Clients' Hope Arises From Social Workers' Compassion: African American Youths' Perspectives on Surmounting the Obstacles of Disadvantage

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While social workers strive to build disadvantaged African American youths' resilience by improving services, rarely are those youths' perspectives included in research. In a previous evaluation of an after-school program, disadvantaged African American youths prioritized instructors' compassion and said compassion engendered hope. This study explores their connection between compassion and hope more deeply. Focusing on Snyder's hope theory, this study examines the connection between compassion and hope as individual traits (using standardized scales) and as relational, action-based experiences (using qualitative analysis of interview data). Instructor actions that youths identified as compassionate and as engendering hope were encouragement, problem solving, responsive empathy, and affirming that good choices could bring about good futures. Youths built their hope by internalizing their instructors' compassion.

IMPLICATIONS FOR PRACTICE

- Hope itself is not taught, nor is it awakened by imparting cognitive skills or coping strategies—according to youths in this study, hope is ignited by receiving compassion.

- Involving disadvantaged youths in cocreating and co-evaluating the services in which they partake affirms youths as experts about how social services foster their development.

While the psychosocial and physical hazards of growing up in severely disadvantaged environments are well documented, how children and youths manage to flourish against great odds is less well understood. For decades research has documented that supportive families are the best protection against the posttraumatic syndromes that can be triggered by traumas of poverty, community violence, and racial discrimination (Garbarino & Kostelny, 1996; Sroufe, Carlson, Collins, & Egeland, 2005), but social workers commonly encounter children and youths who face great challenges without supportive families. Recent studies (Sroufe et al., 2005) documented that social service relationships can remediate problematic attachments and build children and youths' healthy coping, yet the key factors that make such professional relationships effective in the face of multiple environmental stressors need further study (Bringewatt & Gershoff, 2010). Even more, researchers have not tended to involve severely disadvantaged children and youths in identifying what they find most helpful in social services. To respond to those needs, this article describes what disadvantaged African American youths said was key to social services' effectiveness in enabling them to surmount the challenges they faced: inspiring hope through experiencing compassion.

The study reported here is an intensive subsample of 203 African American youths who, in a participatory action, youth-led program evaluation, described what they found most meaningful in after-school social services and counseling relationships offered by the program Stand Up! Help Out! (SUHO, www.standuphelpout.org) of the Empowering Counseling Program at Loyola University Chicago School of Social Work (two of the authors of this article were members of SUHO and were youth interviewers in the program evaluation). Since the youths said giving and receiving compassion was the most valuable element in the social services, a subsample of 97 were interviewed more deeply about compassion. When those youth identified a powerful link between compassion and hope, 48 youth were then interviewed about that connection, and their answers are reported here. The current results are part of a study that comprehensively discussed the youths' description of hope and the connection between hope and compassion (Guthrie, 2011).

The participatory action approach undergirding this study has several advantages (McCrea, 2012a). Involving disadvantaged young persons as coparticipants in knowledge creation about their services has been shown to be a way to prevent social exclusion in service provision and knowledge generation, improve ecological validity of research, and increase engagement of disadvantaged youths in services (Bulanda & McCrea, 2013; Bulanda, Szarzynski, Silar, & McCrea, 2013; Macran, Ross, Hardy, & Shapiro, 1999). To the extent that their priorities differ from researchers' agendas, youths draw attention to variables that otherwise might be unseen or underemphasized (Bellefeuille & Ricks, 2010; Sabo Flores, 2008). Moreover, enlisting youths as experts avoids the negative effects on already relatively disempowered persons of treating them as "objects" (Hall, 2011).

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Stand Up! Help Out! After-School Program

SUHO is an adolescent leadership development program for African American youths on Chicago's South Side. SUHO focuses on helping youths respond actively and constructively to the many challenges of living in a poverty-level community. SUHO is youth-led: The young people actively plan program goals and activities, evaluate the program, and contribute to future program design. The program curriculum is described more completely elsewhere (Bulanda, Tellis, & Mc-Crea, under review), as is the program evaluation process (Bulanda et al., 2013). A weekly "sharing circle" enabled youths to share personal beliefs, stories, and concerns. This was also a time for the youths to give feedback about the strengths and needs of the programming, and plan for future programs. The SUHO program prioritized providing supportive counseling to young people, especially for those who reported traumas verbally or conveyed their need nonverbally (by withdrawal or context-inappropriate aggression). Instructors and counselors were MSW-level school social workers and/or graduate students in social work, supervised by a professor with more than 25 years clinical social work experience with children and youths.

