2005). Mikulincer et al. (2005) also found these results across cultures: “attachment-security priming led to greater compassion and willingness to help a person in distress; these effects occurred repeatedly, reliably, and in two different societies” (p. 835). On the other hand, individuals with more anxious or avoidant attachment styles were less likely to show compassion towards another’s suffering and more likely to become distressed in response to the suffering of another due to poor internal self-soothing (Gilleth et al., 2005). More specifically, anxious attachment lead to more personal distress and less compassionate responses to the suffering of others, and avoidant attachment lead to detachment from the suffering of others and therefore less compassionate responses (Mikulincer et al., 2005). However, when individuals with avoidant attachments felt that showing compassion could enhance their own mood, they were more willing to help others (Mikulincer et al., 2005).

**Warmth and safety.** Returning to the seminal (and only) author studying compassion in psychotherapy, Gilbert (2005b) identified additional elements of compassion: warmth and safety. These concepts are both related to one another and are based on attachment relationships. He says that safeness occurs through social relationships. A parent creates safety by protecting the child from threats, and the child seeks to be close to the parent. Those who feel safe and who feel their own needs are met
are better able to focus on the needs of others, which is necessary for compassion (Gillath et al., 2005).

While attachment relationships that provide safety are important, attachment relationships that provide warmth are also necessary for developing compassion (Gilbert, 2005b). Parents can protect a child from danger, but in a way that does not express warmth for the child, making such a relationship insufficient for the development of compassion (Gilbert, 2005b). Gilbert (2005b) states that there are three key features of warmth:

First, warmth provides signals of care and investment that are soothing and switches on the recipients’ ‘safeness’ internal organisation. Second, warmth can involve a sharing of positive affect between individuals that stimulates liking, affection and feelings of connectedness. Third, warmth is more likely when individuals feel safe with each other. Individuals who are easily threatened and become defensive may struggle to feel or express warmth. (p. 28)

Soothing, the sharing of positive affect, and safety are all related to warmth.

Soothing can help an individual to regulate his or her arousal and control the emotions and behaviors associated with anger, anxiety, and sadness (Gilbert, 2005b). Sharing positive affect is also involved with warmth, and with allowing individuals to feel connected to one another (Gilbert, 2005b). This sharing of positive affect sends the child a message that he or she is likable and lovable (Gilbert, 2005b). The child comes to stimulate positive affect in the mind of others and relate it to himself, leading the child who sees warmth in the primary caregiver to see himself as lovable (Gilbert, 2005b).

Gilbert (2005b) states that warmth can be nature- or nurture-based: “An orientation to be warm and compassionate to others is an emergent quality of our minds that is related to temperament [nature], and to having experienced the warmth and care of
others [nurture]” (p. 31). He says early experiences of safety, or its opposite, threat, can lead to development that can either help or hinder the development of warmth and compassion. This is related to the different attachment histories discussed above, as attachment is based on the safety and warmth an individual feels from primary caregivers. Those with secure attachment histories feel safer and can therefore better show care and concern for others and themselves. Individuals with secure attachment histories can show concern for the distress of others because the warmth and safety provided by caregivers has allowed them to show compassion for others (Gilbert, 2005b).

**Four developmental stages of compassion.** Gilbert (2005b) also discusses four developmental stages of compassion. He calls the first stage Global Empathy. This stage occurs in infancy, and is best described by emotional contagion, where the infant may feel distress based on something that happens to others, but the infant does not have a clear separation of self and others. The second stage, called Egocentric Empathy, begins around 1 year of age. In this stage, “self and other are becoming distinguished and the child recognizes that distress in the other is in the other and not the self although there may be no clear idea about what the distress is” (pp. 50-51). From ages 2 to 3, the stage of Empathy for Another’s Feelings occurs. Children now can recognize that feelings in another person are not necessarily the same as their own feelings. In the fourth stage, Empathy for Another’s Life Condition, children begin to recognize that others may have different life circumstances from them, and also show concern and interest in helping others, even those who are not members of their family or friends. According to this model, children have the foundation for showing compassion from a young age.
Compassion and Buddhism. A discussion of compassion would not be complete without looking at its conceptualization within Buddhist traditions. In Buddhism, compassion is related to loving-kindness (*metta*) and the belief that developing loving-kindness and compassion for self and others is central to relieving suffering for all (Gilbert, 2005a). The four noble truths of Buddhism show how suffering is viewed in the Buddhist tradition:

Life is full of threats and suffering (or *dukkha*—sometimes translated as dis-ease). All sentient beings seek to be free of suffering (*dukkha*). However, many of our ways of trying to reduce threats and relieve ourselves of suffering and distress, such as seeking the love/approval of other humans, fame, glory, sex, or wealth, may offer only temporarily comforts (all things are impermanent). Moreover, they can leave us worse off because we can come to crave these things, fear their loss, and in pursuing them we can distort our sense of self and create envy and suffering for others. (Gilbert, 2005a, p.1)

In the Buddhist tradition, compassion is directed towards all living things, along with the desire to alleviate suffering for all beings (Ringu Tulki & Mullen, 2005). Compassion can be developed from mindfulness and meditations on compassion. As compassion and the alleviation of suffering are so important in Buddhism, meditations on compassion are a fundamental meditation practice. They are also relational in nature and involve imagining social relationships and alleviating suffering for all of humanity (Ringu Tulki & Mullen, 2005).

The neurobiology of compassion. According to Daniel Siegel (2007), the human brain creates representations of others’ minds through a system of mirror neurons. This system is important for the ability to show compassion and empathy towards others. The mirror neuron system can represent the intentional states of others and create emotional resonance, which allows the person to understand the way another is feeling. The mirror
neuron system understands the way another is feeling and then matches our emotions and bodily states to that of the other person. This is similar to the definition of empathy discussed earlier and empathy is an important component of compassion according to Gilbert (2005b).

Siegel (2007) also describes mindsight, which means “we are linked to each other on the mental plane of reality” (p. 169). He refers to this as the seventh sense, which “enables aspects of the mind—thoughts, feelings, intentions, attitudes, concepts, images, beliefs, hopes, and dreams—of oneself or others to be brought into the focus of attention” (p. 122). This ability allows us to feel empathy and compassion for others. He also states that the reflective practice of meditation and mindfulness can help to develop mindsight abilities.

There are also specific parts of the brain that are involved with compassion. The areas of the brain that are concerned with maternal behavior and the preservation of the species are necessary for compassion. Wang (2005) stresses the importance of the limbic system (including the cingulated cortex) in maternal behavior in mammals, as there is not a similar region in the brains of reptiles (this part of the brain was involved in the evolution from reptiles to mammals). Thus the limbic system is necessary for nursing and maternal care, vocal communication (which allows the mother and child to maintain contact), and play.

Another important part of the brain for the development of compassion is the neocortex (Wang, 2005). Portions of the neocortex are “responsible for the uniqueness of human intelligence, including planning, problem solving, and refined differentiation and
discrimination of happenings in the external environment, but it also provides important inhibitory control of subcortical systems allowing for more reflexive and conditioned responses” (Wang, 2005, p. 77). The prefrontal cortex is involved with the feeling of a personal identity and an increased awareness of internal states. The larger neocortex in humans and the amount of care human caregivers put into their young has allowed for the development of compassionate behavior towards others (Wang, 2005).

All of the elements of compassion discussed above are inter-related. Attachment theory can be used as the theoretical basis for the development of compassion for self and others. Those with secure attachments feel that they are lovable and feel safe enough to focus on the needs of others and to alleviate the suffering of others. Inherent in a secure attachment are the ideas of safety and warmth. Parents who provide these to their children are more likely to have children with secure attachments. Those children are then more likely to show warmth and compassion, and provide safety, to their own children. This is all based in the development of the human brain to focus on the survival of the species, mirror the feelings of others, and understand the minds of others.

The After School Matters Program

Since the participants in this study were members of the After School Matters (ASM) Program, it is important to have an understanding of the structure of the program and the experiences it provides for the youth. The specific program, titled Stand Up! Help Out!, is funded by the After School Matters Program so that the youth are paid for their participation in the program, just like in a job. The mission of the Stand Up! Help Out! program is:
to make it possible for youth to experience their own leadership capabilities, to
develop their personal and career-related strengths, to experience the benefits of a
supportive youth group, and to improve their communities through volunteer
activities such as providing community education fairs and mentoring children.
Stand Up! Help Out! provides partnerships for youth that develop their self-
determination and strengths, such as their reflectiveness about their decision-
making, their communication skills, and their compassion for themselves and
others. The youth evaluate the program and contribute to designing services on an
ongoing basis. (Stand Up! Help Out!, 2010, About Us para 1)

During the time of this study there were two programs being run: One during Fall 2009
and Spring 2010 for 10 weeks each semester, and another for 10 weeks only during
Spring 2010. The teens in each program participated in mentoring younger children and
other activities including: listening to speakers discuss their career experiences; putting
on a health fair; learning about the college application process; preparing to apply for
college by writing personal statements and participating in mock interviews; and being
involved in outreach activities in the community. This structure allowed the youth build
relationships with younger children, adult leaders, peers, and community members. Each
program had one or two facilitators depending on its size. The facilitators were social
workers with the assistance of student interns working on their Master’s Degrees in social
work. Some youth also participated in individual counseling with the social work interns
while attending the program.

In summary, hope and compassion are strengths African American youth can
possess. There has been little previous research looking at either hope or the relationship
between compassion and hope with this population. Despite the violence they are
disproportionately likely to be exposed to, previous research has found that inner-city
African American youth have moderate to high levels of hope (Adelabu, 2008; Hinton-
Nelson, Roberts, & Snyder, 1996; Valle, Huebner, & Suldo, 2006). Since they have been found to have high levels of hope, it is important to understand how to develop and sustain this hope, and the impact of hope on achieving their goals. Much research with the population has focused on the impact of experiencing violence on levels of hope, but there is a lack of research exploring the development of hope in African American youth and how the youth define hope.
CHAPTER THREE
METHODOLOGY

Research Questions

The purpose of the study was to look at the following questions using the population of inner-city African American youth, in an after school program on the South side of Chicago:

Research Question 1: How do the youth describe hope?
Research Question 2: How do the youth’s relationships develop and maintain hope?
Research Question 3: What do youth say is the connection between goal definition and pursuit and hope?
Research Question 4: How do the youth say the After School Matters program helps them develop hope and compassion?
Research Question 5: What is the relationship between experiences of compassion and the development of hope?

Hypotheses

A broader definition of hypothesis was used in this study, which includes assumptions (Hypothesis, n.d.).

Hypothesis 1: Participants will define hope and describe experiences of hope in a way consistent with Snyder’s theory of hope.
Hypothesis 2: Youth will state that the relationships they experience in the After School Matters program with leaders, counselors and fellow youth helps them develop hope.

Hypothesis 3: Youth will state that experiences of receiving compassion help them to develop hope.

Hypothesis 4: Youth with higher levels of hope will also have higher levels of compassion (there is a positive correlation between scores on the Children’s Hope Scale and scores on the Balanced Emotional Empathy Scale and Compassionate Love Scale).

Research Design

This was an exploratory study using mixed methods that included both quantitative measures of hope and compassion and qualitative interviews with inner city youth participating in an after school program. The main mixed-methods design in this study was a convergent design (Creswell & Plano Clark, 2011). “The convergent design occurs when the researcher collects and analyzes both quantitative and qualitative data during the same phase of the research process and then merges the two sets of results into an overall interpretation” (Creswell & Plano Clark, 2011, p. 77). This design was used to gain a broader perspective than using one methodology and combines the strengths of both methods (Creswell & Plano Clark, 2011). The quantitative data was used to triangulate the qualitative data and both sets of data were compared. What made this an exploratory study, in large part, is that very few previous studies have used Snyder’s theory of hope with this population, and none could be found using mixed methods.
The main qualitative method used was content analysis. Hsieh and Shannon (2005) define qualitative content analysis as “a research method for the subjective interpretation of the content of text data through the systematic classification process of coding and identifying themes or patterns” (p. 1278). Directed content analysis was used in this study. This methodology is used when “existing theory or prior research exists about a phenomenon that is incomplete or would benefit from further description” (Hsieh & Shannon, 2005, p. 1281). Snyder’s theory of hope was the theoretical base for this study and was used to focus the research questions. The qualitative data was collected in the participants' natural environment and looked at the subjective meanings of their experiences. Quantitative data supplemented the qualitative data to better understand the constructs of hope and compassion in the study population. While the purpose of the research was not simply to study the impact of the ASM program on hope and compassion, a preliminary study (Bulanda, 2008) suggested that the program does significantly impact the youths’ hope and compassion and it was hypothesized that the youth would confirm this in the interviews.

Participatory action methods were also used as the topic came directly from the youth. In a previous study exploring compassion in this population (McCrea, Bulanda, Guthrie, & Ellison, n. d.) 71 participants were interviewed about their experiences of compassion and completed the Compassionate Love Scale and Balanced Emotional Empathy Scale. The youths’ responses to these initial interviews were most illuminating about the connections between compassion and hope. The youth stated that receiving compassion from others helped them to feel like they can accomplish goals in the future.
The literature was searched, Snyder’s theory of hope fit what the youth were saying (hope is essentially about accomplishing your goals), and this theory was used to create the interview protocol in the current study.

**Philosophy of Research**

As this study uses mixed methods, the main philosophy of research used was pragmatism, because this worldview allows the researcher to use both quantitative and qualitative methodologies and philosophies (Creswell, 2009). Baert (2005) discusses the main tenants of the pragmatist philosophy. Pragmatism allows for a diversity of methodologies in research. Additionally, research is a conversation where researchers can learn from others and use opposing ideas to reflect on their own. Finally, the methodology a researcher uses depends on the questions the research aims to address. Pragmatism is also appropriate for this study since it allows for a focus on subjective experience, allows for the social and political context of the research and can incorporate social justice (Creswell, 2009). The qualitative methodologies are approached from a constructivist perspective. This view values the meaning as constructed by the individual participant (Creswell, 2009). The participants were assured that there are not any right or wrong answers and that the researcher is interested only in their thoughts, feelings, and reactions. The constructivist view also acknowledges that culture shapes the way individuals view the world (Creswell, 2009), and this understanding is important when working with African American populations in order to understand their unique perspectives.
Sampling

The sample for the current study, in which youth were interviewed intensively about their experiences of hope and the connection between hope and compassion, consisted of 48 high school students in an After School Matters program, who were interviewed and completed standardized scales at different times during one of two programs. Thus, a systematic non-probability sample was utilized. The participants ranged in age from 14-18 years old and 60% were female. All 48 participants completed the individual interview. There were 16 participants who completed the hope interview before the compassion interview, but the rest were interviewed about compassion first. Participants in two different After School Matters programs completed scales at different times. Fourteen participants completed scales at one program’s inception in October. Seven new participants joined that program in February and completed scales at that time, and then a total of 11 participants completed scales at the conclusion of the program in April. The second program was a 10-week program, and 22 participants completed scales at the completion of that program in May. Out of the 48 participants, 40 completed both the individual interview and the scales. Only 11 of these participants completed pre- and post-test measures.

There are some specific characteristics of this sample. All of the students are African-American and face the challenges of profound poverty and residing in inner-city communities riddled with violence. For example, three times this year, the youth attending the After School Matters program have been caught in gunfire going to or from the program. Many come from families where parents are stressed by poverty, illness,
substance abuse, or domestic violence. The great majority of students attend chaotic and underprivileged schools where even the high school valedictorians read only at the 6th grade level, and so most of the sample students are educationally impoverished as well. In these respects, the sample youth are like many African-American youth in profoundly poor communities in the U.S.:

Many schools contribute to the devastating *Cradle to Prison Pipeline*. The overrepresentation of poor and minority children in grade retention, out-of-school suspensions and special education have interacted with low teacher expectations to contribute to these children’s discouragement, low self esteem and disengagement from school. Poor Black children experience the least qualified teachers, worst education facilities and fewest resources. Black children experience too few Black teachers in the classroom. Only eight percent of public school teachers today are Black and only two percent are Black males. (Children’s Defense Fund, 2011, p. 3)

In some other respects, the sample youth are distinctive. For example, these students have to apply for and be accepted into the After School Matters program and may therefore have different characteristics (for instance, being more constructively motivated to benefit from services) than students from the same neighborhood that either did not apply or were not accepted into the program. Also, students who remained in the program during the pre- and post-test measures of the hope and compassion scales may have been more committed to the program than students who left the program. Students with more commitment to the program may have had higher levels of hope and more stable goals for their future. Nonetheless, these findings have applicability to many African-American youth who are positively motivated but also face significant disadvantage. The goal in this study was less to generalize to all African American
students or even all African American students in impoverished communities, but rather
to understand the meaning of hope and compassion in more depth for this group.

**Measurement**

Hope theory, as developed by Snyder (Snyder, 1994; Snyder, Hoza et al., 1997) is
a theory that focuses on the ontologies of cognition and intentionality. Hope is defined as
the process of thinking about one’s goals, along with the motivation to move toward
(agency) and the ways to achieve (pathways) those goals (Snyder, 2002). The assumption
is that behavior is goal directed (Snyder, 1994). Children can develop hope through
interactions with role models, such as caregivers, parents, teachers, and social workers.
These role models can help the child learn how to find pathways to goals and remain
motivated (agency) to achieve their goals (Snyder, Hoza et al., 1997).

Hope was conceptually defined using Snyder's theory of hope. For the qualitative
research components of this study, the variables were defined as the answers to the
questions and the way the participants defined the variables. For example, the way the
participants defined goals was uncovered through qualitative questions such as: “What
types of goals do you have for your future?” Hope was operationally defined in the
quantitative data as scores on the Children's Hope Scale (Snyder, et al., 1997; Appendix
A), in order to increase reliability and validity. This is a 6-item scale that measures both
pathways (the child's ability to produce routes to his or her goals) and agency (beliefs
about the ability to achieve these goals through the pathways). Higher scores equal higher
levels of hope and lower scores indicate lower levels of hope. Previous research has
found this measure to be both reliable and valid and as having excellent construct
validity, with internal consistency ranging from .72 to .86 (Lopez, Ciarlelli, Coffman, Stone, & Wyatt, 2000).

The Children’s Hope Scale (CHS) has also been found to have convergent and divergent validity. Scores on the CHS have been found to be positively (and significantly) correlated with a measure of perceived competence, in that higher hope children felt more competent in the areas of school, peers, athletics, behavior, and personal appearance (Snyder, Hoza et al., 1997). Snyder, Hoza and colleagues (1997) also found that higher scores on the CHS were positively correlated with the attributional pattern of perceived control over positive outcomes and slightly distancing oneself from negative ones. Additionally, they found that scores on the CHS are positively correlated with higher levels of self-worth and lower levels of depression, which is consistent with the above finding on attributional style. When testing for discriminant validity, Snyder, Hoza and colleagues (1997) found that scores on the CHS were negatively correlated with scores on Kadzin's Hopelessness Scale for Children. The hopelessness scale measures the negative perceptions the child has about self and the future, which is in contrast to the positive perceptions measured by the CHS. The CHS has been used with African American youth such as in the Valle et al. (2006) and Hinton-Nelson et al. (1996) studies discussed in chapter 2.

The Compassionate Love Scale (Appendix B), developed by Sprecher and Fehr (2005), measures compassionate love for others and humanity. They define compassionate love as:

an attitude toward other(s), either close others or strangers or all of humanity; containing feelings, cognitions, and behaviors that are focused on caring, concern,
tenderness, and an orientation toward supporting, helping, and understanding the other(s), particularly when the other(s) is (are) perceived to be suffering or in need. (p. 630)

There are two 21-item scales, with one measuring feelings of compassionate love for close others (family members, significant others, and friends), and the other measuring feelings of compassionate love for strangers and humanity. This scale has high internal consistency, with Cronbach’s alpha of .95 for each version of the scale. This scale was slightly modified for use with this population by removing four questions that did not apply for use with adolescent populations.

