



SRAETTA

Sexual Risk Avoidance Education
Training and Technical Assistance

SRAE TTA Virtual Topical Training

The Science of Hope and Its Application to SRAE Programs

Day Three

August 24-26, 2021



ADMINISTRATION FOR
CHILDREN & FAMILIES

FYSB Family & Youth
Services Bureau

Welcome and Preview of the Day



Kendy Cox

Public Strategies



Day 3

**Measuring and
Increasing Hope in
Teens to Live Hope-
Centered Lives**

The Science of Hope and Its Application to SRAE Programs

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SRAE TTA Virtual Topical Training — Day 3

August 26, 2021



DAY 3:

**BECOMING HOPE
CENTERED**



Hope Centered and
Trauma Informed®

Dr. Chan Hellman

“You Can’t Measure Hope!”

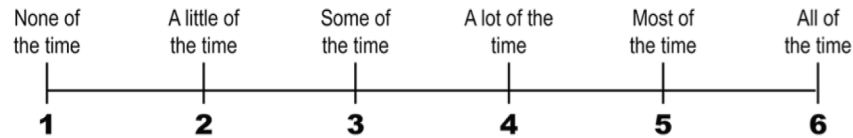
MEASUREMENT IS THE HEART AND SOUL OF SCIENCE

Hope is grounded in a robust foundation of science

- Hope is measurable: Prof. C. R. Snyder developed the self report measures.
 - Hope is distinct from Self-Efficacy and Optimism
 - Strength based (Hope vs. Hopelessness)
 - Adult Hope Scale:
 - Dispositional Self-Report Measure
 - Children's Hope Scale:
 - Dispositional Self-Report Measure
-

THE CHILDREN'S HOPE SCALE

Directions: Read each sentence carefully. For each sentence, please think about how you are in most situations. Using the scale shown below, please select the number that best describes YOU and put that number in the blank provided. There are no right or wrong answers.



- ____ 1. I think I am doing pretty well.
- ____ 2. I can think of many ways to get the things in life that are most important to me.
- ____ 3. I am doing just as well as other kids my age.
- ____ 4. When I have a problem, I can come up with lots of ways to solve it.
- ____ 5. I think the things that I have done in the past will help me in the future.
- ____ 6. Even when others want to quit, I know that I can find ways to solve the problem.

Notes: The **Agency** subscale score is the sum of items 1, 3 & 5; the **Pathways** subscale score is the sum of items 2, 4 & 6. **Hope** is the sum of the three **Pathways** and three **Agency** items. Scores can range from a low of 6 to a high of 36.

Agency Score ____ (Add items 1,3 and 5)

Pathways Score ____ (Add items 2,4, and 6)

CHILDREN'S HOPE SCALE

SCORES CAN BE ADDED TO GENERATE A TOTAL SCORE RANGING FROM LOW OF 6 TO HIGH OF 36.

GROUPING SCORES:

LOW HOPE	(6-12)
SLIGHT HOPE	(13-23)
MODERATE HOPE	(24-29)
HIGH HOPE	(30-36)

CHILDREN'S HOPE SCALE

VALIDITY AND RELIABILITY

Child Ind Res (2018) 11:1193–1200
DOI 10.1007/s12187-017-9467-6



A Reliability Generalization on the Children's Hope Scale

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Abstract The Children's Hope Scale is one of the most commonly used self-report measures of a child's future oriented goal motivation. This study presents a reliability generalization on both the internal consistency and test-retest reliability estimates for the Children's Hope Scale. While 225 published works were analyzed 4.2% authors did not report reliability estimates for their study and 10.7% induced from a previous study. The average internal consistency score ($N = 164$) was .81 (95% CI = .79 – .82) and the test-retest ($N = 15$) at .71 (95% CI = .64 – .78) respectively. An analysis of variance showed that non-English language samples produced moderately lower (albeit still acceptable) Cronbach's Alpha estimates. The results of the reliability generalization suggest the score reliabilities produced by the Children's Hope Scale are acceptable across samples. The findings of this study paired with the growing number of validation studies suggest researchers can use of the Children's Hope Scale with increased confidence.

A MEASURE IS ONLY USEFUL IF IT CAN SHOW DISTINCT DIFFERENCES BETWEEN HIGH AND LOW LEVELS

High Hope

- Mental Health:
 - Higher well-being, emotional regulation, adaptive coping
- Physical Health:
 - Improved physical health, higher compliance with treatment
- Social Health:
 - Higher social connectedness
- Education:
 - Higher GPA, attendance, graduation rates

Low Hope

- Mental Health:
 - Depression, Anxiety, maladaptive coping
- Physical Health:
 - Lower life expectancy, reduced health seeking behaviors
- Social Health:
 - Loneliness/Isolation, increased criminality
- Education:
 - Absenteeism, truancy, drop-out

WHAT DOES IT MEAN TO BE HOPE CENTERED?

BECOMING HOPE CENTERED

A hope centered organization seeks to infuse values, policy, practices, and structure with the science of hope creating an environment where both customers and staff thrive.

