

Instilling Hope in the Lives of Adolescents in a School Setting

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Abstract

Hope is an important psychological strength and acts as a protective factor during challenging and uncertain times in life (Marques, Lopez et al., 2011; Snyder, 2002). Hopeful individuals benefit from this attribute as it impacts their lives in positive ways and provides the impetus for important change to take place (Ho et al., 2011; Larsen & Stege, 2010; Snyder, 2000). Schools are not only responsible for the academic development and needs of students, but also the social and emotional aspects of their well-being. Research strongly indicates that hope is created alongside caring, trusting, and secure relationships with adults, such as parents, caregivers, mentors, teachers, and counsellors, where hopeful thinking is supported, encouraged, and modelled (Jian et al., 2013; Munoz et al., 2019). This paper looks to better understand how the development of hope can be supported with youth in a school environment and through therapeutic interventions with a school counsellor. Important hope-based interventions are discussed as well as school-wide initiatives that contribute to a hope-fostering school environment where youth are understood and adequately supported in the development of hopeful thinking.

Keywords: hope, adolescents, school-based services, school counselling, goal-setting, hopeful mindset

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Hope is defined as a cognitive mindset that is made up of goal setting, agency, and pathways to reach identified goals set by individuals (Snyder, 2000). Through this research, I aim to better understand the important role that hope can play when counselling adolescents. Specifically, as a school counsellor, I want to understand how hope can be used in therapy to help youth become more confident, excited, and motivated about what their futures might hold. Both generally and broadly, I want to explore when and where the concept of hope is appropriate to use and how it can benefit both students and school counsellors. Furthermore, I want to better understand how school communities can support the development of hope in youth, the role of the school counsellor, and the most effective therapeutic modalities that increase and support the development of hope in youth.

Research shows that all people are capable of hopeful thinking (Lopez et al., 2000). In my future work as a school counsellor, I want to know how hope can be nurtured and supported to help youth develop a more optimistic orientation to life by accessing their own strengths and competencies. By helping youth clients focus on their positive qualities and by teaching them explicitly about hopeful ways of living, I intend to provide a healing and helpful counselling environment for my adolescent clients at school. Through research on hope, I want to better understand how hope can help adolescents manage tumultuous years and act as a protective barrier to their mental health. The years of junior high and secondary school can be challenging for some, and I want to know how hope-based interventions can help this population develop important skills and strategies to help them cope with difficulties and live meaningful and hopeful lives. Specifically, I want to better understand what can be done in schools to increase the amount of hope in all students and the role that a school counsellor may play in the creation of a hopeful school environment.

I will begin by describing my own personal position in the research and my own journey with hope. This is to ensure that I can recognize my own biases and further develop an

understanding of my own experiences with hope, as hope can be experienced in different ways. As a school counsellor, I need to be aware of my own personal beliefs and understand how these beliefs support my work with students. I believe that hope is created and maintained alongside caring and supportive relationships, and I must be cognizant and sensitive to ensure that I do not place my own personal beliefs about hope onto the experiences of adolescents. I need to understand that the adolescents I work with will have their own lived experiences of hope, and I will work to honour those. My personal beliefs about hope will be further discussed in the self-reflexive statement. I will share my journey with hope and how hope helped me to adapt and change with the unpredictable challenges I faced. During times in my life, when I felt hopeless, I have come to understand I was missing important factors that create hope, and as a result, my mental health suffered.

In the literature review section, I begin by providing an in-depth definition of the term hope. This is important as hope has a long history and is a term that has been used for many years across religions, among philosophers, and in everyday life. Specifically, I review C. R. Snyder and colleagues' (1991) conceptualization of hope as it is a widely used model to understand the multidimensional aspects of hope, and I apply this overarching definition of hope to schools and the work of school counsellors. The scales used to measure the amount of hope an individual has will be explained, as will the impact of having high amounts of hope versus low amounts of hope. In order to further understand hope, I explain how it is different from other positive psychological constructs such as optimism. The benefits of a hopeful mindset are discussed as well as how a hopeful mindset can positively impact a developing adolescent's mental health. I examine attachment and parenting styles and how they contribute to the development of hopeful thinking in children and adolescents. Risk factors that impact and decrease one's feelings of hope are reviewed as well as the protective factor that hope plays in an adolescent's life. The roles of schools and school counsellors working in diverse

environments to increase hope are shared, and finally, hope-based interventions that school counsellors can use are summarized.