Only one study could be found that used the Compassionate Love Scale with a sample that included African American participants. In a dissertation, Weibel (2007) implemented a loving-kindness intervention, and looked at the impact on compassionate love (among other measures). This intervention involved mindfulness and loving-kindness meditations with more loving-kindness (compassion) meditations in later sessions. He found that pre-intervention, scores on the Compassionate Love Scale were significantly higher for Caucasian participants than African American participants. The extent of change post-intervention, however, was the same for Caucasian and African American participants. Since other studies using the Compassionate Love Scale did not break down scores by ethnicity, it is difficult to state what these results mean. More studies using this scale with African American populations are therefore needed.

Mehrabian’s (2000) Balanced Emotional Empathy Scale (BEES; Appendix C) is a 30 item, 9-point likert scale measuring emotional empathy. Mehrabian defines emotional empathy as “one's vicarious experience of another's emotional experiences--feeling what
the other person feels” (p. 2). He created separate norms for males and females. The scale has a Cronbach’s alpha of .87 and a satisfactory test-retest reliability of .79. Previous studies have used this scale with African American participants. For example, LeSure-Lester (2000) looked at the relationship between empathy (as measured by the BEES) and aggression and behavior compliance among youth in a group home setting. Her sample included 85% African American youth ages 12 to 16. The mean BEES score in this study was 33.81 with a standard deviation of 10.73. She found a strong relationship between both higher empathy scores and reduced aggression and higher empathy scores and greater behavior compliance. As this sample is similar in age and ethnicity to the sample used in the current study, the BEES is an appropriate measure of emotional empathy.

Data Collection

Prior to the start of the After School Matters program, all youth participating the program signed an assent form to participate in research (Appendix D) and their parents signed a consent form (Appendix E). Data was first collected in early October when the first ASM program began and the participants were given the pre-test measures of hope and compassion discussed above. Seven participants joined the program in February and were given pre-test measures at that time. The author conducted in-depth interviews while participants were in the program. The interviewer asked questions to address the research questions listed above (Appendix F). Towards the end of the ASM program in April, participants were given the post-test measures of hope and compassion and the focus group was conducted. The focus group asked the same questions as the individual
interviews, but allowed the participants to discuss the responses as a group. A research assistant took field notes during the focus group. The second program was a 10-week program. Participants were interviewed individually while in the program. The scales were only given at the end of this program in May due to the shortened time frame and the focus group was also conducted at that time.

Data collection was done in a way that ensures both reliability and validity. All of the standardized measures discussed above have been found to be reliable and valid. They have also been found to be valid with African American populations and across gender. The qualitative research component also has reliability and validity. Reliability was strengthened through the use of field notes taken by a research assistant during the focus groups to match what was said to any relevant facial expressions or changes in group dynamics. Data were also recorded and transcribed, so that words and meaning were not lost. Transcriptions included any relevant pauses and changes in tone that can be lost with written transcriptions of interviews. Another coder coded 10 of the interviews (20%) using the same codebook (Appendix G), and the inter-coder reliability was 95% agreement. Data were also triangulated through comparing the qualitative results to the quantitative results.

**Data Analysis**

The qualitative data were analyzed using the computer software program Atlas-TI version 6, to look for themes. The 48 hope interviews were coded and then analyzed for emerging themes across interviews. Coding was done primarily using structural coding. This form of coding is appropriate for interview transcripts from multiple participants and
uses question-based codes (Saldaña, 2009). Interview questions, which were based on the research questions, were the basis for coding. The initial coding categories were based on key components of Snyder’s theory of hope (including agency, pathways, and goals) and the theory was used to create the operational definitions for each coding category (Hsieh & Shannon, 2005). Codes “are usually attached to ‘chunks’ of varying size—words, phrases, sentences, or whole paragraphs” (Miles & Huberman, 1994, p. 56). Most of the codes in this study were used to describe phrases, sentences, or paragraphs. Larger “chunks” were used so the youth’s vernacular was not lost. Codes were revised as analysis continued. Some were divided into subcodes if there were many chunks of data that fell under the code, and some were combined with other codes if they did not work on their own (Miles & Huberman, 1994). Each code was then given a number to be used in quantitative analysis. Frequencies of how many participants stated each code were determined to look at how common each code was among the participants. Directed content analysis does not result in coded data that can be used to run statistical tests of difference, and so comparisons of frequencies among the codes were made (Hsieh & Shannon, 2005). Finally, the large number of codes was pulled together into themes, which displayed patterns in the data (Miles & Huberman, 1994). The quantitative data strengthened the qualitative data by supplementing a valid measure with the experiences of hope expressed in the participants’ own words. Hope scores (on the CHS) and compassion scores (on the Balanced Emotional Empathy Scale and Compassionate Love Scale) were compared for each participant to look at the relationship between hope and compassion.
For quantitative data analysis, the scales were scored and entered into SPSS version 17. When analyzing the results for the entire sample, for participants who took the scales twice, the score the first time they took the scale was used to avoid the confound of repeated measures. Descriptive statistics (mean, minimum, maximum, and standard deviation) were run for the CHS total score, CHS agency and pathways subscales, both versions of the Compassionate Love Scale and the BEES. Z scores were also computed for the BEES scores because Mehrabian’s (2000) manual included a table to compare z scores with percentile scores in order to interpret the participants’ scores. Pearson correlations were then run for all of the scales to see how they compared. Finally, for the 11 participants who completed pre- and post-test measures, a statistical test could not be run to compare their score at the beginning and end of the program due to the low sample size so just the difference between the scores was computed.

**Ethics**

**Respect for persons.** This ethical principle acknowledges the autonomy of the participant and requires the researcher to protect those with diminished autonomy. The autonomy of the individual was respected by using informed consent procedures. Each participant's parent was given a form to consent since the participants were under 18 at the beginning of the research study. The teens were also given a form to assent to participation and were fully informed of their right to terminate participation at any time. They were also told that a decision to terminate participation in the research study did not impact their participation in the ASM program and no other negative consequence would come if they decided not to participate. All of the youth signed assent forms and their
parents signed consent forms. None of the youth decided not to continue participation during the interviews.

**Beneficence.** Beneficence includes the ideas of doing no harm and maximizing possible benefits while minimizing possible harms. This involves a benefit/risk ratio. This study had low risk as it asked about strengths. Any risks to the participants due to the questions asked were minimal and so the benefits outweighed the risks. The benefits were a chance to talk about positive qualities and the possibility of more funding for the ASM program. Participant confidentiality was upheld during the individual interviews. Their responses during the focus group were not completely confidential from the other group members, but the group in the program had many discussions about thoughts and feelings and understood that what was said in the group cannot be disclosed outside of the group.

**Justice.** The principle of justice encompasses the distribution of benefits and burdens and recognizes the vulnerability of the participants and their contribution to the study. As stated above, there were few risks and the benefits outweighed them. The participants were not burdened, as the research took place in their environment.

**Researcher Bias**

Inevitably, some biases may have been present. As occurs with any research, the researchers’ perspective can influence the findings; since the researcher wanted to show that strengths exist within this population and the ASM program increases these strengths, the researcher may have lead the qualitative interviews to show these strengths. However, since the purpose of the research is to identify strengths that have not
heretofore been studied, the researcher’s bias may actually have facilitated the purpose of the research. Nonetheless, the researcher aimed to be aware of the impact of her bias throughout the study, especially when conducting the interviews. Having another researcher utilize the coding manual and check for reliability of coding reduced bias in data analysis.
CHAPTER FOUR

RESULTS

This section will first address the five research questions posed in this study, and then the three hypotheses that the qualitative data supported. Finally the fourth hypothesis will be discussed, which the quantitative data supported.

Qualitative Results

When the qualitative data were first coded, 117 codes were used for the responses to the first 10 interview questions. Upon further analysis, these codes fell under 6 overall themes: (1) Relationships with others, specifically caring, encouragement, and compassion from others, as these relate to developing and sustaining hope, (2) Religion and faith as these relate to hope, (3) Staying on track, staying focused, and perseverance as these relate to hope and goal achievement, (4) Hope as it relates to wanting something to happen or something that can happen, (5) Thinking positively (motivated, believing in yourself) as it relates to sustaining hope, and (6) Hope as it relates to goals.

Research Question 1: How do the youth describe hope? All of the responses for what hope means to the youth are presented in Table 1. All of the responses to the question “What do you think of when you hear the word hope?” fit into the overall themes identified above. Most responses fell under the theme “Hope as it relates to wanting something to happen or something that can happen” which was 42% of all
responses. The next most stated theme was “Religion and faith as these relate to hope” which comprised 24% of the responses. The theme “Hope as it relates to goals” accounted for 22% of the responses and 12% of the responses fell under the theme “Thinking positively (motivated, believing in yourself) as it relates to sustaining hope.”

Table 1. Youth Responses to the Question “What do you think of when you hear the word hope?”

<table>
<thead>
<tr>
<th>Overall Theme</th>
<th>Specific Code</th>
<th># (%) of Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hope as it relates to wanting something to happen or something that can happen</td>
<td>Hope means something can or will happen</td>
<td>13 (22%)</td>
</tr>
<tr>
<td></td>
<td>Hope means you want something to happen</td>
<td>12 (20%)</td>
</tr>
<tr>
<td>Religion and faith as these relate to hope</td>
<td>Hope is faith</td>
<td>11 (19%)</td>
</tr>
<tr>
<td></td>
<td>Hope comes from God</td>
<td>3 (5%)</td>
</tr>
<tr>
<td>Hope as it relates to goals</td>
<td>Hope means you can accomplish a goal</td>
<td>9 (15%)</td>
</tr>
<tr>
<td></td>
<td>Hope is looking forward to the future</td>
<td>4 (7%)</td>
</tr>
<tr>
<td>Thinking positively (motivated, believing in yourself) as it relates to</td>
<td>Hope means you believe in yourself or someone believes in you</td>
<td>3 (5%)</td>
</tr>
<tr>
<td>sustaining hope</td>
<td>Hope is positive traits or attributes</td>
<td>4 (7%)</td>
</tr>
</tbody>
</table>

*Note.* Participants may have given more than one response. N=48

The same ideas were also discussed in the focus group (accomplishing a goal, wanting something to happen), however, the participants spoke more about positive traits than in the individual interviews. When asked what hope means to them, youth in one focus group said:

Compassion, you know, loving. The one thing that keeps a person going when they don’t have nothing to reach really out and touch. Wishing. Motivation. Having a goal. Persistence. I feel faith of hope when I hear the word “hope,” it’s something like faith. Something that can’t nobody take from me.
Other responses included “happiness”, “determination,” “positivity,” and “support from yourself and from your peers."

**Research Question 2: How do the youth’s relationships develop and maintain hope?** All responses that answer this question fall under the theme of “Relationships with others, specifically caring, encouragement, and compassion from others, as these relate to developing and sustaining hope.” Table 2 shows the participant responses that fell under this theme.

<table>
<thead>
<tr>
<th>Interview Question and Responses</th>
<th># of Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>How do you think you developed your sense of hope?</td>
<td></td>
</tr>
<tr>
<td>Hope is developed through interactions with other people</td>
<td>33</td>
</tr>
<tr>
<td>Once you think of a way to achieve your goal, are you able to carry out the plan?</td>
<td></td>
</tr>
<tr>
<td>The plan can be carried out with support or to make others proud</td>
<td>6</td>
</tr>
<tr>
<td>What do you do when you are discouraged or fail?</td>
<td></td>
</tr>
<tr>
<td>Talk to someone when discouraged</td>
<td>7</td>
</tr>
<tr>
<td>Are there times you feel hopeless and can you tell me about one of those?</td>
<td></td>
</tr>
<tr>
<td>People help get hope back when hopeless</td>
<td>2</td>
</tr>
<tr>
<td>Are there times you’ve worked hard to sustain your hope even though you feel discouraged, and can you tell me about one of those?</td>
<td></td>
</tr>
<tr>
<td>Talk to someone to sustain hope</td>
<td>4</td>
</tr>
<tr>
<td>Encouragement from others helps to sustain hope</td>
<td>3</td>
</tr>
<tr>
<td>Friendships sustain hope</td>
<td>1</td>
</tr>
<tr>
<td>Do you feel like the After School Matters program has helped you to have hope? If yes, how?</td>
<td></td>
</tr>
<tr>
<td>Mentoring younger kids in the ASM helps to have hope (either directly or indirectly)</td>
<td>25</td>
</tr>
<tr>
<td>The ASM program provides support and/or encouragement</td>
<td>8</td>
</tr>
<tr>
<td>The ASM program has compassionate leaders</td>
<td>6</td>
</tr>
<tr>
<td>The ASM program has caring people</td>
<td>4</td>
</tr>
<tr>
<td>The speakers provide motivation and hope</td>
<td>4</td>
</tr>
<tr>
<td>The ASM program provides relationships with peers</td>
<td>1</td>
</tr>
<tr>
<td>Some young people said that they feel that being cared for and giving and receiving compassion gives them hope. What do you think about this connection?</td>
<td></td>
</tr>
</tbody>
</table>
When others show someone compassion, they are showing caring, which leads to hope 24
Receiving compassion provides encouragement, which leads to hope 17
“Yes compassion leads to hope” (but no other elaboration given) 9
Receiving compassion makes you feel better about yourself or makes you feel better when you are down, which leads to hope 6
When receiving compassion, you want to make those that showed you compassion proud 5
Receiving compassion instills confidence, which leads to hope 4
For teens that do not have hope, what do you think they can do to feel more hopeful?

| Teens can talk to someone to have hope | 18 |
| The involvement of caring/positive people or a mentor can help teens have hope | 11 |
| Being around hopeful people can help teens have hope | 5 |
| Counseling can help teens have hope | 5 |

*Note. Participants may have given more than one response. N=48*

Due to the large amount of data that fell under this theme, this section will be further broken down. This section will first discuss the people the youth said help them develop hope. Then when looking more specifically at the characteristics of the youth’s relationships, the results will be broken down into caring, encouragement/support, and compassion. There is some overlap as the youth stated compassionate relationships provided them with caring, support, and encouragement. Compassion will be discussed on its own under Research Question 5. Also, the relationships that the ASM program provides will be discussed under Research Question 4.

The idea of relationships with others developing and sustaining hope was found throughout the interviews. In response to the question “How do you think you developed your sense of hope?” 69% of the participants stated they developed their sense of hope from interactions with others. When looking more in depth at the responses under the
code “Hope is developed through interactions with other people,” the responses were
divided into four categories, which are shown in Table 3.

<table>
<thead>
<tr>
<th>People Who Helped to Develop Hope</th>
<th># of Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family</td>
<td>20</td>
</tr>
<tr>
<td>Friends</td>
<td>4</td>
</tr>
<tr>
<td>Teachers</td>
<td>3</td>
</tr>
<tr>
<td>In General “People”</td>
<td>12</td>
</tr>
</tbody>
</table>

*Note:* Participants may have given more than one response. N=33

One participant stated that her family, friends, and teachers helped her to develop hope:

By pushing me to my um to the future and helping me with my goals and just
letting me know that everything is going to be okay and no matter what I'm going
through they are always going to be there.

In the focus group, the participants stated they developed hope from “Peers and friends.
hard background. Struggles.”

*Caring.* The involvement of caring/positive people or a mentor can help teens
have hope, even if it is not realistic:

A teen that doesn’t have hope, I wouldn’t say they sad, I wouldn’t say that they I
wouldn’t say that they lost. It depends on what age, I mean if they like me I would
say they you know acknowledging a lot of life, you know and then for all of the
people that’s chasing their dreams that you know that want to be hopeful that its
going to happen you know you need a mentor and need somebody that’s going to
talk to you, that’s going to be on the same level as you, that’s going to lie to you.
You don’t forget it’s me talking to somebody they don’t have to tell me one
hundred percent of the truth cause most of the time they don’t even know, but
that’s their job. Your parent’s job is not to tell you what you can’t do; it’s not their
job to tell you what you can’t be when you grow up. It’s their job to give you that
sense of hope, that motivation, that encouragement to you know, do what you
want to do. I mean same thing with a mentor, some mentors will be you know a
hundred, which some won’t. Some will tell you, you know you can do whatever
you want to do, you just gotta hope and believe but some mentors will tell you
like man, you can hope and believe but without no work, you know those goals
are like your dreams you know, it’s make believe, some will say your dreaming. Yeah but that’s what I’m sayin.

This quote really illustrates the importance of someone showing caring by believing in you, and not focusing on what you cannot do. The youth also said that for teens who do not have hope, “they can see a counselor” to have more hope, and this counselor can provide a caring relationship.

**Encouragement and support.** When asked about hope agency, 6 participants (13%) stated they can carry out the plan with support from others or because they want to make others proud. One of those youth stated:

> Uh, yeah sometimes I basically carry it out ah because I think about the smile I could put on my momma’s face. The stuff I can do instead of trying to always bring negativity and get a frown instead of... I can, I can say I can get a frown on her face so easy, but I can get a smile too. I’d rather see the smile than the frown. So that’s one thing I look for to help me to complete my goals.

Another participant said:

> Like you’re talking about when there’s a bump in the road, shall I say. Yeah, that happens a lot. Like things never go as I plan. Uh, however, I’m able, I have a good family support, as well as support within the school, um, as well as friends that help me persevere through the, whatever the bumps in the road is. And so I end up getting through it and achieving the goal.

Others can also help when discouraged, as 7 participants (15%) stated they talk to others when discouraged. For example:

> I try to talk to my momma or any other adult in my family but mainly my momma cause she, she’s the one who encourages me to get out of high school and stay on stay on track so I try to talk to my momma and then she’ll get my hopes up.

In addition, others can help to sustain hope when discouraged. Participants stated that encouragement from others and talking to others helps them to sustain hope. One participant stated, “If I feel like discouraged and I want to stay hopeful, like I stay
hopeful because I, I might have somebody to talk to keep me up.” Specifically related to encouragement, another teen said:

Encouragement from people, people who want to help ask how can the situation get better and people just encourage me not to just give up or just to you know you can’t just moan about it because if you moan about it I mean there’s, it’s nothing still being done. So it’s like you can do something about it and you can alter it or you can sit there and just let it remain the same.

The idea of relationships developing hope also came out when the participants were asked, “For teens who do not have hope, what can they do to feel more hopeful?” Participants stated that teens could talk to someone to have hope:

So I would say like, talk to an older adult, like someone that is really close for them and like talk to them and like really understand what they’re saying from their point of view and from your point of view, and maybe she, that teen, will have a better understanding of hope and have hope in their life.

Also, just being around hopeful people can help teens have hope because hopeful people can support their goals for the future. This quote points to the importance of peer relationships:

ah hang around people that have hope, like if your hanging around with a crowd that’s not really doing anything with their lives, you have to get into a crowd where people that’s, that know and hope that they are going to go off and do something later on in life. Cause if you surround yourself by one certain, one type of group, you’re gonna adapt to what, I mean you’re gonna like start doing the things that they do, sometimes its good and sometimes it’s bad but if you don’t have hope you should be hanging around with a good group that know that A’s and B’s are the right way to go and not C’s, D’s, and F’s.

All of these ideas suggest the great importance of others in helping youth develop and maintain hope.
Research Question 3: How do the youth describe goal definition and pursuit as related to hope? All of the youth stated they have goals for their future. The specific goals they have are presented in the Table 4.