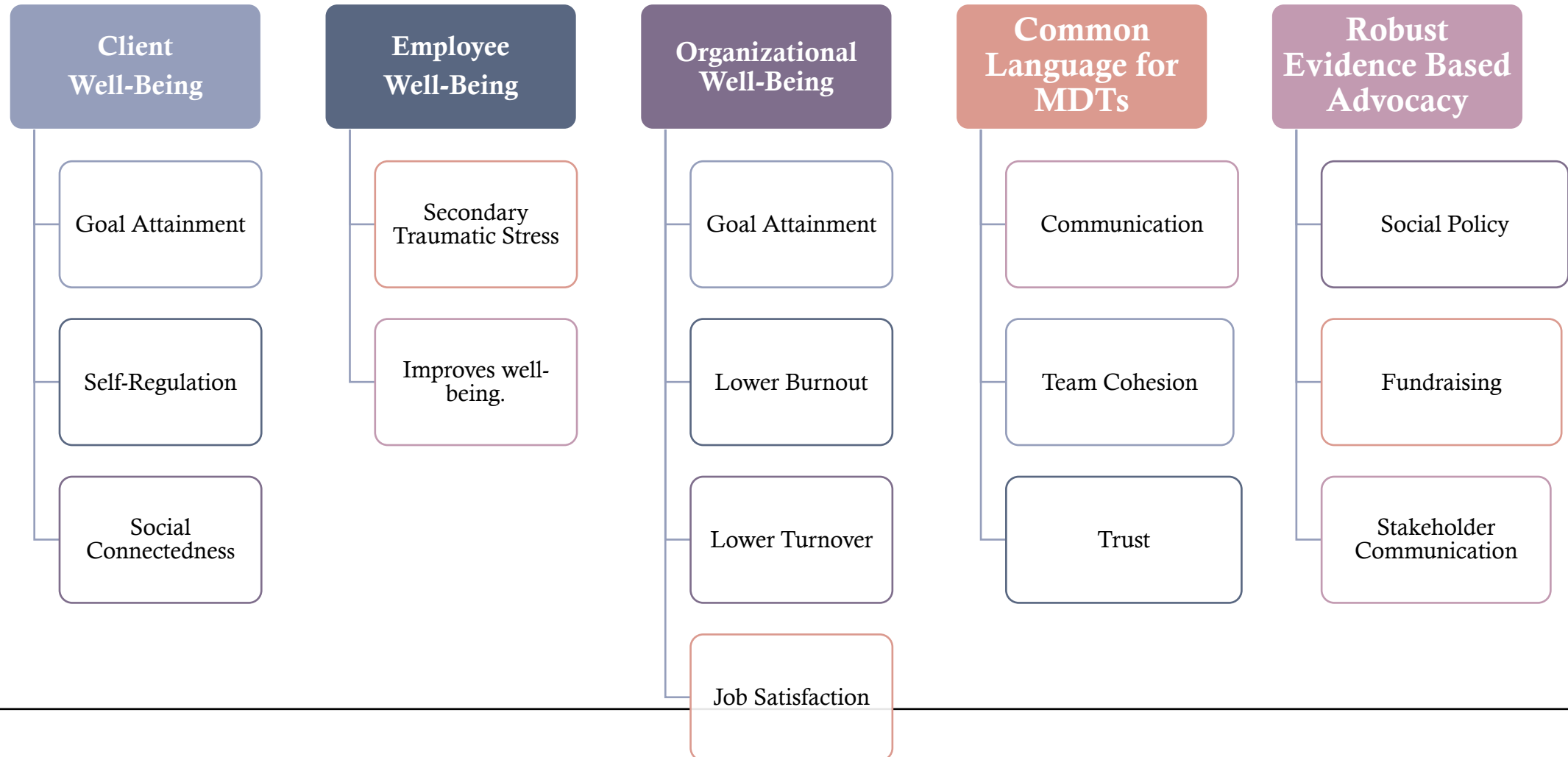
In a Hope Centered Organization,
the outcome is well-being.

BECOMING HOPE CENTERED

Hope provides a common language across multidisciplinary teams to create a positive culture grounded in:

1. Setting goals
2. Finding and navigating pathways, and
3. Supporting the willpower necessary to pursue those goals

BENEFITS OF A HOPE CENTERED ORGANIZATION



GUIDING
PRINCIPLES IN
HOPE
CENTERED
WORK



Hope is a cognition not an emotion.

Imagination is the instrument of Hope.

Hope is not wishful thinking.

Hope begets Hope.

Hope is a social gift.

Hope can be taught.

CREATING A CULTURE OF HOPE



Create an awareness
of hope among
stakeholders.



Hope becomes a
valued character
strength.



Staff meetings
incorporate a hope
agenda.



Develop hope
orientation program.



Hope Finding, Hope
Building, Hope
Modeling



Readings, book clubs,
Continuing Education.



Hope Centered and
Trauma Informed®

THE SCIENCE AND POWER OF HOPE