Initially, the youths focused on studying and promoting alternatives to violence, and they chose compassion specifically as their theme and authored a guidebook for helping professionals (Bulanda, Kibblesmith, & Crime Teens, 2010), a workbook for peers, and several presentations on the topic. They conducted community health and safety fairs; went on college tours; developed their resumes; authored *Beyond the Stars* (a social skills curriculum for elementary school children); mentored elementary-age children; and created documentaries about peace building, sexual and romantic health, and international social work. Involving the young people thoroughly in program design, evaluation, and proposal conceptualization may have contributed to the program's appeal. SUHO program attendance rates have been consistently 90–99%, in comparison to maximum participation rates of 70–79% reported by other after-school programs (Deschenes et al., 2010). In SUHO, attendance meant that students were only allowed three absences and were expected to be punctual, carry out responsibilities, and handle peer relationships without fighting.

Prior Research About Hope and Compassion

Hope Theory

C. R. Snyder, the foremost recent researcher about hope, incorporated empirically based concepts of self-efficacy, goal-oriented motivation and behavior, and an agency-based understanding of people's inner life into his hope theory. Snyder (2002) defined hope as "the perceived capability to derive pathways to desired goals, and motivate oneself via agency thinking to use those pathways" (p. 249). Hope theory assumes that human behavior is goal directed (Snyder, 1994), and goals provide the targets for hopeful thinking (Snyder, 2002). Hopeful thought involves both *pathways* and *agency*. Pathways thinking is the planning of ways to achieve goals (Snyder et al., 1991). Agency thought is how one perceives his or her ability to carry out pathways to achieve goals (Snyder, 2002). When facing barriers to goal achievement, agency thought helps to create motivation to generate alternative pathways (Snyder, 1994, as cited in Snyder, 2002). Both agency and pathways thinking are necessary for hope and goal achievement (Snyder et al., 1991).

Hope begins to develop in infancy, as infants experience the world around them through their senses and start to see that one thing can lead to another (Snyder, 1994). By toddlerhood, children begin to perceive their actions as intentional, and they perceive they have pathways to attain their goals. Children see that by acting on the environment, most significantly their caregivers, they are able to reach their goals and thereby have a positive experience of their own agency (Snyder, 1994). As children's involvement with others outside their families grows, all the important adults in children's lives, including teachers and social workers, can help children increase their level of hope by helping them create pathways toward their goals and recognize that they can attain them (Snyder et al., 1997).

Hope undergirds resilience, making it possible for children to overcome obstacles toward achieving goals and making them more likely to respond to adversity with determination to achieve their goals (Snyder et al., 1997). Children with higher levels of hope feel more in control over positive events in their lives by connecting themselves to positive rather than negative outcomes (Snyder et al., 1997). When children experience overcoming obstacles, their level of hope increases as they realize that they can be flexible and creative in reaching their goals. Thus, hope is formed by the ongoing interaction among children's inner lives, experiences, and actions.

Although "scant research has examined the role of positive expectancies for one's future in low-income African-American children and adolescents" (Cedeno, Elias, Kelly, & Chu, 2010, p. 215), some have applied Snyder's hope theory to this population. Hope moderated some of the negative impacts of violence, specifically in the areas of self-concept and externalizing behaviors (Cedeno et al., 2010). Youths who witnessed acts of violence, but had less personal experience of violence, had higher levels of hope (Hinton-Nelson, Roberts, & Snyder, 1996). While hope agency was

positively related to academic achievement (i.e., GPA), hope pathways were not (Adelabu, 2008). Hope lessened the negative effects of stressful life events, and for children with lower levels of hope, as the number of stressful life events increased, internalizing behaviors increased and life satisfaction decreased (Valle, Huebner, & Suldo, 2006). In another study, ethnic minority youths did not have low levels of hope and could regard barriers as challenges to overcome (Roesch, Duangado, Vaughn, Aldridge, & Villodas, 2010).

Compassion

A capacity for compassion is an important foundation for teamwork, management, leadership, intimate relationships, and democratic citizenship. Accordingly, it is an important capacity for clients (as well as social workers) to develop. There is increased scientific interest in the brain bases for human compassion (Iacobini, 2008; Siegel, 2010) and in compassion from sociological (Wuthnow, 1991), philosophical (Nussbaum, 2001), psychological (Gilbert, 2005), and theological (Davidson & Harrington, 2001; Rinpoche & Mullen, 2005) viewpoints. Compassion has been recognized as central to national processes of reconciliation and forgiveness after societal trauma (Hutchinson & Bleiker, 2008). Studies of the development of lower-income youths have recognized that moral disengagement is associated with the onset of antisocial behavior in low-income youths, and conversely, compassion is associated with the development of prosocial behavior (Hyde, Shaw & Moilanen, 2010). Resilience in families stressed by poverty also is associated with responding to suffering with compassion for others (Lietz, 2011). Training in meditation can increase the likelihood that persons will engage in compassionate behavior toward those who are suffering (Condon, Debordes, Miller, & DeSteno, 2013).