Table 4. Goals Stated by the Youth

<table>
<thead>
<tr>
<th>Goals</th>
<th># of Responses</th>
<th>% of Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Career goals</td>
<td>45</td>
<td>94%</td>
</tr>
<tr>
<td>To go to college</td>
<td>41</td>
<td>85%</td>
</tr>
<tr>
<td>Good high School performance and/or grades</td>
<td>34</td>
<td>71%</td>
</tr>
<tr>
<td>Graduate high school</td>
<td>25</td>
<td>52%</td>
</tr>
<tr>
<td>To be successful or to “be something”</td>
<td>11</td>
<td>23%</td>
</tr>
<tr>
<td>Personal development or religion</td>
<td>6</td>
<td>13%</td>
</tr>
<tr>
<td>To get a job during high school</td>
<td>5</td>
<td>10%</td>
</tr>
<tr>
<td>Do well in sports</td>
<td>3</td>
<td>6%</td>
</tr>
<tr>
<td>To get a scholarship</td>
<td>3</td>
<td>6%</td>
</tr>
<tr>
<td>To be able to support his or her family</td>
<td>2</td>
<td>4%</td>
</tr>
</tbody>
</table>

Note. Participants may have stated more than one goal. N=48

The majority of the youth stated goals of having a career, going to college, performing well in high school, and graduating high school. Even though only 52% of the youth stated they have a goal to graduate high school, since 85% had a goal of going to college, it can be implied that all of those youth also plan to graduate high school. In general, the youth aim to be successful in life by doing well in school and having a good career, so they can support themselves and a family. All of the participants stated they could think of different ways to achieve these goals.

Looking more closely at two themes can help to answer this research question: “Hope as it relates to goals” and “Staying on track, staying focused, and perseverance as these relate to hope and goal achievement.” The specific codes that made up the theme “Hope as it relates to goals” are presented in Table 5.
When asked what they think of when they hear the word hope, 19% of the youth said hope means you can accomplish a goal. One youth said “When I hear the word hope, it um, I think that it’s like, it’s a chance of you getting to your goals or getting to something that you really desire.” When discussing times when they feel hopeful, 52% of the youth felt hopeful when trying to accomplish a goal or feeling like they can accomplish a goal. The following quote illustrates feeling more hopeful when feeling like goal achievement is more likely:

Say for instance if I I study for a test, or I didn’t study for a test and when it comes to the actual test and it’s like oh its gonna be hard or I’m not gonna know what’s on there, I feel more hopeful when I actually know that I applied the information, that I studied it. But I feel less hopeful when I know that I have no idea what I’m talking about.
Also, discouragement and sometimes hopelessness occur when the youth feel like they cannot achieve a goal or are not doing well in the plan to accomplish a goal. One youth discussed feeling hopeless:

Well when I’m getting bad grades and I feel like I can’t do better I mean it’s like why try, it’s like there’s no hope for me getting an A in this class like the teacher’s too hard the work is too hard, there is no way in the world that I can get an A.

Based on the above responses, when the youth have clear goals in mind, hope means they can accomplish the goals, and sometimes hopelessness occurs when they believe that goal achievement is unlikely or something gets into the way of goal pursuits.

Goal pursuit can be seen in the questions: “Are you able to think of different ways to achieve your goals?”; “Once you think of a way to achieve your goal, are you able to carry out the plan?”; “What do you do when you are discouraged or fail?”; “Are there times you feel hopeless and can you tell me about one of those?”; and “Are there times you’ve worked hard to sustain your hope even though you feel discouraged, and can you tell me about one of those?”

Across questions, participants stated that hope allows them to keep trying to achieve their goals and not give up. This theme was found in all of the questions listed above and is presented in Table 6. Staying focused and staying on track helps the participant have hope by: thinking of different ways to achieve goals, carrying out the plan towards goal achievement, still trying to achieve the goal even when discouraged or feeling hopeless, and sustaining hope when discouraged. In response to the question “Are you able to think of different ways to achieve your goals?” one participant stated:
I think well some ways for me to get to my goals is I gotta work hard and stay focused um like work on not trying to, you know it’s a time to have fun but it’s a time to go to school and focus and stuff.

Table 6. Codes in the Theme “Staying on track, staying focused, and perseverance as these relate to hope and goal achievement”

<table>
<thead>
<tr>
<th>Code</th>
<th># of Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>The participant stated that a way to achieve a goal is to stay focused and/or stay on track towards achieving the goal</td>
<td>20</td>
</tr>
<tr>
<td>The participant stated that staying on track or keeping trying is a way to carry out the plan</td>
<td>19</td>
</tr>
<tr>
<td>The participant does not give up or keeps trying when discouraged</td>
<td>28</td>
</tr>
<tr>
<td>The participant gets back on track to goal achievement when discouraged</td>
<td>4</td>
</tr>
<tr>
<td>The participant tries harder when feeling hopeless</td>
<td>3</td>
</tr>
<tr>
<td>The participant stated he or she keeps trying or stays on track to sustain hope</td>
<td>16</td>
</tr>
</tbody>
</table>

*Note. Participants may have given more than one response. N=48*

The teens also recognized the need to stay on track when trying to carry out a plan towards goal achievement because things can get in the way of the goal:

See the thing is, when your trying to achieve your goal you always tend to get sidetracked and sometimes it’s not voluntarily you know, its more of kinda some type of inspiration from other people to do something different that you know it’s not parallel with what you want to do, and that’s that’s where learning experiences come from, that you know snap back, you know you jump back on the tracks and get to pushing even though if you do kind of stray away from your goal that might, that may add a a load to what your trying to carry towards your goal, so I would I would um I’d try my best to strive toward my goal and not you know, derail from the tracks

The youth felt that if they could keep on the right path, they could accomplish their goals:

Yeah, um I’m not going to give up until my dream comes. I’m going to just keep pushing myself no matter how much, I mean danger in my area and stuff like that or no matter how much frustration is on my body I’m gong to just keep pushing myself and pushing myself cause drawing helps me get through the frustration in my life like hard times and rough times I just draw to express my feelings. So if I just keep going on that path I think I’ll be able to accomplish getting into a good college and opening my own school.
The youth also recognized the need to stay on track and not give up when discouraged:

> Uh, when I feel discouraged, uh, I simply try again. Because, like, if you fail and then you just let that be that, it’ll always be the thought in you mind like: “aw man, I should of tried again.” So, like instead of having that thought, you actually try again. Yeah.

For youth who feel hopeless at times, trying harder can allow them to still achieve their goals:

> Um times I think it could, its times when I do feel hopeless like there isn’t another way around it but in every situation there’s a way in there’s a way out and there’s not always, it doesn’t always involve quitting and giving up; it’s like you can always try harder to succeed.

Staying on track also helps to sustain hope because it allows the youth to feel like they can accomplish their goals:

> Yeah sometimes like when, when I get an F I feel discouraged that I kind of failed but I always know I can get the grade back up so I just hope just makes me like get back on track so I use that as one of my main factors to get on track and stay on track.

Throughout the interviews, the ideas of staying on track and persistence were instrumental in maintaining focus towards a goal when discouraged or feeling hopeless.

**Research Question 4: How does the After School Matters (ASM) program help teens develop hope?** All of the teens except for one (98%) said the ASM program helps them to have hope. The specific responses to the question “Do you feel like the After School Matters Program has helped you to have hope?” are shown in Table 7.
Table 7. Ways the ASM Program Helps the Youth to Have Hope

<table>
<thead>
<tr>
<th>Aspect of the Program</th>
<th># of Responses</th>
<th>% of Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mentoring younger kids helps the participants to feel hopeful (either directly or indirectly)</td>
<td>25</td>
<td>52%</td>
</tr>
<tr>
<td>The ASM program helps the participant learn new skills</td>
<td>15</td>
<td>31%</td>
</tr>
<tr>
<td>The ASM program helps the participant to achieve goals</td>
<td>13</td>
<td>27%</td>
</tr>
<tr>
<td>The ASM program provides the participant with support and/or encouragement</td>
<td>8</td>
<td>17%</td>
</tr>
<tr>
<td>The ASM program has compassionate leaders</td>
<td>6</td>
<td>13%</td>
</tr>
<tr>
<td>The ASM program helps the participant become a better person</td>
<td>5</td>
<td>10%</td>
</tr>
<tr>
<td>The ASM program has caring people</td>
<td>4</td>
<td>8%</td>
</tr>
<tr>
<td>The speakers provide motivation and hope</td>
<td>4</td>
<td>8%</td>
</tr>
<tr>
<td>The participant feels special or important by getting the job</td>
<td>4</td>
<td>8%</td>
</tr>
<tr>
<td>The participant wants to be in the program</td>
<td>1</td>
<td>2%</td>
</tr>
<tr>
<td>The ASM program allows the participant to build relationships with peers</td>
<td>1</td>
<td>2%</td>
</tr>
</tbody>
</table>

*Note.* Participants may have given more than one response. N=47

Several of the responses fell into the overall themes of the study. The following aspects of the program fell into the theme “Relationships with others, specifically caring, encouragement, and compassion from others, as these relate to developing and sustaining hope”: Mentoring younger kids helps the participants to feel hopeful (either directly or indirectly); The ASM program provides the participant with support and/or encouragement; The ASM program has compassionate leaders; The ASM program has caring people; The speakers provide motivation and hope; and The ASM program allows the participant to build relationships with peers. The following aspects of the program fell under the theme “Hope as it relates to goals”: The ASM program helps the participant to achieve goals and The ASM program helps the participant learn new skills.
The most commonly stated ways the ASM program helps the youth develop hope is through relationships with others, including mentoring relationships with younger kids, relationships with the program leaders, and relationships with their peers. When participants were asked if the After School Matters program helps them to have hope, six categories of responses related to relationships with others. The most commonly stated response was that mentoring the younger kids helped the youth to have hope. This happened in a few different ways. Some of the youth stated that they felt hopeful about their mentee’s future: “I have hope in my mentee and hope he gets somewhere in life and that his future will be bright in some way or another.” For others, being a mentor gave them hope:

They make me feel special, especially the little children I saw, when I'm working with them cause it makes me feel like I'm a somebody even though I'm somebody but it makes me feel special like I'm a mentor to them and then they look up to me also so I feel like After School Matters has a big impact on making me feel like I have hope.

Some participants discussed goals of working with kids (such as being a teacher) for their careers, so mentoring younger kids gave them hope that they can have the career they aspire to:

Ummm yea like how we work with kids on Tuesdays it goes back to my goal and how I want to become a teacher. So as we work and mentor the kids you know I…its like it’s a good opportunity to experience for me to work with them. It’s like it’s a good start.

In addition to mentoring relationships, the ASM program offers participants relationships with leaders, peers, and guest speakers. Participants stated they get support and encouragement from other in the program, including the leaders and their peers:
They’ve kinda helped me you know not accept defeat. Like one of my instructors, they’ve helped me to not accept the fact that I can’t do something and not just give up so easy and just keep striving for the best and don’t give up.

The youth also stated that the ASM program has compassionate leaders:

The leaders make sure I'm not shy, make sure I'm very outspoken at times so they'll give me little work sheets to do or they'll talk to me in a compassionate way, like well this how I used to be, this how I used to do that when I was your age so everyone's not perfect so yeah.

Additionally, the ASM program has caring people, including both leaders and peers: “the people that are really around, they’re really hopeful and they care.” The speakers that come into the program and talk about their experiences also provide the youth with motivation and hope:

When we have different people come in and talk to us and they talk about the stages of their life and like how they got to the place now its like I’m thinking in my head I can do the same thing. I shouldn’t be able to give up. Its going to be times when you want to give up and you fall down and mess up but if that’s really what you want to do then you will continue to put you mind to it and keep working on it.

The youth also stated the program allows them to learn new skills, which can also help them to achieve their goals:

Um, well, I know they taught me a lot of stuff. They probably… I would say yes. They left a like, they informed me with so much information, like, and told me, like, I can do this and be that in life, and stuff like that. And they, they helped me with way to like try to reach my goals, so that was a good thing.

Another teen presents a similar idea but using a more active definition of hope:

If anything After School Matters has prepared me the most when it comes to you know my goals. I’m just not one of them type of people that, I didn’t come to After School Matters to gain hope. I came here to gain experience, to gain knowledge and hope is okay, I, a lot of hope for people out there. It’s just that only I don’t really hope for anything except for, you know its its kind of flip its crazy but I will hope that my you know, goals get achieved or become achieved
but at the same time it’s like if I’m prepared I don’t have to hope for it to become achieved unless something happens. So it it’s kind of, it's it’s both sides, it's kind of like ah, it’s like two faced coin or something, two faced coin.

A different teen talks about how the ASM program helps to achieve her goal of going to college and to see how she wants her future to be:

I feel like it’s helped me to have hope because it’s like it it helps us to consider our options, considering financial aid seeing as how we was just talking we were just talking about that. Um, we mapped out how we wanted out lives to be. So it helped me to see that there there is a hope like cause I have it mapped out so like I know how I want it and I know what I want and just also just the um the fact that our bosses like they’re they’re always just there and they want to help us and knowing that they want us to succeed, it makes me have more hope.

Another important thing the ASM program provides teens is the opportunity to have a job. Teens said they felt special by being chosen for the job and it gave them hope that they could get another job in the future: “Like when I got this job, I was hopeful because I’ve been looking for a job for a long time. I never really was pushing myself to keep going and in the interview they said I did so excellent.”

In the focus groups, the youth stated the ASM program helps them to have hope by teaching them new skills and preparing them for the future. They also stated that mentoring the younger kids gave them hope:

I have hope for the children that I work with, to make sure they do better and make sure that they do the things that I didn’t get to do in grammar school or in the charter school and in, I mean I have hope in them even when they need help in work, I make sure they stay out of trouble or do they work and stuff and you know make sure that they can trust me, I hope they trust me and stuff and they do. I feel like I gave so much respect by just hoping the best for them.

As in the individual interviews, the youth also stated that the leaders and counselors provide them with compassion and positive feedback and were nonjudgmental, which helps them to have hope. Additionally, relationships with peers help them to have hope:
P1: I can say my group because you know they was helping me and all that because they wasn’t letting me slack on my work, they kept trying to push me to keep doing so.

P2: Yeah I say my peers also cause they make sure, they further me cause I have my problems and my days when I don’t feel like doing nothing, when I don’t feel like um talking they’ll make me laugh and give me positive feedback, ask me how my days is too and stuff, so.

I: So it sounds like you guys are saying too that you know you keep each other on track.

The group of peers in the program helps to keep them on track, which the youth also said across the individual interviews is very important for achieving their goals.

**Research Question 5: What is the relationship between experiences of compassion and the development of hope?** All participants stated that they believed that being cared for and giving and receiving compassion gives them hope, except for one participant that responded she was unsure about the connection. The youth’s responses to the question “Some young people said that they feel that being cared for and giving and receiving compassion gives them hope. What do you think about this connection?” are presented in Table 8.

<table>
<thead>
<tr>
<th>Youth Response</th>
<th># of Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>When others show someone compassion, they are showing caring, which leads to hope</td>
<td>24</td>
</tr>
<tr>
<td>Receiving compassion provides encouragement, which leads to hope</td>
<td>17</td>
</tr>
<tr>
<td>“Yes compassion leads to hope” (but no other elaboration given)</td>
<td>9</td>
</tr>
<tr>
<td>Receiving compassion makes you feel better about yourself or makes you feel better when you are down, which leads to hope</td>
<td>6</td>
</tr>
<tr>
<td>The participant wants to make those that showed him/her compassion proud</td>
<td>5</td>
</tr>
<tr>
<td>Receiving compassion instills confidence, which leads to hope</td>
<td>4</td>
</tr>
</tbody>
</table>

*Note.* Participants may have given more than one response. N=47
All of these responses fell under the theme “Relationships with others, specifically caring, encouragement, and compassion from others, as these relate to developing and sustaining hope.” The majority of the responses revolved around the youth receiving compassion as giving them hope, as opposed to the youth showing compassion to others. The most common response (50%) was that when someone is showing compassion they are showing caring, which leads to hope. One participant stated that:

Knowing that somebody ah really feels for you like care for you and if somebody cares for you, you have more hope in yourself that yeah if somebody feels this for you then it pumps you up to be more hopeful.

Receiving compassion also can provide youth with encouragement, which can help them to feel more hopeful. One of the teens said:

Yeah, because everybody don’t have, like somebody to be there for them and give them encouragement. And to have somebody that encourage you, is going to make you keep doing what you doing and do better. And they going to want you to, um, keep your head up and never let it down because they want you to be somebody.

Some teens just stated that compassion leads to hope, but did not mention a specific mediator like caring or encouragement. One youth stated:

If you wasn’t shown compassion then there’s not really much you can hope for at all. Because, like, without compassion you really can’t find some… Without compassion, hope and compassion coincide. So like, if there’s no hope, then like there’s no way that you can give hope to somebody else, which is like a form of compassion. And, without compassion, there is no hope to be given

Compassion can also make you feel better about yourself or feel better when you are feeling down, which can lead to hope:
I feel that if someone is showing you compassion, especially your family or friends that would give you hope because that keeps you uplifted mentally and that makes you feel good about yourself and that gives you hope.

Similarly, compassion can help you believe in yourself, which can lead to hope:

I think if... people are compassionate in you and actually... Yeah, I think that would give you hope because if people actually care, you know, about you, and believe in you... you believe in yourself and you have hope in yourself.

Another interesting connection between hope and compassion is that some youth said receiving compassion made them strive more to achieve their goals to make those that showed them compassion proud:

If you receive compassion then you think, you know, someone cares, someone wants to see you do well. So it’s like you don’t want to disappoint them or let them down. So you want to do what it takes to, you know, keep that hope alive.

Compassion can also instill confidence in youth, which helps them to feel more hopeful:

I would say I would agree with that because without um without confidence and then people agreeing with them that actually boosts them and make them say that man like yeah I can really do this and basically it’s like boosting their confidence and making sure that they on top of their goal and actually believe in them self and have faith in their goal.

When asked about the connection between hope and compassion during the focus groups, one youth stated:

It feels like they believe in me and they put all their all for me to do my best, to make sure they care, and make sure I’m on the right path. I mean everybody that I know that I’m around; they have hope in me in doing a lot of stuff when I graduate and being something in life.

Another participant discussed showing compassion towards others helping to achieve goals:

I think um when somebody show you compassion or your compassionate to others, like especially if you compassionate to others because if you feel like oh this person’s going through this problem but you know I’m not so I’m you know,
better so maybe I should do something with that, push myself to you know maybe even help them in the future so I think um when somebody’s compassionate towards you or show you how to be compassionate it helps you to feel, I don’t know like it pushes you a little bit.

Overall, the participants in the focus group also felt like compassion was important for feeling hopeful.

**Hypothesis 1: Participants will define hope and describe experiences of hope in a way consistent with Snyder’s theory of hope.** This hypothesis was supported by the data. Snyder’s theory of hope is a goal-based theory. As stated earlier: “hope is defined as the perceived capability to derive pathways to desired goals, and motivate oneself via agency thinking to use those pathways” (Snyder, 2002, p. 249). All of the participants stated they have goals for their future. The goals they stated were also specific and goals they could achieve, such as graduating high school, going to college, and having a career. Not only did the youth have goals, but also overall they could come up with a plan to achieve their goals (pathways) and carry out that plan (agency). All of the youth stated that they could think of different ways to achieve their goals. When asked if they can carry out that plan, 77% stated “yes” and 33% said “sometimes.” None of the youth stated that they could not carry out the plan. The youth recognized that sometimes it is easier or harder to carry out the plan. For example, this youth discussed times when it is harder to achieve goals:

Yeah sometimes when it gets um hard when I go through certain times of obstacles that try to sideline um or knock me off my um goals and things like that so I say it’s very hard but I will try to um, I will try to make it through those, through those obstacles and get back right on track to my goals so like even if I do get knocked off I will know what point that I got knocked off at and then continue back to that, what I, back to that point and then continue my goal.
In response to the question “Are you able to think of different ways to achieve your goals?” one participant stated: “Yes, because I know your plan A may not always work and I really am determined to achieve my goals and I will think of ways to get there.”