Following the literature review, I apply the concept of hope to a school environment to illustrate different ways that schools and school counsellors can foster and cultivate a more hopeful mindset in their students. I discuss the role of the school counsellor and the interventions they can use in a school to increase hope in all adolescents. School counsellors can also implement programs that help to bridge the adolescent's guardians and school together to support the development of hope. Finally, I discuss important hope-based interventions and approaches that can be used by a school counsellor to facilitate hope in and with students.

As hope leads to better mental health outcomes and acts as a protective barrier for adolescents (Snyder, 1995, 2000) school counsellors should be aware of how to increase hope in this population of students. Implications for school counsellors include the importance of a school environment where hope is created through secure and caring relationships with families, parents/caregivers, mentors, teachers, and counsellors. School counsellors need to be aware of hope-based interventions that can be used in counselling to increase the hopeful thinking of youth. Furthermore, school counsellors need to be able to educate youth, as well as the school community, about hope and the importance and need for hope as part of the school culture. Recommendations for future research are discussed, and areas for further understanding are highlighted. Recommendations for school counsellors are highlighted. This includes the need for school counsellors to have a clear understanding of hope-based interventions that can be used in counselling as well as school-wide programs that increase resilience and hope in students. Lastly, I offer my reflexive self-statement and how the learnings I gained in doing this research changed and shaped my understanding of hope, particularly in the role of a school counsellor and how a school environment can help to increase hope in an adolescent's life.

Self-Positioning Statement

I have a long and intimate history with hope. My journey with hope began with the birth of my daughter in 2010. Up until that point, my hopes in life had included wishes and expectations of becoming a collegiate athlete, getting married, having a family, and having a successful career and living a happy life. The way I conceptualized hope was based on the belief and feeling that I was in control of my life and it was up to me to make these things happen. I felt like I was a strong individual, independent, and in control of my destiny. I enjoyed the process of goal setting, and I was capable of finding ways to make these goals come to life. I had a sense of personal agency, and I was able to generate hope from within, needing only myself, my goals, my plan, and my motivation to reach my goals.

At different times in my life, hope was also created by the people I was surrounded by. My family growing up as well as friends and the community that I was a part of contributed to my overall sense of hope by supporting me and helping me to realize my goals and dreams. I grew up most of my life feeling a sense of hope, and as a result, I was confident and had a healthy sense of esteem and benefitted from the positive impact of hope.

This all changed for me in 2010 at the age of 33. I always hoped to have a daughter and after having two spirited and lively little boys, I knew that I wanted to have a girl. When I found out that I was pregnant with a baby girl, I was absolutely elated. I felt that I had been given more confirmation that I was in control of my life and that the future was in my own hands. This all changed days after my daughter's birth when we were delivered the worst news of our lives: she was diagnosed with a rare and incurable illness with a life expectancy of 2 to 5 years of life. I had lost my sense of control, and my hopeful orientation had been replaced with despair and shattered dreams. Hope shifted and changed throughout my daughter's battle against her illness. In the early days of her life, I hoped for a cure. I wanted her to stay alive, and I was willing to do anything that needed to be done. This optimism and hope pushed me beyond my limits and motivated us to go ahead with a very risky stem cell transplant as the only treatment

option. The doctors also shared the same hope and believed that this could help our daughter live a better life, so we went for it. Hope lived in the hospital with us for the entire duration of the stem cell transplant which took 6 months, after which my daughter was discharged and taken to the children's hospice. My hope pushed me spiritually, physically, and emotionally beyond anything I could have ever imagined in those days as I hoped that the stem cell transplant would improve her quality of life. My daughter ended up in the ICU after 6 long months of chemotherapy, and while waiting for her blood cell count to come back up, we were introduced to Canuck Place Children's hospice. This hospice provided me with a new sense of hope, but a more mature and realistic one. The requirement for family intake at Canuck Place Children's Hospice is that the family's child will likely pass before reaching the age of 18.