Despite its importance, systematic studies of compassion's role in social services and psychotherapy are sparse, especially if one differentiates compassion from its constituents, such as empathy and unconditional positive regard, or its results, such as the working alliance (Gillath, Shaver, & Mikulincer, 2005). Compassion in psychotherapy is the openness to perceive and remedy one's own suffering and the suffering of others in a way that is nonjudgmental and nondefensive (Gilbert, 2005). Like empathy, it involves the process of perceiving the inner life and suffering of another, but compassion also includes action to alleviate that suffering (Gilbert, 2005). Compassion for others requires a solid base in compassion for oneself and a sense of safety that is usually based in early attachment relationships, making it possible to "understand, tolerate, and integrate a range of feelings" (Gilbert, 2005, p. 43). Suboptimal early attachments can be remedied by being cared for by others, as caring social service relationships appear to modify persons' acquired inner working models of attachment, with attendant improvements in social and intellectual competence (Bowlby, 1988; Sroufe et al., 2005).

Preliminary findings from SUHO about youths' compassion. While previous literature does not connect receiving compassion with engendering hope, the connection here was identified by the SUHO youths. The focus here on understanding compassion and hope came about because SUHO youths emphasized that giving and receiving compassion was the program element that meant the most to them. Then, when asked more about compassion, they said that it led to hope (McCrea, 2012b). SUHO youths described compassion in an action-oriented way, regarding it as a response to another's need, distress, and/or antagonism with emotional support (e.g., listening, accepting), affectionate outreach, insight, and/or resources (e.g., money, food, a seat on a bus). In some contexts (notably, relationships with family and friends), compassion was part of reciprocating the caring of the other ("if they do something for you, you probably want to do back 'cause you care for them so much"). Youths experienced compassion as a powerful, internal motivator: "It's the flow that pushes you" (McCrea, 2012b).

While all SUHO youths described receiving compassion, often the giver of compassion was not a family member but a friend, teacher, or the SUHO instructor. The young people remembered the loss they felt when deprived of compassion, which motivated them to choose to act compassionately: "I played with him because I know how hard it feels as a kid if no one plays with you because my family never played with me." Many youths said one has to receive compassion to give it, but some regarded it as innate: "Did you ever know anyone without any good in them?" Givers of compassion felt affirmed: "Compassion towards others makes me feel good…makes me feel that I have a place in this world." Givers also found their compassion fostered the cared-for person's development and alleviated some aspect of distress.

Youths said that receiving compassion instilled hope in the cared-for person, a finding that prompted the more in-depth study of compassion and hope reported here. The hope resulting from receiving compassion was linked to feeling cared for and valued: "I feel relief, like somebody's helping me. And then I'll be, I'll feel happy." The hope they experienced was not an optimistic attitude, but was action-oriented, in that receiving compassion helped the youths find solutions to both personal and community problems. Underscoring a connection between receiving compassion and inspiring hope, youths described being deprived of compassion as associated with despair. One young

woman who withheld her compassion from a peer victim of bullying was filled with regret:

> It actually felt pretty bad because like, when we was in sixth grade, I wasn't really with the kids that was doing it [bullying], but…I wouldn't tell anyone to stop or anything. And then like, later, during that year, she had killed herself. So then, it was like I felt like I probably could have stopped that if I had taken action.

Because the youths described their concepts of hope as engendered by relationships, including a sense of competence, and as action-oriented, Snyder's hope theory best captured the youths' experiences and is this study's theoretical foundation.

Methods

Building on literature regarding compassion and hope in part as personality qualities or traits, we examined the two variables as traits and also as relationship-based experiences. Based on findings from preliminary studies, we hypothesized that (a) there would be a direct, positive relationship between compassion and hope, in that youths with higher levels of hope would also have higher levels of compassion (operationalized as a positive correlation between scores on the Children's Hope Scale and scores on the Compassionate Love Scale) and (b) youths would regard hope as developed and sustained through compassion. This exploratory study used a convergent design (Creswell & Plano Clark, 2011) and directed content analysis (Hsieh & Shannon, 2005).