The findings related to the theme “Staying on track, staying focused, and perseverance as these relate to hope and goal achievement” also supports the youth’s capacity to use agency and pathways thinking. Throughout the interviews the youth discussed not giving up when something got in the way of achieving their goals and that they keep trying until they achieve the goal. This was the most common response given by the participants when asked about hope agency, the second most common response when asked about hope pathways, the most common response when asked what they do when feeling discouraged, and the most common response when asked how they sustain hope.

There were a couple of participants who stated that they really do not believe in hope. However, those that did not believe in hope had a view that was not action based and thought about it as “I just hope something will happen.” One participant stated she believes more in faith than hope:

Ah, it like, people can say hope if they want to, like I hope this or that, but if they really think about it, things some things that you hope for won’t happen and some it will. So I’d rather just say, rather than keep hoping for things to happen, feel what you know will happen and then have faith that it will happen instead of always hoping. That’s it.

According to the youth in this study, though, faith is an important component of hope.
Another youth stated that rather than just hoping something would happen, people should do something about achieving their goals:

Participant: I don’t really base like what I do off of hope kinda for a test I would study for I would kind of hope that I would do good I would rather know that I would do good.

Interviewer: So you’ll do things that will give you a greater chance of accomplishing what you want to accomplish.

Participant: Right.

This view is still in line with Snyder’s theory of hope, as Snyder’s theory is about active movement towards goals, not just “hoping” something will happen.

Similarly, another youth discussed realistic hope:

umm like many times like this is what I think of I hope that most people that feel like school or this world is not really nothing and education is not really important I just hope one of these days everybody can just sit down and think of a reality on because a lot of people who aren’t doing anything say ‘I want to have a big house or a nice car’ I just hope one day they just sit down and be like ok I have to go through this and that process the positive way if I really want to make it so I just hope for everybody to open up their mind to reality that’s all.

Throughout the interviews, the youth discussed hope in a way that is consistent with Snyder’s theory, including having goals for their future, creating pathways to achieve those goals, and having the agency to carry out the plan most of the time.

**Hypothesis 2: Youth will state that the relationships they experience in the After School Matters program with leaders, counselors and fellow youth helps them develop hope.** This hypothesis was supported. As stated above under Research Question 4, the youth discussed relationships with others (including leaders, counselors, and peers) as a main way that the ASM program helps them to feel hopeful. This accounted for 56% of the responses.
Hypothesis 3: Youth will state that experiences of receiving compassion help them to develop hope. This hypothesis was also supported by the data. All of the youth except for one (98%) stated that receiving compassion helps them to feel hopeful. The one participant who did not agree stated she was unsure of the connection. Details about this relationship were discussed above in Research Question 5.

Quantitative Results

The participant’s scores on the Children’s Hope Scale, the Compassionate Love Scale and the Balances Emotional Empathy Scale are presented in Tables 9, 10, and 11.

Table 9. Scores on the Children’s Hope Scale

<table>
<thead>
<tr>
<th>Scale</th>
<th>N</th>
<th>Minimum</th>
<th>Maximum</th>
<th>Mean</th>
<th>Standard Deviation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Hope Scale</td>
<td>42</td>
<td>22</td>
<td>35</td>
<td>29.52</td>
<td>3.423</td>
</tr>
<tr>
<td>Pathways Subscale</td>
<td>42</td>
<td>9</td>
<td>18</td>
<td>15.07</td>
<td>2.005</td>
</tr>
<tr>
<td>Agency Subscale</td>
<td>42</td>
<td>9</td>
<td>18</td>
<td>14.45</td>
<td>2.074</td>
</tr>
</tbody>
</table>

According to normed data, average scores on the CHS are 25 (Snyder, Hoza et al., 1997), which means on average, children think in a hopeful way “most of the time” (Lopez et al., 2000). According to Lopez and colleagues (2000) “scores of 29 or higher are in the top 15% and reflect children with strong beliefs in having both the agency and the pathways to achieve goals” (p. 63). The average score in the current study was 29.52, which means on average the youth in this study have high levels of hope, as operationalized by this scale. According to normed date, average scores for the agency and pathways subscales are 12.5, with scores above 15 in the top 15%. The average score in this study was 15.07 for the pathways subscale and 14.45 for the agency subscale,
which are above the average and represent high levels of agency and pathways thought in
the youth.

Table 10. Scores on the Compassionate Love Scale

<table>
<thead>
<tr>
<th>Scale</th>
<th>N</th>
<th>Minimum</th>
<th>Maximum</th>
<th>Mean</th>
<th>Standard Deviation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Compassionate Love Scale Close Other Version</td>
<td>43</td>
<td>38</td>
<td>119</td>
<td>91.77</td>
<td>19.184</td>
</tr>
<tr>
<td>Compassionate Love Scale Stranger-Humanity Version</td>
<td>43</td>
<td>26</td>
<td>112</td>
<td>71.84</td>
<td>20.883</td>
</tr>
</tbody>
</table>

In the study by Sprecher and Fehr (2005), which used undergraduate students, the
average score on the Compassionate Love Scale Close Other Version was 103.06 and the
average score on the Compassionate Love Scale Stranger-Humanity Version was 75.49,
for the 17 questions used in this study. The mean scores in this study were lower. The
ethnicity of the participants in the Sprecher and Fehr is unknown, but Weibel (2007)
found scores were significantly lower for African American participants than Caucasian
participants. Weibel used a sample of college undergraduates, which was 17% African
American, and the African American participants had a mean score of 89.5 for the
Stranger-Humanity version (the full version with 21 questions). This gives an average of
4.26 per question, which equals an average of 72.42 for 17 questions. This is consistent
with the results in this study, which shows the youth display average levels of
compassionate love, as operationalized by this scale.
According to Mehrabian’s (2000) manual for the BEES, the scale has a mean score of 45 with a standard deviation of 24. The average score in this study was almost 20 points lower. The average z score in this study was -.8285, which is between “slightly below average” and “moderately below average” (Mehrabian, 2000). The scores in this study ranged from “very extremely below average” (0.6 percentile) to “extremely above average” (98 percentile) so there was wide variability in the scores. The scores were normally distributed and the extreme scores were only one participant each. Most scores still fell below average. The youth discussed feeling empathy for others in the individual interviews, so it may be that the scale was not appropriate for this population rather than that the youth have low levels of empathy. In the LeSure-Lester (2000) study, with a sample of 85% African American youth ages 12 to 16, the mean BEES score was 33.81 with a standard deviation of 10.73, which is higher than the mean score in this study.

**Hypothesis 4: Youth with higher levels of hope will also have higher levels of compassion (there is a positive correlation between scores on the Children’s Hope Scale (CHS) and scores on the Balanced Emotional Empathy Scale (BEES) and Compassionate Love Scale).** This hypothesis was somewhat supported. All correlations can be seen in Table 12.
Table 12. Correlations of the Scales

<table>
<thead>
<tr>
<th></th>
<th>Full Hope Scale Score</th>
<th>Agency Subscale Score</th>
<th>Pathways Subscale Score</th>
<th>Compassion Stranger-Humanity Score</th>
<th>Compassion Close Other Score</th>
<th>BEES Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pearson Correlation</td>
<td>.833**</td>
<td>.845**</td>
<td>.344*</td>
<td>.174</td>
<td>-.038</td>
<td></td>
</tr>
<tr>
<td>Sig. (2-tailed)</td>
<td>.000</td>
<td>.000</td>
<td>.026</td>
<td>.269</td>
<td>.812</td>
<td></td>
</tr>
<tr>
<td>N</td>
<td>42</td>
<td>42</td>
<td>42</td>
<td>42</td>
<td>42</td>
<td>42</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pearson Correlation</td>
<td>.845**</td>
<td>.408**</td>
<td>.357*</td>
<td>.107</td>
<td>.051</td>
<td></td>
</tr>
<tr>
<td>Sig. (2-tailed)</td>
<td>.000</td>
<td>.007</td>
<td>.026</td>
<td>.501</td>
<td>.750</td>
<td></td>
</tr>
<tr>
<td>N</td>
<td>42</td>
<td>42</td>
<td>42</td>
<td>42</td>
<td>42</td>
<td>42</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pearson Correlation</td>
<td>.344*</td>
<td>.357*</td>
<td>.223</td>
<td>.613**</td>
<td>.555**</td>
<td></td>
</tr>
<tr>
<td>Sig. (2-tailed)</td>
<td>.026</td>
<td>.020</td>
<td>.155</td>
<td>.000</td>
<td>.000</td>
<td></td>
</tr>
<tr>
<td>N</td>
<td>42</td>
<td>42</td>
<td>42</td>
<td>43</td>
<td>43</td>
<td>43</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pearson Correlation</td>
<td>.174</td>
<td>.107</td>
<td>.185</td>
<td>.613**</td>
<td>1</td>
<td>.519**</td>
</tr>
<tr>
<td>Sig. (2-tailed)</td>
<td>.269</td>
<td>.501</td>
<td>.242</td>
<td>.000</td>
<td>.000</td>
<td></td>
</tr>
<tr>
<td>N</td>
<td>42</td>
<td>42</td>
<td>43</td>
<td>43</td>
<td>43</td>
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</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pearson Correlation</td>
<td>-.038</td>
<td>.051</td>
<td>-.112</td>
<td>.555**</td>
<td>.519**</td>
<td>1</td>
</tr>
<tr>
<td>Sig. (2-tailed)</td>
<td>.812</td>
<td>.750</td>
<td>.482</td>
<td>.000</td>
<td>.000</td>
<td></td>
</tr>
<tr>
<td>N</td>
<td>42</td>
<td>42</td>
<td>43</td>
<td>43</td>
<td>43</td>
<td>43</td>
</tr>
</tbody>
</table>

Note: **. Correlation is significant at the 0.01 level (2-tailed); *. Correlation is significant at the 0.05 level (2-tailed).

Significant positive correlations were found between total CHS scores and the agency and pathways subscale scores and the Compassionate Love Scale Stranger-Humanity Version. There was not a significant correlation between total CHS scores and the Compassionate Love Scale Close Other Version and the BEES. For the CHS
subscale, the agency and pathways subscales were correlated with each other, and the agency subscale was also correlated with the Compassionate Love Scale Stranger-Humanity Version. The Compassionate Love Scale Stranger-Humanity Version and Compassionate Love Scale Close Other Version were also correlated. Finally the BEES scores were correlated with scores on both the Compassionate Love Scale Stranger-Humanity Version and Compassionate Love Scale Close Other Version.

The CHS was only correlated with the Compassionate Love Scale Stranger-Humanity Version and not the Compassionate Love Scale Close Other Version or the BEES. In this study, the youth with higher hope were more likely to show compassion to others they did not know. It may be that having more hope for their future allowed the youth to step outside their support network and show compassion to strangers.

Due to the low sample size, a paired samples t-test could not be run for the pre- and post-test scores of the 11 participants who completed the scales at both times. Instead, Table 13 shows the difference in scores from pre-test to post-test for the 11 participants. Many of the youth’s scores went down from the beginning of the program to the end of the program. It is not, however, appropriate to say that they had lower levels of hope and compassion at the end of the program. In the interviews, the youth said the program made them feel more hopeful, and allowed them to provide caring and support to the younger children that they mentored (which could be classified as providing compassionate love).
Table 13. Difference in Scores from Pre-Test to Post-Test

<table>
<thead>
<tr>
<th>Participant</th>
<th>Children’s Hope Scale</th>
<th>Compassionate Love Scale</th>
<th>Close Other</th>
<th>Compassionate Love Scale Stranger-Humanity</th>
<th>BEES</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>1</td>
<td>2</td>
<td>4</td>
<td>-10</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>-9</td>
<td>-2</td>
<td>-3</td>
<td>-8</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>4</td>
<td>-18</td>
<td>-35</td>
<td>-37</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>0</td>
<td>-4</td>
<td>-9</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>4</td>
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<td></td>
</tr>
<tr>
<td>6</td>
<td>-2</td>
<td>-11</td>
<td>-16</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>-4</td>
<td>-1</td>
<td>5</td>
<td>-4</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>0</td>
<td>9</td>
<td>21</td>
<td>46</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>-2</td>
<td>7</td>
<td>-2</td>
<td>-10</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>-5</td>
<td>-10</td>
<td>5</td>
<td>-28</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>-1</td>
<td>-6</td>
<td>-5</td>
<td>7</td>
<td></td>
</tr>
</tbody>
</table>

The reduction in scores seen in this table may be more related to the characteristics of the scales, which will be further discussed in chapter 5.
CHAPTER FIVE

DISCUSSION

This discussion will address two key aspects of the findings, describe the youths’ insights about the impact of the methodology for them, and finally address implications for social work practice, policy, and research. First, it is helpful to recall the specific characteristics of the youth in this sample that are contexts for the findings.

The Population and Context

Before discussing the findings on hope in the current study, it is important to revisit the population and the environment they live in. The youth live in communities riddled with profound poverty and violence. The youth in this study, however, have qualities that apparently protect them from developing the symptoms of complex trauma that many others who live in these types of communities develop. As the nature of hope in these youth is discussed, keep in mind most are not at risk of failing school, they can compete competitively to be in an after-school leadership program that requires organization, regular attendance, and teamwork, and they have the patience and connectedness to mentor younger children. These youth were also motivated to find a job while in high school and have concrete career goals for their futures. This is in contrast to many youth from poor neighborhoods that may not feel they can achieve career goals due to the high rates of joblessness they observe in their neighborhood (Wilson, 1991).

Wilson (1991) states:
a social context that includes poor schools, inadequate job information networks, and a lack of legitimate employment opportunities not only gives rise to weak labor-force attachment, but increases the probability that individuals will be constrained to seek income derived from illegal or deviant activities. This weakens their attachment to the legitimate labor market even further.

The youth in the current study live in a potentially traumatizing context, but instead of participating in illegal activities, they participate in a program that is like a job, where they can learn leadership skills, learn skills to help them get into college, and improve their communities through mentoring younger children and participating in community projects. Is hope a precondition for their success, or does their relative success lead to their sense of hope? This is a difficult question to answer. While this study cannot answer the question of where their hope started (a lifelong developmental study would be needed), it explored what it means to them that they have it. These teens are the cream of the crop, and they have hope because they have a reason to, and so the results from this study cannot necessarily generalize to all urban African American youth.

Hope is important for these capacities (to do well in school and to participate in and complete a program). At the same time, it seems that hope is not a permanently inward-dwelling commodity. The youth say that in order to get youth to participate in a program, the program needs to provide relationships that shore up the hope they already have. They need relationships to keep hope going, which is one of the main themes that was found in the current study. Throughout the interviews, the youth stated how important relationships were in maintaining their hope. Relationships helped them to keep going when they got discouraged or needed to sustain their hope.
The youth need to make good choices to have a different life and in order to have hope, they have to know that they can do that (which is their capacity for self-reflection). The theme ““Staying on track, staying focused, and persistence as related to hope and goal achievement” represents a moment to moment self-reflection. In other words, hope is not just a set of goals one is aiming towards. It involves a self-reflective loop, in which the youth are evaluating their own actions to see whether they can make choices that will get them where they hope to go. The inward statement that might represent this process, distilled from what the youth said, is something like “if I can evaluate myself as staying on track, staying focused, and being persistent in trying to achieve my goals, then I have hope.” The self-reflective aspect the youth discussed shows them that they can get and keep a job and mentor others. It is not just about them doing these things but seeing themselves as someone who can do them. It is important to not only give them an opportunity but to also help them make choices so they can use it and benefit from it. Part of why they are doing well is because they have hope. It is clear for them that “hope is the ticket to life,” but more than that, it is the ticket to a different and better life. It takes work for them to imagine a world other than the world in which they live, to consider how to enter that world, and then to make the choices to get there. So, these youth have hope, but what does that hope look like and does Snyder’s theory apply to them?

**Key Finding: Disadvantaged Youth Have Hope**

This section will discuss the hope that the youth have, how their hope relates to Snyder’s theory of hope and how it extends the theory, how their hope is different from similar constructs, and the importance of hope to the youth.
**Description of the hope the youth have.** The youth in the current study have hope despite the difficult environment they live in. This hope allows them to set goals for their future and feel like they can achieve these goals by making good choices, so they feel a sense of control over their futures. Their hope is specific to their context, action-oriented, and self-reflective.

The hope the youth discussed represents the context they live in. They have goals to get an education and have a career so they can be successful and be different than many of the people they see in their neighborhood. They also recognize that there are people that do not believe in them and do not encourage them to achieve their goals. To compensate for this, they want to prove those people wrong and also seek out relationships with caring adults who believe in them and will encourage them. One youth said people would judge her without really knowing her and assume she was going do negative things in her life. Instead of letting this get her down she said she “would do the opposite of what they would say so I would just prove people wrong and just do good in school, go to school, get good grades.”

The youth also described hope in a way that was action-oriented. They consistently talked about needing action in order to achieve their goals. They did not believe someone should just hope that they could have a better life without doing anything about it. One youth said that when things go wrong, “you can’t just moan about it because if you moan about it I mean there’s, it’s nothing still being done. So it’s like you can do something about it and you can alter it.” They all had goals for their future, could come up with ways to achieve those goals, and believed they could carry out the
plan if they were able to stay on track during times of difficulty. They recognize that there will be times when it is harder to stay on track, but they can make the choice to keep trying.

The most unique aspect of hope that came out of the interviews was that it is self-reflective. The way the youth dealt with obstacles when attempting to achieve their goals was to keep trying, stay on track, and persevere towards their goals. Some youth would think positively as a way to do this. An illustration of this thought process is:

Situations like where I feel like it’s over with and there’s no other way around it so I still try to find ways and think of it like it’s always a way in it’s a way out so just even if you think you gonna fail or you know you gonna fail, always give it another shot cause you never know how it’s going to turn out.

This was also shown as reflection on the self as an actor in the moment and their ability to pursue goals. The youth would reflect on their ability to make good choices that allow them to remain on the path towards goal achievement and the resources they have to achieve their goals, and on that basis they have hope.

The sense of hope in these youth has been found in other research that used similar populations. Vacek, Coyle, and Vera (2010) examined subjective well-being (including hope) in low-income, ethnic minority adolescents living in an urban environment (the sample was 8.6% African American). They stated that even though previous research has “presented this population as being at risk for a variety of psychological problems, we found that these adolescents seemed to be relatively satisfied with their lives and did not report extreme levels of stress or negative affect” (p. 108).
This mirrors the results in the current study, finding that the youth had hope for their futures.

Also similar to the results in the current study, Roesch et al. (2010) found that ethnic minority youth do not have low levels of hope, and they suggest that the youth may look at these barriers as opportunities or challenges to overcome. Similarly, Snyder, Hoza and colleagues (1997) state that children who can overcome difficulties and achieve their goals are more likely to believe that in the future they can achieve their goals when faced with adversity. Children with higher hope also tend to connect themselves to positive outcomes and remove themselves from negative outcomes, which means they feel more in control over positive events in their lives (Snyder, Hoza et al., 1997). Thinking in this way may allow children to remain hopeful despite the occurrence of negative events or in the face of adversity. The youth in the current study stated they wanted to prove the people wrong that thought they could not accomplish their goals and some said that they felt hopeful when in a difficult situation. One of the youth also felt that hope is developed from difficult experiences that were solved early in life. She stated:

I developed a sense of hope as a child because I was um in foster care and it was just a lot of things going on at the time of my life so I just always shoot to say I’m gonna grow up and I’m gonna do this and do that so that’s how I’ve learned about hope.