In processing why we were so fortunate to be recipients of all the love and support that this hospice and community offered, I realized that a cure for my daughter was not possible. Hope changed. I came to understand that hope meant keeping my daughter comfortable. As her disease progressed and her little body began to succumb to the grips of her illness, my sense of hope shifted again. I now hoped for something that I never dreamed I would ever hope for. I hoped that my daughter would die peacefully and without suffering. I hoped that she would die in my arms surrounded by her family feeling loved and cared for. I hoped for fresh air, sunlight, and peace as she took her last breaths. I hoped that she would die feeling the overwhelming amount of love that we felt for her. When my daughter took her last breath, I, for the first time in my life, felt hopeless, the darkness returned, and I could no longer see.

In my family of origin, I was not raised with a religious background of any kind, nor was I raised in a family that adopted a spiritual worldview towards life as a way to make sense of life's underlying meaning and purpose. I did not grow up in a family where we contemplated our existence or wondered openly about what would happen when we died. In my family of origin, we did not view life as being connected to others and in need of others to live a meaningful life.

In my own life, I have come to believe very strongly that we are all connected to one another and because of the social nature of humans, we need other people to survive. In fact, we cannot survive on our own. I believe that our interconnectedness is paramount to our psychological well-being. I have come to this belief because, when my daughter passed, I craved interconnectedness more than anything, and unfortunately, lost most of my connections as my friends and family who did not know how to support me through such a tragedy “gave me space” and left me to grieve all on my own. Outside of my husband and surviving children, there were few people who showed up in my life unconditionally, with open arms.

As a result of this lived experience, I came to realize that hope is derived and cultivated by the social community you are a part of. Hope is born through genuine connections with other people in your family and community. I learned this the hard way and came to realize that few people in my family (of origin) and friend networks had the capacity to fill me up with hope of any kind. I felt alone during this time in my life as the people who I was surrounded by could not connect with me in the way I needed, and I felt isolated. The lights went out, and I needed someone to illuminate that path for me as I could no longer do it on my own. When hopelessness was present in my life, hope became the work of the people who I was surrounded by, and in my despair, I needed people to lift me up and help me find hope again.

I believe that everyone has a different journey with hope, and my experience with hope might be different from the population that I wish to further understand. Hope shifted throughout my entire journey with my daughter and her battle against her illness, but hope was what kept me alive throughout my time with her. The specificity of my personal beliefs about hope, based upon my lived experiences, informs my understanding of hope; however, I am cognizant that my experiences of hope as a mother with a terminally ill daughter might be different from the experiences of adolescents in school. My personal experiences with hope occurred while caring for my daughter through a terminal diagnosis, her impending death, ensuring that she died in

peace and with dignity, and then somehow picking up the pieces after she died and continuing to live the rest of my days.

My hope when she was born was for her to be cured and to live a long and healthy life. That hope shifted to a better quality of life, and maybe a longer life with the help of a stem cell transplant. As her disease progressed, my hope shifted to what made sense at the time. Hope was achievable every step of the way and although it did not cure my daughter, it was the strength I needed to keep us going. When she died, my hope turned to hopelessness, and I needed support from other people through the form of genuine connections and care. Despair had set in, and my mental health began to greatly suffer. Hope didn't take away my pain, nor did it save my daughter. Hope allowed me to make sense of and manage the overwhelming amount of grief and emotions one small step at a time. It was the most human I ever felt and the most vulnerable I had ever been. Life was out of my control, and I had a choice to make. I could continue living, or I could succumb to despair. I clung to the things that gave me hope: my daughter's legacy, my living kids, and my husband. We did hope together.