The interviewer, who was not an instructor in SUHO and only knew the young people in her research capacity, offered all the youths enrolled in two SUHO programs the opportunity to participate in this study. All the youths assented, resulting in a systematic, nonprobability sample. Saturation was reached with the sample of 48 interviewees, 40 of whom completed both the individual interview and the scales. The initial program evaluation interviews were authored by the youths, administered by the youths to each other, and were very open-ended, such as, "Can you talk a little bit about what you liked about SUHO?" and "Can you talk about what you didn't like?" The compassion interviews also were relatively open-ended (e.g., "How do you define compassion?" and "Can you give me an example of receiving compassion?"). Building on those foundations, the questions in this study's interviews and focus group homed in on compassion and hope, including, "How do you think you developed your sense of hope?" "What do you do when you are discouraged or fail?" "Are there times you feel hope-

less, 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?"

The Compassionate Love Scale, developed by Sprecher and Fehr (2005), was used to measure compassionate love for others and humanity (also see Weibel, 2007, who used it with an African American adult population). There are two 21-item scales, with one measuring feelings of compassionate love for close others (e.g., 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. Four questions were removed that did not apply to adolescents. Sample items are: "When I see family members or friends (or people I do not know) feeling sad, I feel a need to reach out to them;" "I would rather suffer myself than see someone else suffer;" and "I feel a selfless caring for my friends and family."

The Children's Hope Scale (Snyder et al., 1997) is a 6-item scale that measures both pathways (i.e., the child's ability to produce routes to his or her goals) and agency (i.e., beliefs about the ability to achieve these goals through the pathways). 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). Sample items are: "I can think of many ways to get the things in life that are important to me" and "When I have a problem, I can come up with lots of ways to solve it."

Qualitative data were coded and then analyzed using ATLAS.ti for emerging themes across interviews. Structural coding was done, which uses question-based codes for interview transcripts from multiple participants (Saldaña, 2009). The initial coding categories were based on key components of Snyder's hope theory (including agency, pathways, and goals), resulting in operational definitions for each coding category (Hsieh & Shannon, 2005). The youths' vernacular was preserved in the coding process. Codes were divided into subcodes, or combined with other codes, as meaning patterns became clear (Miles & Huberman, 1994). Then, the number of respondents for each code was ascertained. Finally, codes were distilled into themes, which displayed patterns in the data (Miles & Huberman, 1994).

Results

Sample Characteristics

The participants were 14–18 years old and 60% were female. All the youths had witnessed serious community violence; some were intimidated by gangs even as they were coming to SUHO. There were multiple drive-by

shootings at the SUHO program site every year, apparently due to increased turf wars and gang recruitment, necessitating closures of the programs for several days at a time. Police protection was inadequate, as were child protection services. The young people and their families tried to get basic needs met, such as health care, but lacked cars and faced decreasing public transportation resources. The youths saw their family members and neighbors struggle with hunger, disease, unemployment, homelessness, crime victimization, and drug abuse. The majority of youths reported violent corporal punishment from caregivers, and 50% resided with foster parents. About 30% knew someone imminently suicidal who lacked mental health care, 10% had seen a friend or family member commit suicide, and another 10% saw someone die of community violence. Despite the overwhelming and obvious need, mental health services, health care resources, and education were grossly inadequate. The valedictorians in the youths' high schools graduated reading at the sixth-grade level.

Hypothesis 1: Direct, Positive Relationship Between Compassion and Hope

The hypothesis that there would be a direct, positive relationship between compassion and hope, in that youths with higher levels of hope would also have higher levels of compassion (operationalized as a positive correlation between scores on the Children's Hope Scale and scores on the Compassionate Love Scale) was somewhat supported. Table 1 contains all the correlations.

Significant positive correlations were found between total Children's Hope Scale scores and the agency and pathways subscale scores and the Compassionate Love Scale Stranger–Humanity Version.