For some youth, they can use negative experiences they have had to strive for a better life.

**Relation to Snyder’s theory of hope.** The youth in the current study have hope according to Snyder’s theory of hope, as evidenced by the above average scores on the
Children’s Hope Scale. They also qualitatively described hope in a way that was consistent with Snyder’s theory, but also expanded on it. Snyder’s theory of hope is a goal-based theory. As stated in Chapter Two: “hope is defined as the perceived capability to derive pathways to desired goals, and motivate oneself via agency thinking to use those pathways” (Snyder, 2002, p. 249).

**Goals.** All of the participants stated they have goals for their future. The goals they stated were also specific and goals they could achieve, such as graduating high school, going to college, and having a career. These are realistic goals if the youth receive an appropriate education. Snyder, McDermott, Cook, and Rapoff (1997) state that by late adolescence, youth begin to focus on their career goals, which is consistent with the youth in this study. Individuals with high levels of hope are more likely to attempt to achieve challenging goals, compared to individuals with low levels of hope (Snyder, 2002). The goals that the youth discussed in the current study may be challenging to achieve when environmental constraints are taken into account. Not only did the youth have goals, but also overall they could come up with a plan to achieve their goals (pathways) and believed they could carry out that plan (agency).

**Pathways.** All of the participants stated they could think of different ways to achieve their goals. Snyder (2002) states that individuals with high levels of hope will think about how they want their future to be and find ways to achieve those goals. The youth in this study had a view of what they wanted their future to be like, and could come up with a plan to achieve those goals. High hope people can also think of alternative routes to achieve their goals when something gets in the way of goal achievement.
(Snyder, 2002). The youth stated they could think of different ways to achieve their goals, and the main ways they did this was by being prepared to achieve the goal, performing well (such as in school), staying focused on the goal, and staying on the track to goal achievement.

Roesch et al. (2010) looked at the relationship between hope and coping in minority adolescents. They found that “hope–pathways was significantly and positively associated with direct problem solving, planning, positive thinking, religious coping, distracting actions, and overall coping use” (p. 194). Youth high in hope pathways used many different types of specific coping methods compared to youth low on hope pathways, which is consistent with Snyder’s (2002) idea that those high in hope pathways can come up with multiple ways to achieve a goal (Roesch et al., 2010). These findings are consistent with the findings in this study. One of the themes found in the current study was “Thinking positively (motivated, believing in yourself) as it relates to sustaining hope.” The youth stated that thinking positively helps to carry out a plan for goal achievement, helps when feeling discouraged, is a way to sustain hope, and is a way to increase hope. Some youth also said that they developed their sense of hope by thinking positively. The theme “religion and faith as these relate to hope” was also found in the current study. Some youth stated that to them, hope means faith, and hope comes from God. Some also said that they developed their sense of hope from church. Going to church can also help the youth to sustain hope when discouraged, or to have more hope. The youth did not seem to be describing a mystical experience, but rather the connectedness with other people in the Church community. They described the Church as
a place of support and encouragement: “When I go to church sometimes like when they preaching or something I just feel uplifted and I feel like something that I went through I'm like, okay I feel good; so, I feel hopeful.”

*Agency.* All of the youth said they could carry out the plan towards goal achievement at least sometimes. None of the youth stated that they could not carry out the plan. The youth also recognized that sometimes it is easier or harder to carry out the plan, so they had a realistic view of their ability to achieve goals.

Snyder (2002) states that agency thought provides the motivation and energy to begin and continue goal pursuits. This motivation helps the individual to create new pathways when faced with an obstacle. He also states that high hope individuals are likely to increase agency thought using positive self-talk that reinforces their ability to achieve the goal. This is similar to what the youth in this study said about thinking positively as a way to carry out the plan towards goal achievement (agency), and as a way to develop hope and sustain hope when discouraged.

Roesch et al. (2010) also found that “Hope–agency was only significantly and positively related to support for actions, direct problem solving, and positive thinking” (p. 194). Youth high in hope agency were more likely to talk to other people who have been through similar stressful experiences and find out how they coped. This was similar to what the youth in the current study said they do to sustain hope or what they thought other teens could do to be more hopeful. The youth felt that talking to others helped them to sustain hope and could keep them positive that they could achieve their goals.
Extensions of Snyder’s theory. The youth in the current study added a self-reflective aspect to agency thought, which also came out when talking about being discouraged, feeling hopeless, and sustaining hope. As discussed above, the way the youth dealt with these obstacles was to keep trying, stay on track, and persevere towards their goals. The youth reflected on their ability to pursue goals, to make good choices that allow them to remain on the path towards goal achievement, and the resources they have to achieve their goals. If they have those things, then to them, they have hope.

Aspinwall and Leaf (2002) state that Snyder’s theory minimizes the interpersonal nature of hope, but the interpersonal nature of hope and the importance of relationships was very prevalent in the current study. The theme of relationships being important for the development and maintenance of hope occurred throughout the interviews. The impact of others is crucial for the youth’s hope and will be discussed in more detail later in this chapter.

The importance of hope. For the youth in this study, their hope is vitally important due to the difficult context they live in. It is their way to have a better future. One youth stated “You got to have hope to do anything in your lifetime. So, you got to have hope to talk, live, anything, work.” They also felt that hope helped them to keep going to achieve their goals when things got difficult or something got in the way of achieving their goals. For these youth, achieving their goals of getting an education and having a career is how they can have a different life than many of the people they see in their neighborhood. Their sense of hope is what allows them to stay on track to achieve their goals even when things get hard or they are feeling discouraged.
Gilman, Dooley, and Florell (2006) also looked at hope in adolescents and did a cluster analysis to distinguish high, average, and low levels of hope on the CHS. The adolescents in their study were mostly Caucasian and few were in the low socio-economic status category. They found that mean pathways and agency subscale scores for high hope adolescents were 15.29 and 15.97 respectively, were 12.20 and 13.69 for average hope adolescents, and 9.10 and 9.54 for low hope adolescents. They also found that “youth in the high hope and average hope groups reported significantly less school and psychological distress and significantly higher personal adjustment and global satisfaction than youth in the low hope group” (p. 172). The youth in the high and average hope groups also participated in more extracurricular activities and had higher grade point averages that youth in the low hope group. In a 1-year longitudinal study, Ciarrochi, Heaven, and Davies (2007) found hope to significantly predict grades in adolescents, even when controlling for academic ability. Hope also predicted lower levels of teacher rated behavior problems. Even though the youth in the Gilman et al. (2006) study did not appear to have some of the same disadvantages as the youth in this study, the youth in this study still had mean hope subscale scores at the high end of the average group based on the Gilman et al. results, which is consistent with the youth doing well in school and participating in an after school program.

**Hope and related constructs.** Hope shares some similarities with the concepts of optimism and self-efficacy, so it is important to distinguish the concepts to better understand what makes hope distinct. When looking at the outcome of well being,
Magaletta and Oliver (1999) found that hope predicted a unique variance in this outcome that was independent of optimism and self-efficacy.

**Optimism.** Snyder’s theory of hope has been found to be similar to optimism, but the two concepts are distinct. Two theories of optimism have been compared to hope theory, one by Seligman and one by Scheier and Carver. Seligman’s theory focuses on cognitive attributional style. Optimists think about negative events in a way that they are external to the individual, not stable over time, and are specific to that particular situation (Snyder, 1994b). This allows the individual to think the negative event is temporary and not due to circumstances within the individual, and so things can get better. The theory emphasizes how people distance themselves from negative outcomes that have occurred in the past, whereas hope theory emphasizes reaching goals in the future (Snyder, 2000a).

Scheier and Carver’s conceptualization of optimism is more similar to hope theory, which is a general expectancy that one can achieve his or her goals (Snyder, 1994b). Both theories assume that human behavior is goal directed (Carver & Scheier, 2002). Outcome expectancies, which are similar to pathways thoughts, are emphasized in this theory over efficacy expectancies, which are similar to agency thoughts (Snyder, 2000a). Magaletta and Oliver (1999) found that pathways predicted a unique variance in well being, independent of optimism, which suggests that the two concepts may be similar but are not the same. Carver and Scheier (2002) also emphasize the importance of confidence that the outcome will occur, more than they emphasize personal agency. This is in contrast to hope theory, which gives equal emphasis to agency and pathways thoughts (Snyder, 2000a).
Optimism has also been described as a more general expectancy that good things will happen, whereas hope is more about specific outcomes (Bruininks & Malle, 2005; Gillham & Reivich, 2004). The youth in the current study talked about specific situations and goals they had for their futures. The youth would make a general comment like they wanted to be successful, but would also say that they would go to college and get a job to accomplish that goal. Bruininks and Malle (2005) found that the participants hoped in situations where they had little personal control over the outcome and were optimistic when they had greater personal control over the outcome. This finding is inconsistent with Snyder’s theory of hope and the findings in the current study. Overall, the participants in the current study felt hopeful about situations over which they believed they had personal control (doing well in school, having a career, being successful in life), which in turn leads to the notion of self-efficacy.

**Self-efficacy.** The concept of hope also shares some similarities with Bandura’s concept of self-efficacy. They both focus on goals specific to a particular situation, but have a different emphasis:

According to the premises of self-efficacy, the person engages in a cognitive analysis so as to comprehend the relevant contingencies for goal attainment (this is called outcome expectancy and is similar to pathways thought). In turn, these outcome expectancies reflect the person’s perceived capacity to carry out those actions that are inherent in the outcome expectancies (this is called efficacy expectancies and is similar to agency thought). (Snyder, 2000a, p. 15)

The latter efficacy expectancies (agency thoughts) are emphasized in self-efficacy, and both agency and pathways thoughts are equally emphasized in hope theory (Snyder, 2000a). Magaletta and Oliver (1999) also found that agency predicted a unique variance in well being, independent of self-efficacy.
Optimism emphasizes pathways thinking and self-efficacy emphasizes agency thinking, and hope theory equally emphasizes both. In the current study, the youth felt both agency and pathways thinking were important for helping them achieve their goals. They discussed staying focused and staying on track as a way to both create pathways towards goals and carry out the plan. The youth also had equally high levels of agency and pathways thinking on the Children’s Hope Scale.

**Hope vs. magical thinking.** In the context the youth live in, is it magical thinking to have hope? This author would argue that, magical thinking is not related to choices. In the interviews in this study, hope was about believing you can make good choices and having the resources to make it happen. The youth talked about making choices to achieve their goals, such as not going out with their friends when they have a paper due. The thought process the youth go through is: “Can I look at myself and say ‘I make good choices’, then I have a reason to have hope.” This is the self-reflective aspect of hope that came out in the interviews. The youth have clear plans to achieve their goals and concrete steps to make it happen, which shows they have hope and not just wishful thinking.

**Key Finding: Hope Comes From Relationships**

Throughout the interviews and across questions, a prominent theme was the importance of relationships for developing and maintaining hope. This section will discuss relationships with caring adults and peers, and their impact on hope. Overall the way the youth discussed the impact of relationships on hope was circular. They said they developed hope from others but also needed people to sustain their hope. What they said is they need ongoing relationships that provide caring, support, encouragement, and
compassion to maintain the hope they have. Others tell them they will not make it in life
and they hear the statistics on youth from their neighborhoods in the media, and so hope
that may have been instilled early in life can lessen over time if there is not continued
encouragement and support from caring adults that believe they can achieve their goals.
This advances Snyder’s theory of hope because, for these youth, developing hope in
infancy is not enough when living in their environment.

**Relationships with caring adults.** Aspinwall and Leaf (2002) state:

Anecdotally, it is easy to think of times when someone or something gives us
hope that things will improve—or challenges that hope. Yet, these kinds of
experiences remain understudied. Expanding our view to include sources of hope
other than personal agency may not only increase our understanding of how close
relationships and other supportive ties help people manage adversity, but may
also raise interesting questions about whether these other kinds of hope or reasons
to be hopeful work or function in the same ways as the individualistic agency-
based ones do (p. 284).

Many of the youth in the current study stated they developed hope through interactions
with others, which is consistent with the literature on the development of hope. Snyder
(2000b) says, “Goal directed thinking almost inevitably arises in the context of other
people who teach hope” (p. 31). Snyder, McDermott et al. (1997) also state:

The processes related to goal-directed thought do not occur in a vacuum. Hope
flourishes when the child establishes a strong bond to one or more
caregivers...Instilling hope in children is based, in part, on their perceived
security. Secure early attachments relate to a sense of empowerment and goal-
directed thought.

The youth in this study said relationships help youth to acquire hope through providing
caring, support, encouragement, and compassion. These caring relationships help the
youth to feel like they can achieve their goals because they have others who believe in
them. This support and encouragement also helps the youth when feeling discouraged so they can sustain their hope and keep trying to achieve their goals.

Children can develop hope through interactions with role models, such as caregivers, parents, teachers, and social workers. These role models can help children learn how to find pathways to goals and remain motivated (through agency thinking) to achieve their goals (Snyder, Hoza et al., 1997). Also, adolescents have higher levels of hope if their parents were caring and affectionate (Gillham & Reivich, 2004). The youth in this study felt that they developed their sense of hope from others, including parents and other family members, friends, and teachers. The youth also discussed how encouragement from others gave them hope. When they felt discouraged, encouragement from others could keep them going so they did not give up on their goals.

Individuals with high levels of hope are likely to have a social support network that is helpful during times of stress (Snyder, 1994b). The youth in this study felt they had a social support network and did not feel isolated. They had others they could turn to when faced with difficulties in achieving their goals. One youth even suggested teens could build a support network to have more hope:

Uh, build a relationship. With especially you going to school and all with your peers, try to build a good relationship with them. And then, you know, you go home and meet th- meet their moms and their family and their little brothers and you gonna turn around and they’re gonna be your family and your little brothers that you wanting around like, somebody you’re close to. They gonna end up being like you call them your brothers and like you know they really ain’t. But they been so close to you that you might as well call them that. So that’s one way. And that’s the way I choose.

No matter where they got their hope from, the youth need relationships to keep it going because of the context they live in.
This research also aimed to understand if experiences of giving or receiving compassion lead to hope. Overwhelmingly, the youth talked about experiences of receiving compassion leading to hope. They felt that others showing them compassion, including caring for them, encouraging them, and supporting them helped them to have hope. This was because others showing them compassion helped them feel like they can accomplish goals for their futures.

Attachment changes in adolescence, as adolescents move their attachments from parents to peers (Allen, 2008). However the youth in this study talked about relationships with adults being important for hope much more than they mentioned peers. When talking about the importance of relationships with others, the youth mentioned caring adults as important others much more than they mentioned peers. There were some examples the youth gave on how peers impacted on their sense of hope, which will be discussed below.

**Relationships with peers.** Research has found that disadvantaged neighborhoods are more likely to have youth that devalue education. Association with peers that fail to recognize the importance of education leads to lower educational expectations and academic underachievement (Quane & Rankin, 1998). Since grades have been found to directly impact youth’s expectations for employment (Quane & Rankin, 1998) associating with peers that value education can help youth to achieve both their educational and career goals. Through participation in the ASM program, youth are around peers with similar goals for their futures and that value education. The program
also focuses on college preparation, and the youth can get support from their peers on the process of applying to college.

The youth said that being around hopeful people could help teens to have more hope and talking to someone, including friends, can help them to feel more hopeful. The teens also said they could talk to friends when feeling hopeless, discouraged, or needing to sustain hope. Some also said that their friends provide compassion and help them when they are struggling. Peers can also help to develop hope and several of the youth credited friends with helping them to develop their sense of hope. When discussing what about the ASM program gives hope, one youth said:

My friends and everybody help you know, even though I don’t try my best in here they still try to tell me to keep me going like right now I have a presentation and in the presentation I didn’t really didn’t feel that you know I knew all of my work because I didn’t really study it like they did so they were just like don’t don’t bother you know just just go up there and do what you do, speak how you speak and tell the kids what you do know. So it’s just like you go and try it out. They kind of help me, I feel that this like another home for me you know if I got problems I can come talk to anybody so yeah.

This points to the importance of being around like minded peers who will encourage you even when you feel like you are not at your best.

**Methodology**

**Qualitative methodology.** Qualitative methodology was employed for many reasons, including the importance of understanding hope from within the youths’ vernacular and cultural uniqueness; in order to maximize ecological validity, and because the study needed to be exploratory in nature. This allowed the youth to express their thoughts on hope in their own words. The data could then be analyzed using the
vernacular of the youth, to better understand their unique perspectives. The qualitative methodology also provided far more detail about the meaning of hope to the youth and the components of Snyder’s theory of hope than a 6-item quantitative scale.

Many of the youth said they thought about hope differently after talking about it or that they did not realize how much hope they had until they reflected on it during the interviews. One youth stated:

I just want, um, thinking about hope like cause I’ve never really thought about it in the prospect of what you’ve been talking about but, I’m just thankful that I have hope and I believe in hope cause some people in the world don’t and I just can’t imagine people that don’t have hope. How do they cope with the problems that they have so… yeah, I just feel very different about hope now

There can sometimes be a therapeutic aspect to qualitative research in that the youth were able to think about and reflect on their level of hope. In other words, by reflecting on the important strength of their hope, they seemed to feel more affirmed as hopeful people, a self-experience they valued. They were also given the opportunity to express their thoughts and feelings, knowing that whatever they said was the “right” answer because the purpose of the research was to find out what hope meant to them.

**Scales.** Lopez and colleagues (2000) discuss measuring hope across cultures and point to the importance of knowing the goals of the participants:

The cross-cultural applicability of hope measures needs to be considered very carefully because the development and validation research for the five hope measures described previously has been based on samples generally lacking diversity. In recent and ongoing studies, though, hope researchers have focused on diverse samples including Hispanics, Native Americans, African Americans, and Asian Americans of all ages…For now, given that cultures hold different values and that an individual’s goals would be tied to those values, knowing the goals of clients may facilitate a better understanding of their hopes. (pp. 73-74)
In the current study, qualitative interviews regarding the youth’s goals and the agency and pathways thoughts they use to help them achieve their goals supplemented the quantitative scales. All the scales showed was that the youth had high levels of agency and pathways thoughts, but not how they used those capacities to achieve their goals. The qualitative methods proved to be far more meaningful than the quantitative methods when aiming to understand hope in this population.

**Limitations.** There were several limitations in the current study regarding the methodology used. First, the focus groups did not yield as rich data as was expected. They were conducted at the very end of the programs (one was on the last day) and so the youth were anxious to leave. Overall, they were not as expressive in the focus group as they were in the individual interviews. Perhaps this was due to the timing rather than them feeling uncomfortable talking about hope in a group because the ASM program is set up in a way that they have a lot of group discussions. Asking the youth to discuss their thoughts and feelings in a group was not something unusual in the program. This could be improved by conducting the focus group earlier in the program and at the beginning of the day. At the same time, perhaps hope is not an easy topic to discuss in a group setting. Youth can feel that it implies they are naïve, or worry about seeming foolish or weak, if they talk deeply about hope in a public context.