TABLE 1. *Correlations Between Measures of Compassion and Hope*

		1. Full Hope Scale score	2. Agency subscale score	3. Pathways subscale score	4. Compassion Stranger-Humanity score	5. Compassion Close Other score
1. Full Hope Scale score	Pearson correlation	1	.833**	.845**	.344*	.174
	Sig. (2-tailed)		.000	.000	.026	.269
	n	42	42	42	42	42
2. Agency subscale score	Pearson correlation	.833**	1	.408**	.357*	.107
	Sig. (2-tailed)	.000		.007	.020	.501
	n	42	42	42	42	42
3. Pathways subscale score	Pearson correlation	.845**	.408**	1	.223	.185
	Sig. (2-tailed)	.000	.007		.155	.242
	n	42	42	42	42	42
4. Compassion Stranger-Humanity score	Pearson correlation	.344*	.357*	.223	1	.613**
	Sig. (2-tailed)	.026	.020	.155		.000
	n	42	42	42	43	43
5. Compassion Close Other score	Pearson correlation	.174	.107	.185	.613**	1
	Sig. (2-tailed)	.269	.501	.242	.000	
	n	42	42	42	43	43

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

TABLE 2. *Youth Responses to the Relationship Between Hope and Compassion (n = 47)*

Youth response	No. of responses
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. [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
The participant wants to make those who showed him/her compassion proud.	5
Receiving compassion instills confidence, which leads to hope.	4

Note. Participants may have given more than one response.

A subscale of the Children's Hope Scale, the Hope Agency subscale, was correlated with the Compassionate Love Scale, Stranger–Humanity version. Youths with higher levels of hope were more likely to show compassion to others they did not know. In both the Children's Hope Scale and Compassionate Love Scale, the subscales were correlated.

Hypothesis 2: Youths Regard Hope as Developed and Sustained Through Compassion

All participants stated that they believed that being cared for and giving and receiving compassion gave them hope, except for one participant who responded she was unsure about the connection. Table 2 shows the youths' 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?"

All youths gave at least one of the responses in Table 2, and some youths gave responses that fit into more than one category. The majority of youths said that receiving compassion gave them hope (as opposed to the youths showing compassion to others). Underscoring the connection between compassion and hope, youths often mentioned them in the same breath: "The people that are really around [in the SUHO program], they're really hopeful and they care."

The most common explanation for how compassion led to hope (50%) was that when someone is showing compassion they are showing caring, and feeling cared for engenders hope. A representative participant stated, "If somebody cares for you, you have more hope in yourself…it pumps you up to be more hopeful." The majority of the youths felt that SUHO increased their hope because instructors gave them compassion.

Several specific elements of the compassionate relationship provided by the SUHO leaders nurtured youths' hope. Specifically, youths' hope was developed when instructors provided them with positive feedback and were accepting of mistakes:

> 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.

Receiving compassion was encouraging, which led to greater self-esteem and more hope:

> 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 keep your head up and never let it down because they want you to be somebody.

> 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.

Youths came to believe in themselves the way the giver of compassion believed in them: "If people actually care, you know, about you, and believe in you…you believe in yourself and you have hope in yourself." Receiving compassion made them strive more to achieve their goals:

> 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 instilled confidence in the youths, which helped them feel more hopeful: "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." Instructors' belief that youths could prevail was contagious:

> 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.

Without compassion, there can be no hope:

> 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.

Youths in the focus group confirmed the responses of the youths in the interviews. SUHO also gave youths hope because it offered peer support to surmount the obstacles in their environment.

According to 52% answering, "Do you feel like the After School Matters program has helped you to have hope?" mentoring younger children nurtured youths' compassion, and thereby their hope: "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 because the children's idealization of them helped them feel valued:

> 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…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.

Still others (who had career goals of working with children such as being a teacher) felt mentoring children gave them hope they could have the career to which they aspired.

Discussion

> Q: You're saying your relationship with your [after school program] instructor gives you hope—how does that work?
>
> A: Feeling alone, it's just the worst feeling. But knowing that there's somebody else in the world and that you're actually talking to, that you actually have conversations with on a daily basis, knowing that there's somebody that…has made it through what they went through, and knowing that you can, you should never use the word *can't*, but you *can* get over this, no matter what you're faced with, any obstacles, you can make it. It might just, it might take time, but eventually you can make it.

The great majority of the young people talked about receiving compassion as instilling and sustaining their hope: It caused them to feel they could accomplish goals for their futures. Since the SUHO instructors did not intentionally try to instill hopeful thought as a specific set of cognitive processes, it is clear, as the youths said, that hope naturally stemmed from receiving compassion that was manifested in encouragement, belief in the youths, helping youths to rise above defeats, being nonjudgmental, and helping the youths to give compassion to others (via peer support and also mentoring younger children). Youths internalized the affirmation from compassionate relationships, resulting in the experience of agency that Snyder identifies as key to hope.

Examining the salient features of their context sheds more light on how youths' hope required compassion to be sustained. Being an urban, African American, poor child in the United States entails continually fac-ing hazardous and traumatizing obstacles to fulfilling one's goals (Garbarino, 1998): persistent, gnawing hunger; exposure to cold because of lack of heat and clothing; frightening community violence; family stress; and often family violence. By the time the youths were in high school, they were acutely aware of their disadvantages, including racial discrimination and city and state politics riddled by corruption.

Just as serious as overt victimization, youths came to experience the wider society as a "bystander" in trauma theory (Courtois & Ford, 2009): those who perceive human rights violations occurring against innocent people but who do nothing to stop it. In sum, the experience a child can have of being in need, exposed to all these stressors, and without aid is one of not being cared for, sometimes by one's family and community, but always by people in a wider society who could help remedy their disadvantages but do not. As the youths put it, people know there are problems and do nothing. One 12-year-old commented upon hearing that a friend had been shot, "If it had been a whale, it would have been on the front page of the paper, but it's a Black kid, so no one cares."

In such a context it becomes more obvious how compassion can be affirming of hope. Compassion replaces being valueless and alone with feeling valued and cared for. Having the opportunity to elicit support as one strives to overcome obstacles and having one's strengths recognized in surmounting them were critical elements of hope. Repeatedly, the youths described how encouragement from others could keep them going so they did not give up on their goals. They eschewed hope as a belief without action, as, for instance, one initially commented, "I don't believe in hope." However, hope as active goal setting and attainment was most meaningful. The same youth said, "I had support in making better choices…now I realize my choices make my future."

Although these disadvantaged youths mentioned caring adults as important others much more than they mentioned peers, they did describe how peers impacted their sense of hope, especially because peer support reduced their isolation and provided continued support during moments of discouragement. Many youths credited friends with helping them to develop their sense of hope. The youths' statements pointed to the importance of being around like-minded peers who could encourage them even when they felt like they were not at their best. As one young man put it,

> If you don't have a strong support system, you gonna immediately feel like there isn't anyone that cares for you, 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, in order to keep teens out of trouble…that would be helpful.

Extending Snyder's hope theory, these findings can be helpful in understanding youths' experiences of awakening hope. While the youths' statements seem to affirm that "goal directed thinking almost inevitably arises in the context of other people who teach hope" (Snyder, 2000, p. 31), hope itself is not taught, nor is it awakened by imparting cognitive skills or coping strategies. According to these youths, hope is ignited by receiving compassion.

Conclusion

Young clients repeatedly told us that to persist in carrying out their goals in the face of the considerable obstacles associated with profound disadvantage requires that they feel cared for and supported as they tackle their obstacles, day in and day out. To nurture youths' hope, social workers need to offer them constant encouragement and belief in their capabilities even when the youths become discouraged, help them to create specific pathways to reach their goals, enable them to attain those goals, treat them with acceptance in the face of mistakes, care for them in times of distress, and help them experience the fulfillment of caring for others. The youths then internalize this responsiveness, and as they treat themselves as their mentors treated them, they experience much-needed hope.

Often, social services research aims to solve problems in service effectiveness by manualizing interventions so they can be applied across individuals, and studying small pieces of interventions for brief periods of time. These youths' priorities take social services research toward examining qualities in the worker–client relationship that bring about clients' experiences of feeling cared for and valued. Moreover, involving disadvantaged youths in cocreating and co-evaluating the services in which they partake affirms youths as experts about how social services foster their development, and gives social workers distinctive insights about how to be most helpful.

References

Adelabu, D. H. (2008). Future time perspective, hope, and ethnic identity among African American adolescents. *Urban Education*, *43*(3), 347–360. doi:10.1177/0042085907311806

Bellefeuille, G., & Ricks, F. (2010). Relational inquiry: A child and youth care approach to research. *Children and Youth Services Review 32*, 1235–1241.

Bowlby, J. (1988). *A secure base: Clinical implications of attachment theory*. London, UK: Routledge.

Bringewatt, E. H., & Gershoff, E. T. (2010). Falling through the cracks: Gaps and barriers in the mental health system for America's disadvantaged children. *Children and Youth Services Review, 32*(10), 1291–1299.

Bulanda, J., Kibblesmith, R., & Crime Teens. (2010). *C.R.I.M.E.: Replacing violence with compassion, respect, inspiration, motivation, and empathy*. Chicago, IL: Black Freighter Productions.

Bulanda, J., & McCrea, K. (2013). The promise of an accumulation of care: Disadvantaged African-American youths' perspectives about what makes an after school program meaningful. *Child and Adolescent Social Work Journal, 30*(2), 95–118. doi:10.1007/s10560-012-0281-1.