Another limitation was the lack of data collected at the beginning and end of the program. Only 11 participants completed pre- and post-test data, so meaningful results were not obtained, since this is not enough data to run a statistical test, such as a t-test. Also, the quantitative scales turned out not to be very meaningful. The CHS and BEES
were normally distributed but the two versions of the Compassionate Love Scale were not. The participants completed the CHS first, the BEES second, and the Compassionate Love Scales third, so there may have been an ordering effect with the youth not wanting to fill out any more scales at the end and so not being as thoughtful about their responses. This could also explain why the BEES scores were below average for the youth. The youth gave many examples in the interviews about feeling empathy, so it would not be appropriate to say they have below average levels of empathy based solely on the scales. It is difficult to say if the scales are not valid for this population or if asking adolescents to fill out a packet of scales before they left for the day is what made the scales less valid. This could have been improved by having the participants complete the scales at the beginning of the day, or spreading out the scales so they did not complete them all at once.

**Implications for Social Work Practice, Policy, and Research**

The insights from the youth in this study impacts thinking on developing and sustaining hope in disadvantaged youth. This section will discuss some current literature on social work practice with youth to develop hope and the impact of the current results. Finally, implications for policy and research based on the results will be presented.

**After school programming.** The results of the current study point to the importance of after school programming and the necessity of providing youth with after school programs. The results of the current study point to characteristics of after school programs that increase and sustain hope. The most important aspects of the program for hope, according to the youth, were the relationships. The youth were able to receive
mentoring from group leaders while also mentoring younger children. They felt both types of mentoring relationships were important for their sense of hope. The second most important way they youth said the program increased their hope was by teaching them new skills which helped them to achieve their goals. After school programming aiming to increase hope in disadvantaged youth should consider including these aspects into the program, and some of these ideas are consistent with previous literature.

Bolland (2003) found, in a sample of inner city adolescents, that greater feelings of hopelessness were related to increased risk behaviors, including violence, substance use, sexual activity, and injury. In this sample, 50% of the male participants and 25% of the female participants reported high levels of hopelessness. Bolland states that interventions designed to address hopelessness can help to reduce risk behaviors in inner-city adolescents. After school programs have been found to be effective in reducing negative outcomes in youth. Quane and Rankin (1998) suggest that youth programming can reduce negative peer influences. In a meta-analysis on the impact of after school programming on youth outcomes, Durlak and Weissberg (2007) found that after school programs that had certain characteristics were successful “in improving youths’ feelings of self-confidence and self-esteem, school bonding (positive feelings and attitudes toward school), positive social behaviors, school grades and achievement test scores. They also reduced problem behaviors (e.g., aggression, noncompliance and conduct problems) and drug use.” (p. 7). They found that the programs that provided these outcomes used an evidence-based approach to the training process and program content. Their results showed that effective training is sequential and active. New skills should be broken down
so the youth can learn and master the smaller steps sequentially. Learning should also be active so the youth can practice new skills and receive feedback so they can eventually master the new skills. They also found that program content that was focused and explicit led to positive outcomes for the youth. Programs should focus on teaching specific skills and explicitly tell the youth what skills they are being taught. Durlak and Weissberg found that programs that taught skills in this way were effective in providing youth with positive outcomes, but programs that did not follow an evidence-based approach did not lead to significant changes in the youth.

The ASM program teaches skills in the way Durlak and Weissberg (2007) suggest, which supports the youth’s statements that the program helps them to develop hope. The youth are taught specific skills that they can practice and get feedback from the instructors and their peers. There is also a large focus on active learning, as the youth are able to apply these skills in mentoring younger children and working with the community. The instructors also have specific skills they focus on and explicitly discuss what these skills are with the youth. The skills that are taught in the ASM programs also help the youth to achieve their goals, which is an important component of hope.

Compassion and hope from programming can prevent negative outcomes and increase positive outcomes in at risk youth. One of the youth in this study stated:

If you don’t have a strong support system you gonna immediately feel like there isn’t anyone that cares for you, uh you’re in this by yourself. That’s like, in our studies, we’ve found that the majority of teens that join gangs feel as if they are the only people that show, that cares for them and show compassion towards them. So that’s why they join the gangs. So, um, in order to keep teens out of trouble, I guess that would be helpful.
Vacek et al. (2010) found hope to be a significant predictor of positive affect. They suggest that interventions that increase positive expectations for the future can increase subjective well-being. They state:

Youth could be exposed to role models of similar backgrounds who have succeeded in school and the world of work. Low income, urban, ethnic minority adolescents might also be assisted in developing future aspirations and aided in learning skills to overcome perceived barriers to their successes. (p. 109)

The youth in this study stated similar ways to increase hope in adolescents and the ASM program targets some of their suggestions. They felt that being around hopeful and positive others and participating in programming like the ASM program can help teens to have more hope. Vacek et al. (2010) also state that ways to enhance hope in adolescents is an important area for future research and this study asked the youth that very question.

Kenny, Walsh-Blair, Blustein, Bempechat, and Seltzer (2010) explored achievement motivation in urban adolescents. Using Snyder’s hope theory as a base, they found work hope to be strongly related to beliefs about achievement and to learning environments that provide support and autonomy. They also state that career planning can help with the pathways component of hope. Specifically related to interventions, Kenny et al. (2010) state, “Interventions that enable youth to establish goals, develop clear plans or pathways for attaining those goals, and gain confidence and competence for achieving those goals are likely to be beneficial and related to positive achievement-related beliefs” (p. 211). The ASM program provides this type of environment by having the youth develop their goals for their education and careers and helping them to find ways to achieve their goals. The participants talked about having educational and career
goals and feeling hopeful about achieving those goals, and they felt like the ASM program was helpful in this process.

Woodland (2008) conducted a literature review on after school programs for urban African American youth. The ASM program fits under his classification of the mentoring model because it provides the youth with relationships with caring and supportive adults. He found several core elements of after school programs important for working with African American youth: caring relationships with adults, flexibility, well-trained staff, a physically and psychologically safe environment, the integration of culture, family involvement, opportunities for learning, individual academic assistance, and the use of program evaluations. The ASM program provides all of these to participating youth, which helps to explain its effectiveness in helping the youth to develop hope.

In a study with urban African American youth, Walker and Sutherland (1993) found that youth who received support and encouragement from others that they have the opportunities to achieve their goals had more ambitious goals for their future than youth who did not receive this type of encouragement:

As long as opportunities remain closed for Black youths in the central city, and are perceived as such by the youths of these communities, many young people, particularly young Black males will not develop the types of aspirations that are traditionally considered necessary for mobility. (Walker & Sutherland, 1993, p. 217)

The ASM program provides support and encouragement from leaders and peers, but also provides opportunities for the youth to have a job, and shows them how to achieve their goals of higher education.
**Individual interventions.** In addition to individual therapy providing youth with a supportive, caring, and empathic relationship with an adult, it can also teach them skills to help them set and achieve goals. Snyder, Lopez, Shorey, Rand, and Feldman (2003) discuss ways to help increase agency and pathways thinking in youth. A way to increase pathways thinking is to help youth break down big goals into smaller subgoals. This helps the youth to take steps towards the goal and also gives them more confidence that they can accomplish larger goals. Teaching youth how to create multiple routes to their goals helps so they can continue on the path to goal achievement if one route does not work. To increase agency thinking, it is important that the goals are meaningful to the youth and not merely imposed by others. Youth will be more intrinsically motivated with these types of goals. Working with youth to explore their self-talk around goal achievement can also be helpful in increasing agency thought by replacing negative self-talk with more positive and realistic self-talk. The results of the current study expand this idea. In addition to teaching youth how to develop agency and pathways thinking, it would also be helpful to work with them on how to teach those skills to younger kids. This would combine skill building with the mentoring relationships the youth felt were so important for their sense of hope.

As hope theory is a cognitive theory, cognitive-behavioral interventions can help to increase hope. Youth can be taught to look at the impact their thoughts have on their feelings or behaviors, which can help them to change negative or maladaptive beliefs (Gillham & Reivich, 2004). Youth can also be helped to create more hopeful narratives.
(Gillham & Reivich, 2004). This can be particularly helpful with youth who have experienced significant disadvantage and trauma.

**Social policy.** The results of the current study really point to the need for policy changes in education and after school programming. The goals the youth have for their futures require that they receive an appropriate education. In the inner-city, schools do not have the same resources as other areas. Students are in overcrowded classrooms, using old textbooks, and being taught by teachers who may be burnt out and suffering from vicarious trauma due to the trauma they witness in their students and in the community. If more resources are put into these inner-city schools, there could be greater educational attainment and youth will have more hope that they can achieve their educational and career goals.

There is also the need for more after school programming. Much research has been discussed above on the positive impact after school programming can have on youth outcomes. There should also be additional programs like the After School Matters program that pays youth for their participation and treats the program like a job. This not only gives youth an income to help them support their families, but they get experience applying for and interviewing for jobs, and feel a sense of accomplishment by working. This also gives them hope that they can obtain a job in the future. The youth in the current study felt the leaders, their peers, and the skills taught in the program were important for their sense of hope and accomplishing their goals, and so more opportunities for youth to participate in a similar program is needed.
**Future research.** Further research on the self-reflective aspect of hope that was found is needed to better understand how youth reflect on themselves as an actor in the moment and how that helps them to accomplish their goals. More research on the ways to increase hope that involve relationships with caring adults would be helpful to have a better picture of qualities of after school programming and individual interventions that increase hope in disadvantaged youth. Also, further research with this population is needed using qualitative methods to see if similar results are obtained. Additionally, scale development on receiving compassion will be helpful because that is what the teens said is important for hope and currently there were not any scales found that measure receiving compassion.
This study looked at hope in inner-city African American adolescents ages 14-18. A study like this was needed because it is important to look at strengths in populations, especially those termed “at-risk” or “disadvantaged.” Hope is a positive quality inner-city African American youth can possess, and further research on this construct with this population is important. There were few studies that looked at hope in African American youth (using 100% African American populations) and even fewer that used Snyder’s theory of hope. None of the research found used mixed methods with Snyder’s theory of hope, and so this study was unique in the use of mixed methods and in the use of qualitative data to supplement quantitative scales.

The study addressed five research questions: (1) How do the youth describe hope?, (2) How do the youth’s relationships develop and maintain hope?, (3) What do youth say is the connection between goal definition and pursuit and hope?, (4) How do the youth say the After School Matters program helps them develop hope and compassion?, and (5) What is the relationship between experiences of compassion and the development of hope? There were also four hypotheses: (1) Participants will define hope and describe experiences of hope in a way consistent with Snyder’s theory of hope, (2) Youth will state that the relationships they experience in the After School Matters
program with leaders, counselors and fellow youth helps them develop hope, (3) Youth will state that experiences of receiving compassion help them to develop hope, and (4) Youth with higher levels of hope will also have higher levels of compassion (there is a positive correlation between scores on the Children’s Hope Scale and scores on the Balanced Emotional Empathy Scale and Compassionate Love Scale).

Mixed methodology was used to address these research questions and hypotheses. All of the research questions and the first three hypotheses were addressed using qualitative methods, including individual interviews and focus groups. Quantitative methods were used to address the fourth hypothesis, using scales on hope and compassionate love. The quantitative and qualitative data were analyzed separately and compared when discussing the results.

Qualitative data analysis revealed six overall themes: (1) Relationships with others, specifically caring, encouragement, and compassion from others, as these relate to developing and sustaining hope, (2) Religion and faith as these relate to hope, (3) Staying on track, staying focused, and perseverance as these relate to hope and goal achievement, (4) Hope as it relates to wanting something to happen or something that can happen, (5) Thinking positively (motivated, believing in yourself) as it relates to sustaining hope, and (6) Hope as it relates to goals.

In response to the first research question, most of the youth said that hope is about wanting something to happen or something that can happen. Others said that hope is faith, hope is about achieving your goals, and hope is believing in yourself. Ways that the youth’s relationships develop and maintain hope were found throughout the interviews.
and the importance of these relationships was a very prominent finding in this study. The youth felt that relationships with adults and peers that provided caring, support, encouragement, and compassion were vital for their sense of hope. All of the youth also had goals for their future and could come up with the pathways to achieve those goals and had the motivation (agency) to carry out the plan. This also addresses the first hypothesis in that the youth did describe hope in a way consistent with Snyder’s theory of hope. In response to the fourth research question, the youth felt that the After School Matters program helped them to develop hope through relationships and by building skills to help them achieve their goals. Relationships the program provided with leaders, peers, and mentoring younger children provided the youth with hope. These results support the second hypothesis. The last research question asked about the relationships between experiences of compassion and the development of hope. The youth felt that receiving compassion in the form of caring, support, and encouragement helped them to develop hope, which supports the third hypothesis.

Analysis of the quantitative scales found the youth had above average levels of hope, average levels of compassion, and below average levels of empathy. The high levels of hope the youth showed in the scales mirrored what they said in the individual interviews. The lower scores on the compassionate love and empathy scales may be due to the scales not being appropriate for this population or the administration of the scales. The fourth hypothesis was partially supported. Significant positive correlations were found between total CHS scores and the agency and pathways subscale scores and the Compassionate Love Scale Stranger-Humanity Version. The agency and pathways
subscales were correlated with each other, and the agency subscale was also correlated with the Compassionate Love Scale Stranger-Humanity Version. The Compassionate Love Scale Stranger-Humanity Version and Compassionate Love Scale Close Other Version were also correlated. Finally the BEES scores were correlated with scores on both the Compassionate Love Scale Stranger-Humanity Version and Compassionate Love Scale Close Other Version

When all the results are taken together, there are two key findings. The first is that disadvantaged youth have hope. Their hope is specific to their context, action-oriented, and self-reflective. The second key finding is that hope comes from relationships. For these youth, it is not enough to develop hope early in life. They also need ongoing and current relationships that provide caring, support and compassion to sustain the hope they have. Both of these key findings extend Snyder’s theory of hope. These findings, though, cannot necessarily apply to all disadvantaged African American youth as the youth in this study were highly motivated to achieve academic and career goals and had qualities that apparently protect them from developing the symptoms of complex trauma that many other youth who live in inner-city communities develop.

This study raised several important implications for social work practice, policy, and research. After school programming is vitally important to not only give youth something productive to do after school, but to also provide youth with the skills to achieve their goals and with relationships that will support their sense of hope. Individual interventions can also be helpful in teaching youth how to set achievable goals and create feasible plans to achieve those goals, in addition to providing a caring and supportive
relationship with an adult. At the social policy level, it is necessary to provide more resources to schools in the inner-city so the youth receive a better education and feel more control over their educational and career goals. Also, additional funding for after school programs so more youth can experience the benefits the youth in the current study received is important for the future success of youth from disadvantaged neighborhoods.

Hope is a concept that occurs across all populations, but may be even more important in a population that experiences profound disadvantage. These youth felt that hope was the ticket to a different life, one where they can be successful and support a family without some of the daily struggles they current live with. Hope can give these youth the confidence that they can achieve the goals they have for their future and become the people they want to be.
APPENDIX A

CHILDREN’S HOPE SCALE
QUESTIONS ABOUT YOUR GOALS

1. *I think I am doing pretty well.*

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2. *I can think of many ways to get the things in life that are important to me.*

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3. *I am doing just as well as other kids my age.*

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</table>

4. *When I have a problem, I can come up with lots of ways to solve it.*

<table>
<thead>
<tr>
<th>None of the time</th>
<th>A little of the time</th>
<th>Some of the time</th>
<th>A lot of the time</th>
<th>Most of the time</th>
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5. *I think the things I have done in the past will help me in the future.*

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<tr>
<th>None of the time</th>
<th>A little of the time</th>
<th>Some of the time</th>
<th>A lot of the time</th>
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6. *Even when others want to quit, I know that I can find ways to solve the problem.*

<table>
<thead>
<tr>
<th>None of the time</th>
<th>A little of the time</th>
<th>Some of the time</th>
<th>A lot of the time</th>
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Notes: When administered to children, the scale is titled “Questions About Your Goals.” The total score is achieved by adding the scores for the six items, with “None of the time” = 1; “A little of the time” = 2; “Some of the time” = 3; “A lot of the time” = 4; “Most of the time” = 5; and “All of the time” = 6.
APPENDIX B

COMPASSIONATE LOVE SCALE
## Compassionate Love Scale (Close other version)

1. When I see family members or friends feeling sad, I feel a need to reach out to them.
   
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<th>7</th>
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<tbody>
<tr>
<td>Not true of me</td>
<td>Very true of me</td>
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2. I spend a lot of time concerned about the well-being of those people close to me.

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<td>Not true of me</td>
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3. When I hear about a friend or family member going through a difficult time, I feel a great deal of compassion for him or her.

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<th>3</th>
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<td>Not true of me</td>
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4. It is easy for me to feel the pain (and joy) experienced by my loved ones.

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5. If a person close to me needs help, I would do almost anything I could to help him or her.

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6. I feel considerable compassionate love for those people important in my life.

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7. I tend to feel compassion for people who are close to me.

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8. One of the activities that provides me with the most meaning to my life is helping others with whom I have a close relationship.

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</table>
9. I often have tender feelings toward friends and family members when they seem to be in need.

1  2  3  4  5  6  7
Not true of me                 Very true of me

10. I accept friends and family members even when he or she does things think are wrong.

1  2  3  4  5  6  7
Not true of me                 Very true of me

11. If a family member or close friend is troubled, I usually feel extreme tenderness and caring.

1  2  3  4  5  6  7
Not true of me                 Very true of me

12. I try to understand rather than judge people who are close to me.

1  2  3  4  5  6  7
Not true of me                 Very true of me

13. I try to put myself in my friend or family member’s shoes when he or she is in trouble.

1  2  3  4  5  6  7
Not true of me                 Very true of me

14. I feel happy when I see that loved ones are happy.

1  2  3  4  5  6  7
Not true of me                 Very true of me

15. Those whom I love can trust that I will be there for them if they need me.

1  2  3  4  5  6  7
Not true of me                 Very true of me

16. I want to spend time with close others so that I can find ways to help enrich their lives.

1  2  3  4  5  6  7
Not true of me                 Very true of me
17. I very much wish to be kind and good to my friends and family members.
Not true of me                 Very true of me

Compassionate Love Scale: Stranger-Humanity Version

1. When I see people I do not know feeling sad, I feel a need to reach out to them.
Not true of me                 Very true of me

2. I spend a lot of time concerned about the well-being of humankind.
Not true of me                 Very true of me

3. When I hear about someone (a stranger) going through a difficult time, I feel a great deal of compassion for him or her.
Not true of me                 Very true of me

4. It is easy for me to feel the pain (and joy) experienced by others, even though I do not know them.
Not true of me                 Very true of me

5. If I encounter a stranger needs help, I would do almost anything I could to help him or her.
Not true of me                 Very true of me

6. I feel considerable compassionate love for people from everywhere.
Not true of me                 Very true of me

7. I tend to feel compassion for people, even though I do not know them.
Not true of me                 Very true of me
8. One of the activities that provides me with the most meaning to my life is helping others in the world when they need help.

Not true of me

Very true of me

9. I often have tender feelings toward people (strangers) when they seem to be in need.

Not true of me

Very true of me

10. I accept others whom I do not know even when they do things I think are wrong.

Not true of me

Very true of me

11. If a person (stranger) is troubled, I usually feel extreme tenderness and caring.

Not true of me

Very true of me

12. I try to understand rather than judge people who are strangers to me.

Not true of me

Very true of me

13. I try to put myself in a stranger’s shoes when he or she is in trouble.

Not true of me

Very true of me

14. I feel happy when I see that others (strangers) are happy.

Not true of me

Very true of me

15. Those whom I encounter through my work and public life can assume that I will be there if they need me.

Not true of me

Very true of me

16. I want to spend time with people I don’t know well so that I can find ways to help enrich their lives.

Not true of me

Very true of me
17. I very much wish to be kind and good to fellow human beings.

<table>
<thead>
<tr>
<th>Not true of me</th>
<th>Very true of me</th>
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<td>1</td>
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APPENDIX C

BALANCED EMOTIONAL EMPATHY SCALE
Katherine Tyson McCrea, Ph.D., Professor, obtained permission to use the scale and it is copyright protected from reproduction. However, it can be obtained from Dr. Mehrabian's website, http://www.kajaj.com/psych/scales/emp.html.
APPENDIX D

MINOR ASSENT TO PARTICIPATE IN RESEARCH
Project Title: *Stand Up, Help Out!
Researcher(s): Dr. Katherine Tyson McCrea

Introduction:
You are being asked to participate in a research study being conducted by Dr. Katherine Tyson McCrea, a Professor in the School of Social Work at Loyola University of Chicago. We have also asked your parent (or legal guardian) to consent to participate, and to consent for you to participate, and your parent or legal guardian has agreed. This form is for you to give your permission. You are currently involved in the after school programs, Stand Up, Help Out, being run (at Donaghue School) by Dr. Jeff Bulanda and Angel Pringle, M.S.W. and Megan Butler, M.S.W. also (at Woodlawn High School) by Gabriella Pehanich and Michelle Cain, M.S.W.

You are being asked to participate because after school programs are very important aids for urban young people and we want to understand exactly how these programs are helpful to youth. In addition to looking at the records we keep as part of our After School Matters program, we believe that strengthening hope and helping you develop compassion and self-determination are important in helping you make self-caretaking decisions in the future. So we will be asking you to complete some questionnaires about your experiences of compassion, hope, and self-determination, and you will also have the opportunity to participate in a seminar/focus group to talk about your experiences of these important strengths. The questionnaires will take about 45 minutes to complete, and the focus group will last for another 45 minutes and will be led by a doctoral level clinical social worker and a social work intern as well as the After School Matters instructors. Finally, we will be looking at the records we keep as part of our After School Matters program and we would like your permission to include your records. We are currently seeking permission from all the participants in the program, about 40 total. We will not be doing anything differently with you if you say yes or no. All youth will receive exactly the same services. If you do say yes, everything about your identity, including your name and school, will be kept private.

Please read this form carefully and ask any questions you may have before deciding whether to participate in the study.

Purpose:
We want to make sure that this program is helpful, understand more about how it is helpful, and to share the strengths of our program with other professionals.

Procedures:
Your participation would involve agreeing to allow information that has been collected about you as part of the ‘Stand Up! Help Out!’ program to be used as research to evaluate
the program. The types of information that would be used as part of this evaluation are described below:

1) During the final week of the Stand Up! Help Out! program, the youth in our program will interview one another in order for them to voice their opinion about the program. These interviews will be tape-recorded and transcribed;
2) A focus group will take place as part of the program to discuss the results of the program evaluation;
3) notes we keep following one-on-one interviews with students;
4) our information about students’ progress in school, including grades, courses taken, etc.;
5) individual stories of students in the program that we learn about through our interviews and activities completed as part of the program;
6) the forms where we ask you to give us your impressions of the program;
7) the questionnaires about hope, compassion, and self-determination;
8) meetings with you that may occur.

Your agreement to participate would allow any information that has been gathered about you through your participation in the current After School Matters program to be used as research. If you participated in any previous ‘Stand Up! Help Out!’ program, your participation in this research would involve granting permission to allow information that has been collected about you during these programs to be used as well.

**Risks/Benefits:**
There are no risks involved with this research project outside of how you might normally react to an interview situation.

You will not be treated any differently if you consent to be part of this research; everything done for the research is part of the materials already collected in order to run the program, so nothing is being changed for the sake of any research project. Further, all program evaluations and notes for one-on-one interviews will be stored in a locked file cabinet and will not be accessible to any one other than the instructors and Dr. Tyson McCrea.

The benefits of participation include helping us to look at our program and listen to the students’ opinions. There are no foreseeable risks involved in participating in this research, as information collected is already part of the program. Your ability to participate in this program will NOT be affected if you choose not to sign this assent; additionally, you can withdraw your assent at any point without penalty.

**Confidentiality:**
All data will be stored and kept in a locked file cabinet in a locked office to which only the research team led by Dr. Katherine Tyson McCrea will have access.
Voluntary Participation:
Participation in this study is voluntary. If you do not want to be involved in this study, you do not have to participate. Even if you decide to participate, you are free not to answer any question or to withdraw from participation at any time without penalty.

Contacts and Questions:
If you have questions about this research study, please feel free to contact: Dr. Katherine Tyson McCrea at ktyson@luc.edu or 312-915-7028.

If you have questions about your rights as a research participant, you may contact the Compliance Manager in Loyola’s Office of Research Services at (773) 508-2689.

Statement of Assent:
Your signature below indicates that you have read and understood the information provided above, have had an opportunity to ask questions, and agree to participate in this research study. You will be given a copy of this form to keep for your records.

____________________________  __________________
Signature                                                                   Date

____________________________  __________________
Researcher’s Signature                                                  Date

____________________________  __________________
Researcher’s Signature                                                  Date
APPENDIX E

CONSENT TO PARTICIPATE IN RESEARCH
CONSENT TO PARTICIPATE IN RESEARCH

Project Title: *Stand Up, Help Out!*
Researcher(s): Dr. Katherine Tyson McCrea

Introduction:
You’re being asked to give parental consent in order for your child to take part in a research study being conducted by Dr. Katherine Tyson McCrea, a Professor in the School of Social Work at Loyola University of Chicago. You are currently involved in the after school programs, Stand Up, Help Out, being run (at Donaghue School) by Dr. Jeff Bulanda and Angel Pringle, M.S.W. and Megan Butler, M.S.W. also (at Woodlawn High School) by Gabriella Pehanich and Michelle Cain, M.S.W.

Your child is being asked to participate because after school programs are very important aids for urban young people and we want to understand exactly how these programs are helpful to youth. In addition to looking at the records we keep as part of our After School Matters program, we believe that strengthening hope and helping the youth develop compassion and self-determination are critical to their being able to make self-caretaking decisions in their personal and academic lives. So we will be asking the youth to complete some questionnaires about their experience of compassion, hope, and self-determination, and they will also have the opportunity to participate in a seminar/focus group to talk about their experiences of these important strengths. The questionnaires will take about 45 minutes to complete, and the focus group will last for another 45 minutes and will be led by a doctoral level clinical social worker and a social work intern as well as the After School Matters instructors. Finally, we will be looking at the records we keep as part of our After School Matters program and we would like your permission to include your child’s records. We are currently seeking permission from the legal guardians of all the youth participating, about 40 participants in all. We will not be doing anything differently with the youth if you say yes or no; all youth will receive exactly the same services. If you do say yes, everything about your child’s identity will be kept private.

Please read this form carefully and ask any questions you may have before deciding whether to participate in the study.

Purpose:
We want to make sure that this program is helpful, understand more about how it is helpful, and to share the strengths of our program with other professionals.

Procedures:
Your participation would involve agreeing to allow information that has been collected about your child as part of the ‘Stand Up! Help Out!’ program to be used as research to
evaluate the program. The types of information that would be used as part of this 
evaluation are described below:

1) During the final week of the Stand Up! Help Out! program, the youth in our program 
will interview one another in order for them to voice their opinion about the program. 
These interviews will be tape-recorded and transcribed. 
2) A focus group will take place as part of the program to discuss the results of the 
program evaluation; 
3) notes we keep following one-on-one interviews with students; 
4) our information about students’ progress in school, including grades, courses taken, 
etc.; 
5) individual stories of students in the program that we learn about through our interviews 
and activities completed as part of the program; 
6) the forms where we ask you to give us your impressions of the program; 
7) the questionnaires about hope, compassion, and self-determination; 
8) meetings with you that may occur.

Your agreement to participate would allow any information that has been gathered about 
your child through their participation in the current After School Matters program to be 
used as research. If your child participated in any of the previous Stand Up! Help Out!’ 
programs, your participation in this research would involve granting permission to allow 
information that has been collected about your child during these programs to be used as 
well.

If this information is used in any written report or article, all identifying information, 
including your child’s name and school, will be disguised so that confidentiality is 
maintained

Risks/Benefits:

The benefits of participation include helping us to look at our program and listen to the 
students’ opinions. There are no risks involved with this research project, except for 
feelings that the student might normally have in response to the interviews with us. Your 
child will not be treated any differently if you consent for your child to be part of this 
research or if you say no; everything done for the research is part of the materials already 
collected in order to run the program, so the services your child receives are not being 
changed at all for the sake of our research project. Your child’s ability to participate in 
this program will NOT be affected if you choose not to sign this consent; additionally, 
you can withdraw your consent at any point without penalty.

Confidentiality:
All data will be stored and kept in a locked file cabinet in a locked office to which only 
the research team led by Dr. Katherine Tyson McCrea will have access.
Voluntary Participation:
Participation in this study is voluntary. If your child does not want to be involved in this study, your child does not have to participate and can still participate in the After School Matters program. Even if your child decides to participate, your child is free not to answer any question or to withdraw from participation at any time without penalty.

Contacts and Questions:
If you have questions about this research study, please feel free to contact:
Katherine Tyson McCrea, ktyson@luc.edu, or 312-915-7028.

If you have questions about your rights as a research participant, you may contact the Compliance Manager in Loyola’s Office of Research Services at (773) 508-2689.

Statement of Consent:
Your signature below indicates that you have read and understood the information provided above, have had an opportunity to ask questions, and agree to participate in this research study. You will be given a copy of this form to keep for your records.

_________________________________________   __________________
Parent Signature                                                             Date

_________________________________________   __________________
Researcher’s Signature                                                  Date

_________________________________________   __________________
Researcher’s Signature                                                  Date
APPENDIX F

INTERVIEW PROTOCOL
1. What do you think of when you hear the word hope?

2. When are you aware of feeling hopeful?

3. How do you think you developed your sense of hope?

4. Do you have goals for your future?

5. Are you able to think of different ways to achieve your goals (pathways)?

6. Once you think of a way to achieve your goal, are you able to carry out the plan (agency)?

7. What do you do when you are discouraged or fail?
   a. Are there times you feel hopeless and can you tell me about one of those?
   b. Are there times you’ve worked hard to sustain your hope even though you feel discouraged, and can you tell me about one of those?

8. Do you feel like the After School Matters program has helped you to have hope?
   a. If so, how?
   b. If not, why not, can you explain?

9. Some young people said that they feel that being cared for and giving and receiving compassion gives them hope. What do you think about this connection?

10. For teens that do not have hope, what do you think they can do to feel more hopeful?

11. Do you agree or disagree with the following quotes?
America is a land of big dreamers and big hopes. It is this hope that has sustained us through revolution and civil war, depression and world war, a struggle for civil and social rights and the brink of nuclear crisis. And it is because our dreamers dreamed that we have emerged from each challenge more united, more prosperous, and more admired than before.

BARACK OBAMA, speech, Jun. 4, 2005

Hope – Hope in the face of difficulty. Hope in the face of uncertainty. The audacity of hope! In the end, that is God’s greatest gift to us, the bedrock of this nation. A belief in things not seen. A belief that there are better days ahead.

BARAK OBAMA, speech, July 27, 2004

Even in the inevitable moments when all seems hopeless, men know that without hope they cannot really live, and in agonizing desperation they cry for the bread of hope.

MARTIN LUTHER KING JR., A Testament of Hope

We all hope. It's what keeps us alive.

DAVID MAMET, Speed-the-Plow
APPENDIX G
CODING MANUAL
1. What do you think of when you hear the word hope?

Variable Name= WHATHOPE

These codes are the youth’s definition of hope in his or her words.

1. Hope means you can accomplish a goal
   “I feel that like it is possible for you to do something, that what I think about hope” (P13, Ln15).

2. Hope means you want something to happen
   “Alright so when I hear the word hope it’s like when you want something to really happen but that doesn’t mean its really going to happen, just hoping that it will happen” (P7, Ln5).

3. Hope means something can or will happen (either the participant or someone else believes something will happen)
   “I think of something is going to happen and you have hope for that” (P45, Ln5).

4. Hope comes from God
   “Um I think of it as miracle. Um, a blessing, something that came from God” (P27, Ln11).

5. Hope is faith
   “When I think of the word hope I think of, like you have faith in something you have a reason to do something or a reason to live, you have faith in something or someone.” (P44, Ln5).

6. Hope is looking forward to the future
   “When I think of the word hope I think of looking out for your future, having something to look forward to in the long run or in that moment of time” (P43, Ln5).

7. Hope is positive traits or attributes
   “I think of, like hope can be like a word easily described as determination and will. And that’s about all” (P72, Ln9).

8. Hope means you believe in yourself or someone believes in you
   “I think of is like you have hope in yourself and you have people you, that you think you’ve got a chance with. You um, you believe in yourself. You built up enough confidence to do something. And, um, you have people w-, um, yeah, people that encourage you. That gives you hope and something. That’s what I think” (P52, Ln 9).
2. When are you aware of feeling hopeful?

These codes are the situations in which the participants feel hopeful.

Variable Name= WHENHOPE

1. Participant reported being hopeful when thinking about a career
   “Like, like, looking toward, toward my um career or my trades that I want to take up, I feel hopeful all the time (P13, Ln19).

2. Participant reported being hopeful at school or in academic pursuits
   “at school um if I know I’m kind of like doing good in school, I hope that I would get a good grade. It doesn’t mean I am not gonna get it but I’m hoping that” (P7, Ln7).

3. Participant reported being hopeful when wanting something to happen
   “when you a, like when you, when you’re feeling inspired to do something” (P29, Ln7).

4. Participant reported being hopeful when feeling like he/she can accomplish goals or feels confident
   “when you feel like something is easy you know you gonna be able to do it so there’s no, you know hoping basically means like you, like you just pray or you think something’s gonna happen. So basically when like when you know that you are going to be able to do it, that there wouldn’t be any problem.” (P29, Ln 13).

5. Participant reported being hopeful at church
   “When I go to church sometimes like when they preaching or something I just feel uplifted and I feel like something that I went through I’m like, okay I feel good; so, I feel hopeful” (P27, Ln 19).

6. Participant reported being hopeful when in a difficult situation
   “When the odds are against me um it’s just like anybody when you in like a, a bind all of a sudden you have a surge of faith and you gotta whole bunch of hope” (P40, Ln7)

7. Participant is hopeful when believing in something
   “Mmmm… I really don’t know. ‘Cause, like, um, I guess hope is just like a feeling, is like a certain feeling that you really can’t describe. It’s kind of like just believing in something even though it might not actually be there” (P62, Ln13)

8. Participant is hopeful when around positive people
“I feel hopeful when I am around people with good topics and tell them what I believe and hear good opinions” (P53, Ln8).

9. Participant is hopeful when helping others
   “Maybe when I’m trying to help somebody” (P72, Ln13)

3. **How do you think you developed your sense of hope?**
   This question asks the participants where their sense of hope came from and if it is something they just have or came from other people.

   **Variable Name= DEVHOPE**

   1. People are born with hope or just have it
      “I think hope is just something you have really” (P16, Ln11)

   2. Hope is developed through interactions with other people
      “Maybe teachers because they know people have other things outside of class going on and they give you the development to keep on going, and they hope for you to do your best” (P42, Ln21)

   3. Hope is developed by thinking in a hopeful way
      “I think it was something that I have learned because when you are hoping for something, you are thinking of something that you want to happen” (P42, Ln17)

   4. Hope is developed within yourself
      “um well it takes a lot of, well it really don’t take nothing at all. I feel that like it takes a lot of, um, um, let me see um what is that word I’m looking for, um, takes a lot of pride and hope comes and if you have hope in yourself then you can do it, that what I feel” (P13, Ln23).

   5. Hope is developed from church
      “I think I developed my sense of hope with the church and my family. Those two things combined together developed my sense of hope (P44, Ln 17, also coded as developed through interactions with others)

   6. Hope is developed from difficult experiences early in life
      “I developed a sense of hope as a child because I was um in foster care and it was just a lot of things going on at the time of my life so I just always shoot to say I’m gonna grow up and I’m gonna do this and do that so that’s how I I’ve learned about hope” (P69, Ln13).

   7. The participant is unsure how hope is developed
4. **Do you have goals for your future?**
   This code is if the participants have goals for their future and what the goals are. The assumption underlying hope theory is that human behavior is goal-directed. Goals therefore serve as the cognitive component to this theory and provide the targets for hopeful thinking (Snyder, 2002).

   Variable Name= GOALS

   Yes (1), No (0)

   Variable Name= GOALS2

   1. The participant has a goal to be successful or to “be something”
      “yes, making it, being very successful, for most important, and trying to be something” (P13, Ln29)

   2. The participant has a goal to graduate high school
      “ah, well after I graduate from high school I plan on getting my degree in a business and then after I get my degree, in four years I plan on going into the air force” (P29, Ln19, also coded as go to college and career goals).

   3. The participant has a goal to go to college
      “I want to go to college” (P28, Ln35)

   4. The participant has career goals
      “Become a forensic investigator” (P28, Ln39)

   5. The participant discussed goals related to High School performance and/or grades
      “Um, making at least A’s in my report card for the next marking period” (P7, Ln19)

   6. The participant discussed goals related to personal development or religion
      “Um another long term goal I was working on is working on my patience. I usually have a temper problem so patience has; in the long term patience will help you with a lot of things so I’m working on that” (P40, Ln17)

   7. The participant discussed goals related to sports
      “I got goals um I, well my goals are kind of long term, I wanna play basketball in college and the only way I know I can actually get to that
position is to practice and to go to college and to actually come out and finish my four years in college and the only way I can know I can do that is not about hoping I can finish it’s about knowing I can finish” (P40, Ln15)

8. The participant wants to be able to support his or her family
   “And, yeah. I want to have a family. And then be able to support my own family, my mom and my sister” (P51, Ln29)

9. The participant wants to get a job during high school
   “Um, I want to do, like another summer job, but something different to experience more” (P65, Ln49)

10. The participant wants to get a scholarship
    “I want to become a Pediatrician and my goal is to get a scholarship to go.” (P45, Ln25, also coded as career goals).

5. Are you able to think of different ways to achieve your goals (pathways)?

   Pathways thinking includes the successful planning of ways to meet goals.

   Variable Name= PATHWAYS

   Yes (1), No (0)

   Variable Name= PATHWAYS2

   1. The participant consults with others about how to achieve the goal or researches about the goal
      “maybe if like I know different people who work in a type of weather industry or whatever I can get connected to them, see if they can give me some tips. Or carpentry because my Dad, he’s like a construction worker, he works with a lot of people that do construction. I can just talk to him and he can call a couple of people and I can probably fulfill that goal” (P13, Ln39)

   2. The participant stated that performing well, being prepared, or staying in school is way to achieve a goal.
      “Studying, taking notes, what I don’t understand ask for help and make sure that I am getting the stuff that I am learning so it can stay in my mind and I can remember it” (P42, Ln 33).

   3. The participant stated that a way to achieve a goal is to stay focused and/or stay on track on track towards achieving the goal.
“Staying focused, staying focused, that's the number one thing is staying focused; if I stay focused I know I can make it” (P27, Ln51)

6. Once you think of a way to achieve your goal, are you able to carry out the plan (agency)?

This code assess the presence of agency thought, which is the extent the individual perceives his or her ability to carry out pathways to achieve goals. The codes further elaborate on how the participants experience their ability to carry out a plan towards their goal.