Bulanda, J., Szarzynski, K., Silar, D., & McCrea, K. T. (2013). "Keeping it Real": An evaluation audit of five years of youth-led program evaluation. *Smith College Studies in Social Work, 83*(2–3), 279–302. doi:10.1080/00377317.2013.802936.

Bulanda, J. J., Tellis, D., & McCrea, K. T. (2013). *Co-creating a social work apprenticeship with disadvantaged African-American youth: A best practices after school curriculum*. Submitted for review.

Cedeno, L. A., Elias, M. J., Kelly, S., & Chu, B. C. (2010). School violence, adjustment, and the influence of hope on low-income, African American youth. *American Journal of Orthopsychiatry, 80*(2), 213–226. doi:10.1111/j.1939-0025.2010.01025.x

Condon, P., Debordes, G., Miller, W. B., & DeSteno, D. (2013). Meditation increases compassionate responses to suffering. *Psychological Science, 24*(10), 2125–2127. doi:10.1177/0956797613485603

Courtois, C. E., & Ford, J. D. (Eds.). (2009). *Treating complex traumatic stress disorders: An evidence-based guide*. New York, NY: Guilford.

Creswell, J. W., & Plano Clark, V. L. (2011). *Designing and conducting mixed methods research*. Thousand Oaks, CA: SAGE.

Davidson, R. J., & Harrington, A. (2001). *Visions of compassion: Western scientists and Tibetan Buddhists examine human nature*. New York, NY: Oxford University Press.

Deschenes, S. N., Arbreton, A., Little, P. M., Herrera, C., Grossman, J., Weiss, H., & Lee, D. (2010). *Engaging older youth: Program and city-level strategies to support sustained participation in out-of-school time*. Cambridge, MA: Harvard Family Research Project and Wallace Foundation. Retrieved from http://www.hfrp.org/publications-resources/browse-our-publications/engaging-older-youth-program-and-city-level-strategies-to-support-sustained-participation-in-out-of-school-time-research-synopsis

Garbarino, J. (1998). The stress of being a poor child in America. *Child and Adolescent Psychiatric Clinics of North America, 7*(1), 105–119.

Garbarino, J., & Kostelny, K. (1996). The effects of political violence on Palestinian children's behavior problems: A risk accumulation model. *Child Development, 67*, 33–45.

Gilbert, P. (2005). *Compassion: Conceptualisations, research and use in psychotherapy*. London, UK: Routledge.

Gillath, O., Shaver, P. R., & Mikulincer, M. (2005). An attachment-theoretical approach to compassion and altruism. In P. Gilbert (Ed.), *Compassion: Conceptualisations, research and use in psychotherapy* (pp. 121–147). London, UK: Routledge.

Guthrie, D. D. (2011). *"Hope is the ticket to life": Insights from disadvantaged African American youth* (Doctoral dissertation, Loyola University Chicago). Retrieved from http://ecommons.luc.edu/luc_diss/251

Hall, C. (2011). Honoring client perspectives through collaborative practice: Shifting from assessment to reflective exploration. In S. Witkin (Ed.), *Social construction and social work practice: Interpretations and innovations* (pp. 38–71). New York, NY: Columbia University Press.

Hinton-Nelson, M. D., Roberts, M. C., & Snyder, C. R. (1996). Early adolescents exposed to violence: Hope and vulnerability to victimization. *American Journal of Orthopsychiatry*, *66*(3), 346–353. doi:10.1037/h0080185

Hsieh, H., & Shannon, S. E. (2005). Three approaches to qualitative content analysis. *Qualitative Health Research*, *15*(9), 1277–1288. doi:10.1177/1049732305276687

Hutchinson, E., & Bleiker, R. (2008). Emotional reconciliation: Reconstituting identity and community after trauma. *European Journal of Social Theory, 11*, 385–403. doi:10.1177/1368431008092569

Hyde, L., Shaw, D., & Moilanen, K. (2010). Developmental precursors of moral disengagement and the role of moral disengagement in the development of antisocial behavior. *Journal of Abnormal Child Psychology, 38,* 197–209. doi:10.1007/s10802-009-9358-5

Iacobini, M. (2008). *Mirroring people: The science of empathy and how we connect with others*. New York, NY: Picador.