Variable Name= AGENCY

Yes (1), and No (0), Sometimes (2)

Variable Name= AGENCY2

1. The participant discussed times when it is easier to carry out a plan towards a goal.
   “I think it would be easier if you make it a short-term goal because if you make it longer you make get on something else and you may not think about achieving that goal anymore” (P42, Ln41)

2. The participant discussed times when it is harder to carry out a plan towards a goal.
   “Sometimes it can be hard but when I feel like that I’m struggling or having some difficulties with my goal, I go out for help” (P7, Ln27)

3. The participant stated that staying on track or keeping trying is a way to carry out the plan.
   “See the thing is, when your trying to achieve your goal you always tend to get sidetracked and sometimes it’s not voluntarily you know, its more of kinda some type of inspiration from other people to do something different that you know it’s not parallel with what you want to do, and that’s that’s where learning experiences come from, that you know snap back, you know you jump back on the tracks and get to pushing even though if you do kind of stray away from your goal that might, that may add a load to what your trying to carry towards your goal, so I would I would um I’d try my best to strive toward my goal and not you know, derail from the tracks” (P40, Ln23)

4. The participant thinks about how he or she does not want things to be.
   “Um, seeing people like somebody in my family, my mother or someone struggling it’s like I'm growing as I grew up, grow up, I'm sorry, as I grows up I see not just my family, people on the streets struggling,
homeless people begging on the streets for begging for some change and stuff and so I say I don't want to be that person, so that's what, that's what helps me out like the opposite of what they're doing” (P27, Ln59)

5. The participant thinks positively as a way to carry out the plan
   “when I achieve them I just like I feel as if okay I did this and I did that, what’s next um okay since I did this and I did that, the obstacles I went through, If I went through those things in life I can go through anything else so I say, I just go and I just say I can do anything” (P27, Ln55)

6. The participant will work hard as a way to carry out the plan
   “Cause it’s starting to get real serious since I’m growing up so fast, the years are going by so fast so like if, once I think of a way to get, once I think of something that, like somewhere I want to go or something that I want to do, I’m gonna work hard, work read hard to get where I want to go. And if that means I have to cut certain things out of my life or cut certain people out of my life that’s what I’m gonna have to do. Cause I have to live life for me and no one else” (P29, Ln33)

7. The participant stated he or she can carry out the plan with support or to make others proud
   “Yes I am because I have a strong family around me to encourage me to do what I want to. If it is positive because so its easy for me because I have that kind of support behind me” (P44, Ln41)

7. **What do you do when you are discouraged or fail?**

This code is how the participants react to feelings of discouragement or failure.

Variable Name= DISCOURAGED

1. The participant feels like he or she will not achieve a goal
   “yes, yes, I would have to say like um, let me see, like when I mess up or when I do something wrong I would say or like I get a bad grade I feel like by me doing this I will not be able to fulfill my goal, I keep on like going toward the red and I learned that I can’t have that type of attitude” (P13, Ln47)

2. The participant gets back on track to goal achievement
   “I need to just, when I mess up I need to get back on track and pick up where I left off” (P13, Ln47)

3. The participant does not give up or keeps trying
“Hope helps me out and determination and if I fail I want to get back up and pass it” (P44, Ln49)

4. The participant keeps to him or herself when feeling discouragement or failure
“I feel, when I feel like I’ve failed or I’m discouraged um I just like stick to myself and just stay to myself mainly and I don’t talk to nobody but like I used to write poems, I don’t even do that no more. So I just stay to myself and just try to let it go by myself” (P16, Ln25)

5. The participant feels negatively (bad, panic) or feels like the failure is his or her fault
“I panic, I panic real fast, I'm like, I don't think at that point, I just feel like oh like my life is is ended, depending on like what it is, so” (P28, Ln63)

6. The participant thinks positively of how he or she would like things to be
“Look at the people around me like in my neighborhood and let that be an inspiration because I don’t want to be stuck here all of my life like the older people living through the young people and stuff so I know I just have to keep going and I can’t stop” (P41, Ln45)

7. The participant reflects on the situation
“I think about what happened and what I can do better” (P42, Ln 45).

8. The participant talks to someone.
“First of all I talk to people about it” (P51, Ln57)

9. The participant sometimes gives up.
“Um… When I’m discouraged or feel like I’ve failed to achieve my goal… I would probably drop it or, sometimes drop it” (P54, Ln68)

a. Are there times you feel hopeless and can you tell me about one of those?
This code is if the participant reports feelings of hopelessness

Variable Name= HOPELESS

Yes (1), No (0)

This code is hope the participant reacts to feeling hopeless.

Variable Name= HOPELESS2

1. The participant feels hopeless after doing something wrong
“I can relate this to when I get in trouble or whatever. Okay, when I feel, when I know I’m not doing something right and then like I regret what I did, I feel very hopeless. Like I knew I shouldn’t have did it, but I did it, and I feel very hopeless” (P13, Ln49)

2. The participant feels hopeless when feeling like he or she will not achieve something or will fail
   “Well when I’m getting bad grades and I feel like I can’t do better I mean it’s like why try, it’s like there’s no hope for me getting an A in this class like the teacher’s too hard the work is too hard, there is no way in the world that I can get an A” (P29, Ln37)

3. The participant gives up when feeling hopeless
   “I just give up everything for a minute” (P7, Ln39)

4. The participant feels hopeless when something gets in the way of achieving goals
   “Oh I feel that I can accomplish my goals but sometimes I don’t because I think something might get in the way but I try not to let it” (P16, Ln29)

5. The participant feels hopeless when he or she does poorly in school
   “when I need help in a certain subject and I know my parents can't help me or a teacher or I can’t have that courage to tell a teacher I need help, I just feel hopeless right then and there. Especially if I get a bad grade” (P28, Ln67)

6. The participant tries harder when feeling hopeless
   “yeah, now I can’t accept failure, not this year. Like I I have to work my hardest to get these A’s cause the scholarship is what I’m really shooting for” (P29, Ln41)

7. The participant feels hopeless when feeling like a situation is out of his or her control, including problems at home or with family
   “when my sister got hit by a car it was like two years ago and she was in the hospital and I felt like there was nothing I could whether she lives or dies it was in the hands of the doctors I felt hopeless because..it was just a very traumatic time for me” (P47, Ln82).

8. People help to get hope back
   “There are times, but there’s always that one person right there that gives you back hope eventually” (P52, Ln49)
b. **Are there times you’ve worked hard to sustain your hope even though you feel discouraged, and can you tell me about one of those?**

This code is if the participant states there are times he or she has worked hard to sustain hope when discouraged.

Variable Name= SUSTAINHOPE

Yes (1), No (0)

This code is how the participant sustains hope when discouraged.

Variable Name= SUSTAINHOPE2

1. The participant stated he or she keeps trying or stays on track to sustain hope
   “I would probably try again and maybe be hopeful that the outcome is better” (P42, Ln53)

2. The participant stated he or she creates a plan on how to proceed to sustain hope
   “I would probably try again and maybe be hopeful that the outcome is better” (P7, Ln45)

3. The participant stated he or she talks to someone to sustain hope
   “Yeah I have, um cause like if I feel like discouraged and I want to stay hopeful, like I stay hopeful because I, I might have somebody to talk to to keep me up but then other than that not really” (P16, Ln41)

4. The participant stated encouragement from others helps to sustain hope
   “like um just encouragement from people, people who want to help ask how can the situation get better and people just encourage me not to just give up or just to you know you can’t just moan about it because if you moan about it I mean there’s, it’s nothing still being done” (P19, Ln29)

5. The participant stated he or she thinks positively to sustain hope
   “Yes because I I try my best to stay positive, that's what I do because if I be negative mostly all the time, where I'm going? Nowhere, I'm not getting myself anywhere but to a negative spot so I keep my mind right, I stay positive all the time, I try my best to stay positive” (P27, Ln91)
6. The participant stated he or she tries to sustain hope when success does not happen even though he or she worked hard
   “um such as if I'm doing a assignment at school and I know I worked hard and I know I did it, um stay home and had many obstacles and I got a bad grade, I felt, I felt discouraged and then I want to ask questions like okay I did bad on this paper but I worked hard and I just want to like break down and don’t want to do nothing else because I feel if I do it again then I'll be discouraged again, all over again” (P28, Ln75)

7. The participant stated he or she stays motivated that he or she can do better in order to sustain hope
   “when you try and reach a goal and a personal goal especially its going to be a lot of stuff to bring you down. Its not going to be too many people trying to help you like I got my mom behind me but its not too many people that’s going to help you like let me give you this or let me help you with this to get you there so you have to always think that you are doing this for yourself so yes I’m pretty self-motivated” (P41, Ln57)

8. The participant stated he or she tries to sustain when wanting something to happen but it is not happening
   “Broken promises, yeah um it’s just one of them you know tingling feelings where you like man, you’ve been kind of waiting, like you know let’s say your father say he’s going to take you out somewhere and you, you know you looking at the clock, your anxious, you’re ready, you’re on time, your just sitting and then you know, you know out from, you know when he supposed to come come, thirty minutes come, the time when he’s supposed to arrive comes and then you know the late process comes and okay he’s an hour late, two hours late, three hours late, then you still hoping like you know it’s still six o’clock, we still can have a good time, then you know nine o’clock comes and then you like man, I guess we gonna be late going out and then you know eleven o’clock comes and he’s nodding to me like, you know one of your older siblings or something or your mom tell you like he’s not coming you might as well just get undressed” (P40, Ln35)

9. The participant sustains hope in relationships with others.
   “Mmmm, probably with friendships. Yeah, in friendships” (P58, Ln64).

10. The participant sustains hope by going to church.
“Uh, to sustain it I kept going to church. Um, I kept myself in positive, uh, activities so I won’t go, you know, down a negative road” (P55, Ln93).

11. The participant does not need to sustain hope because he or she only sets achievable goals.

“The participant does not need to sustain hope because he or she only sets achievable goals.

“Mmm, no. Like, all the goals I set I make sure I can c- I can complete ‘em. ‘Cause I feel like I can’t set nothing way out of my way and I can’t complete it and that gonna make me feel bad like dang I didn’t do it right. I didn’t meet my goal this time. That’s the first time for anything. So I just make sure I can set it and I can do it” (P50, Ln53)

8. **Do you feel like the After School Matters program has helped you to have hope?**

This code is if the participant states the program helped him or her have hope.

Variable Name= ASM

Yes (1), No (0)

This code describes how the participant states the program helps develop hope.

Variable Name= ASM2

1. The ASM program helps the participant become a better person

“I feel that by me coming to the After School Matters, I’ve become a better person” (P13, Ln55)

2. The ASM program helps the participant learn new skills

“If anything After School Matters has prepared me the most when it comes to you know my goals. I’m just not one of them type of people that, I didn’t come to After School Matters to gain hope. I came here to gain experience, to gain knowledge and hope is okay, I, a lot of hope for people out there.” (P40, Ln39)

3. The ASM program provides the participant with support and/or encouragement

“Anytime I need anything or like I feel that I just need that extra push, After School Matters always help” (P13, Ln55)

4. The ASM program has caring people

“the people that are really around, they’re really hopeful and they care” (P7, Ln47)
5. The participant wants to be in the program
   “Yeah cause it’s like um somewhere I want to be, not out you know doing nothing else” (P7, Ln47)

6. Mentoring younger kids helps the participants to feel hopeful (either directly or indirectly)
   “It has helped me have hope with younger kids. I can tell that they are bright and intelligent so I have hope for them. I see the potential in the kids and my mentee and some others so I have hope for them” (P44, Ln72)

7. The ASM program helps the participant to achieve goals
   “I feel it ah helped me to have hope in things cause like their like, if I’m having like, you know social workers if I have any problems I come to them and like they talk about college and everything and those are one of my goals and to go to college and I feel that they helped me with that” (P16, Ln33)

8. The ASM program has compassionate leaders
   “Angel and Jeff make sure I'm not shy, make sure I'm very outspoken at times so they'll give me little work sheets to do or they'll talk to me in a compassionate way, like well this how I used to be, this how I um used to do that when I was your age so everyone's not perfect so yeah” (P28, Ln83)

9. The speakers provide motivation and hope
   “It actually mmmm.. it has yea it has because when we have different people come in and talk to us and they talk about the stages of their life and like how they got to the place now its like im thinking in my head I can do the same thing. I shouldn’t be able to give up. Its going to be times when you want to give up and you fall down and mess up but if that’s really what you want to do then you will continue to put you mind to it and keep working on it” (P15, Ln104).

10. The ASM program allows the participant to build relationships with peers.
    “Mmmm, yes. ‘Cause you can develop new friendships with new people and that’s good” (P58, Ln68)

11. The participant feels special or important by getting the job.
    “Yes because it like made me like Jeff told us during the interview that it's it's like not a lot of kids that was gonna get picked so I felt like it was something special about me like that he called me back and gave me the job” (P75, Ln39).
9. Some young people said that they feel that being cared for and giving and receiving compassion gives them hope. What do you think about this connection?

This code is if the participant states that he or she believes that experiences of compassion lead to hope.

Variable Name= COMPASSION

Yes (1), No (0) or Unsure (2)

This code is how the participant describes the relationship between hope and compassion.

Variable Name= COMPASSION2
1. When others show someone compassion, they are showing caring, which leads to hope
   “cause knowing that somebody ah really feels for you like care for you
   and if somebody cares for you, you have more hope in yourself that yeah
   if somebody feels this for you then it pumps you up to be more hopeful”
   (P7, Ln53)

2. Receiving compassion instills confidence, which leads to hope
   “yeah, having confidence in me and me most importantly having
   confidence in myself” (P16, Ln64)

3. Receiving compassion provides encouragement, which leads to hope
   “okay, cause it, I would say like it give me that extra push like, it’s like I
   need that talk, like I need that that person to give me compassion. Like by
   them giving me compassion it’s like I’m ahead of the game like I’m two
   steps ahead and they give me much um hope and I feel very hopeful. So
   that’s how I say that connects to me” (P13, Ln62)

4. Receiving compassion leads directly to hope
   “Having hope is sometimes comes in by someone who has compassion for
   you and if they have compassion for you and you think that they are trying
   to help you, then you may have hope that something to happen and you
   may just hope again” (P42, Ln93)

5. Receiving compassion makes you feel better about yourself or makes you feel better when you are down, which leads to hope
   “I feel that if someone is showing you compassion, especially your family
   or friends that would give you hope because that keeps you uplifted
   mentally and that makes you feel good about yourself and that gives you
   hope” (P44, Ln80)
6. The participant wants to make those that showed him/her compassion proud
   “I think it’s true, I know it’s true because if no one has ever showed you
   compassion or did anything for you you’re not going to think that anybody
   is going to help you or anybody is ever going to do anything for you and if
   you think that anybody can do anything for you umm have hope you
   pretty much just settle where you are well I’m here I’m gonna be I’m not
   going anywhere. Then when people show compassion to you and love and
   stuff, it helps you grow a little more because it gives you a reason to want
   to do something because these people have been good to you the least you
   can do is show them that their work has paid off” (P41, Ln65)

10. For teens that do not have hope, what do you think they can do to be more
    hopeful?

    This code is how the participants state teens with low hope can have more hope.
    
    Variable Name= MOREHOPE
    
    1. The involvement of caring/positive people or a mentor
       “Well a mentor is very helpful because if you aren’t getting enough
       attention or guidance in their life at home then a mentor is always a good
       help because they can help you out with that problem or even friends”
       (P47, Ln 123)
    
    2. Being around hopeful people
       “ah hang around people that have hope, like if your hanging around with a
       crowd that’s not really doing anything with their lives, you have to get into
       a crowd where people that’s, that know and hope that they are going to off
       and do something later on in life. Cause if you surround yourself by one
       certain, one type of group, you’re gonna adapt to what, I mean you’re
       gonna like start doing the things that they do, sometimes its good and
       sometimes it’s bad but if you don’t have hope you should be hanging
       around with a good group that know that A’s and B’s are the right way to
       go and not C’s, D’s, and F’s” (P29, Ln73)
    
    3. Counseling
       “I think they should get some counseling or a mentor to help them have
       hope” (P42, Ln73, also coded as “The involvement of caring/positive
       people or a mentor”)
    
    4. Get involved in a program
       “I would say by, they, by joining a good program like this one, by joining
       After School Matters. Because everyone have like, every teen I know that
before, they might didn’t have hope, but now they have hope, trust, care and everything” (P13, Ln86)

5. Ask for help
   “They can ask for help, they can go for help” (P16, Ln43)

6. Talk to someone
   “So I would say like, talk to an older adult, like someone that is really close for them and like talk to them and like really understand what they’re saying from their point of view and from your point of view, and maybe she, that teen, will have a better understanding of hope and have hope in their life” (P13, Ln86)

7. Pray or go to church
   “Alot of people get hope from joining a religion, get more into the church” (P44, Ln92)

8. Strive for more
   “I guess umm don’t be so comfortable for settling for what your handed you know. Have a drive to get somewhere or do something” (P41, Ln71)

9. Do something they enjoy
   “Do something they like to do and make themselves happy, something they love. They can do whatever they love to do” (P45, Ln83)

10. Set goals or try to achieve goals
    “Setting goals for themselves” (P48, Ln 108)

11. Think positively or believe in themselves
    “They can sit down and think about what is good about them and what makes them happy so they can feel good about themselves and love themselves and that can bring hope to them” (P44, Ln88)

12. Build a support network
    “Uh, build a relationship. With especially you going to school and all with your peers, try to build a good relationship with them. And then, you know, you go home and meet th- meet their moms and their family and their little brothers and you gonna turn around and they’re gonna be your family and your little brothers that you wanting around like, somebody you’re close to. They gonna end up being like you call them your brothers and like you know they really ain’t. But they been so close to you that you might as well call them that. So that’s one way. And that’s the way I choose” (P50, Ln64)
11. Do you agree or disagree with the following quotes?

1. America is a land of big dreamers and big hopes. It is this hope that has sustained us through revolution and civil war, depression and world war, a struggle for civil and social rights and the brink of nuclear crisis. And it is because our dreamers dreamed that we have emerged from each challenge more united, more prosperous, and more admired than before.

Variable Name= QUOTE1
0  Disagree
1  Agree
2  Somewhat agree

This interviewee response is inconsistent with previous statements in the interview
0  Yes
1  No

2. Hope – Hope in the face of difficulty. Hope in the face of uncertainty. The audacity of hope! In the end, that is God’s greatest gift to us, the bedrock of this nation. A belief in things not seen. A belief that there are better days ahead.

Variable Name= QUOTE2
0  Disagree
1  Agree
2  Somewhat agree

This interviewee response is inconsistent with previous statements in the interview
0  Yes
1  No

3. Even in the inevitable moments when all seems hopeless, men know that without hope they cannot really live, and in agonizing desperation they cry for the bread of hope.

Variable Name= QUOTE3
0  Disagree
1  Agree
2  Somewhat agree

This interviewee response is inconsistent with previous statements in the interview
0  Yes
1  No
4. We *all* hope. It's what keeps us alive.

Variable Name= QUOTE4

0  Disagree
1  Agree
2  Somewhat agree

This interviewee response is inconsistent with previous statements in the interview.

0  Yes
1  No
REFERENCE LIST


VITA

Deanna D’Amico Guthrie has worked in many different capacities within the field of social work. She has worked as a clinical social worker at Niles Family Services, providing low cost mental health services to children, adults, and families that live in the village of Niles. She has also worked as an academic advisor for BSW and MSW students and is an adjunct professor at Loyola University Chicago. Deanna teaches in the areas of human behavior in the social environment and practice methods, focusing on social work practice with children and adolescents. She is also the director of the Empowering Counseling Program and a clinical supervisor. This program places social work interns in schools to provide services to disadvantaged youth. Additionally, she served as editor-in-chief of Praxis, the journal in the school of social work at Loyola University. Prior to beginning the doctoral program, Deanna received a BS in psychology and an MSW from Loyola University Chicago.