Lietz, C. (2011). Empathic action and family resilience: A narrative examination of the benefits of helping others. *Journal of Social Service Research*, *37*, 254–265. doi:10.1080/01488376.2011.56 4035

Lopez, S. J., Ciarelli, R., Coffman, L., Stone, M., & Wyatt, L. (2000). Diagnosing for strengths: On measuring hope building blocks. In C. R. Snyder (Ed.), *Handbook of hope: Theory, measures, and applications* (pp. 57–85). San Diego, CA: Academic Press.

Macran, S., Ross, H., Hardy, G. E., & Shapiro, D. A. (1999). The importance of considering clients' perspectives in psychotherapy research. *Journal of Mental Health, 8*(4), 325–337.

McCrea, K. T. (2012a). "Patterns of discovery" in participatory action research from the insider's perspective. In J. Ruskus (Ed.), *Social work: Experience and methods* (pp. 13–42). Kaunas, Lithuania: Vytautas Magnus University Press. Retrieved from http://socialinisdarbas.vdu.lt/lt/system/files/Maketas_Soc%20 Darbas%209%281%29_0.pdf

McCrea, K. T. (2012b). *Lecture on choosing compassion: How severely disadvantaged African-American youth prefer the good* [Video recording]. Vytautas Magnus University, Kaunas, Lithuania. Retrieved from http://www.vdu.lt/lt/naujienos/socialinio-darbo-prof-k-tyson-mccrea-jav-paskaita

Miles, M. B., & Huberman, A. M. (1994). *Qualitative data analysis*. Thousand Oaks, CA: SAGE.

Nussbaum, M. (2001). *Upheavals of thought: The intelligence of emotions*. Cambridge, UK: Cambridge University Press.

Rinpoche, R. T., & Mullen, K. (2005). The Buddhist use of compassionate imagery in mind healing. In P. Gilbert (Ed.), *Compassion: Conceptualisations, research and use in psychotherapy* (pp. 218–238). London, UK: Routledge.

Roesch, S. C., Duangado, K. M., Vaughn, A. A., Aldridge, A. A., & Villodas, F. (2010). Dispositional hope and the propensity to cope: A daily diary assessment of minority adolescents. *Cultural Diversity and Ethnic Minority Psychology, 16*(2), 191–198. doi:10.1037/a0016114

Sabo Flores, K. (2008). *Youth participatory evaluation: Strategies for engaging young people*. San Francisco, CA: Wiley.

Saldaña, J. (2009). *The coding manual for qualitative researchers*. Thousand Oaks, CA: SAGE.

Siegel, D. (2010). *Mindsight: The new science of personal transformation*. New York, NY: Bantam.

Snyder, C. R. (1994). *The psychology of hope: You can get there from here*. New York, NY: Free Press.

Snyder, C. R. (2000). Genesis: The birth and growth of hope. In C. R. Snyder (Ed.), *Handbook of hope: Theory, measures, and applications* (pp. 25–38). San Diego, CA: Academic Press.

Snyder, C. R. (2002). Hope theory: Rainbows in the mind. *Psychological Inquiry, 13*(4), 249–275. doi:10.1207/ S15327965PLI1304_01

Snyder, C. R., Harris, C., Anderson, J. R., Holleran, S. A., Irving, L. M., Sigmon, S.T.,...Harney, P. (1991). The will and the ways: Development and validation of an individual-differences measure of hope. *Journal of Personality and Social Psychology*, *60*(4), 570–585. doi:10.1037//0022-3514.60.4.570

Snyder, C. R., Hoza, B., Pelham, W. E., Rapoff, M., Ware, L., Danovsky, M.,...Stahl, K. J. (1997). The development and validation of the Children's Hope Scale. *Journal of Pediatric Psychology*, *22*(3), 399–421. doi:10.1093/jpepsy/22.3.399

Sprecher, S., & Fehr, B. (2005). Compassionate love for close others and humanity. *Journal of Social and Personal Relationships, 22*, 629–651. doi:10.1177/0265407505056439

Sroufe, L. A., Carlson, E., Collins, W. A., & Egeland, B. (2005). *The development of the person: The Minnesota study of risk and adaptation from birth to adulthood*. New York, NY: Guilford.

Valle, M. F., Huebner, E. S., & Suldo, S. M. (2006). An analysis of hope as a psychological strength. *Journal of School Psychology*, *44*, 393–406. doi:10.1016/j.jsp.2006.03.005

Weibel, D. T. (2007). *A loving-kindness intervention: Boosting compassion for self and others* (Unpublished doctoral dissertation). Ohio University, Athens, Ohio.

Wuthnow, R. (1991). *Acts of compassion: Caring for others and helping ourselves*. Princeton, NJ: Princeton University Press.

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