My personal journey with hope as a mother with a terminally ill child will be different from an adolescent population in a school setting. As I develop a clear understanding of where I am positioned in my topic, I have a deeper awareness of where my biases might surface and guide my beliefs about hope in my work with students as a school counsellor. Through this research, particularly as related to my own aspirations as a school counsellor, I want to further understand what contributes to hope and how to increase hope in an adolescent population. As research shows that hope improves mental health outcomes, I want to know how to help youth increase their hope during difficult times and how I can help them transcend their challenges so that they can focus on hope and its life-giving characteristics. I want to teach adolescents explicitly about hope so that they have an awareness of hope and can recognize the role it plays in their lives. Furthermore, I want to show people how having a sense of hope is important for their well-being

and how living without hope is something that I want to protect youth against and teach them how to find hope, even during their most challenging times.

Literature Review

Hope is a historical concept that has been around for centuries and is used in different religions, in different cultures, by philosophers, and individuals in everyday life. Hope is a concept fundamental to the beliefs of the Christian Church and is also used as a folk term for everyday people (Hoover-Kinsinger, 2018). While some view the concept of hope as an illusion and an unrealistic way of thinking (Snyder, 2000), others view it as a concept and a belief that they rely on during challenging times. Perhaps the most famous story of hope comes from Greek mythology when Zeus took revenge on Prometheus who stole from the gods (Snyder, 2000; Snyder et al., 1991). To get revenge, the maiden Pandora was sent away with a locked box and was told never to open it. Pandora was overcome with curiosity, and one night she opened the box only to release a collection of suffering and despair in the form of the plague, illness, envy, revenge, loss, and greed (Snyder, 2000; Snyder et al., 1991). When she hurried to put the lid back on, she saw that the only thing remaining inside the box was hope. This parable, specifically the notion of hope being at the bottom of the box, has been used to understand the role of hope in an individual's life for millennia.

School counsellors can play a role in contributing to the development of hope in a school by helping students and other professionals in the school building learn about the active process of building hope. School counsellors can play a teaching role, helping adolescents set and pursue meaningful goals (Snyder, 1994). Research indicates that hope plays an important role in the lives of adolescents, and hope is a skill that can be taught in schools (Snyder et al., 2002). School counsellors play a large role in educating school staff, students, and parents about the role of hope in an adolescent's life, as well as the positive impact it has on their development. School counsellors can use hope-based interventions in a one-on-one counselling context or in a targeted group counselling setting. School counsellors can also implement

school-wide programs that continue to support hope building by providing opportunities for adolescents to learn the principles of goal-setting and to find pathways to reach their goals and the motivation to persevere (Snyder et al., 2003). These school-wide interventions can help to create a more hopeful school environment with the intention of increasing the hope of all adolescents at the school. All students are capable of developing a more hopeful mindset, and school counsellors can lead the school community in this pursuit.

Snyder's Conceptualization of Hope

A widely used hope model and assessment tool was developed by Snyder and his colleagues (Gallagher et al., 2019). Snyder et al. (1991) developed a theory of hope defined as a mental mindset and a way of thinking that is made up of goals, pathways, and agency. Snyder wanted to better understand the concept of hope in more detail as hope was historically believed to be experienced as a hoped-for wish of a future event or outcome (Snyder, 1994, 2000). Snyder (2000) strongly believed that hope is more than that and thus looked closely at people's thought processes to better understand the process of hope. He proposed that hope is a way of thinking and cognitive processing (Snyder et al., 1991) and is a skill that can be developed over time (Umphrey & Sherblom, 2014). Goals guide people's thoughts and behaviours, and these goals are accompanied by motivation (agency) and planning (pathways). He also realized that hope is an emotional state and consists of motivation, persistence, and belief (Snyder et al., 1991). When combined, these elements form the basis of hopeful thinking (Snyder, 2000).

As humans are inherently goal-directed and are always planning and thinking about the future, goal setting is not enough to develop a hopeful thinking mindset. Snyder (1995) believed that we need a degree of self-control to help us stay motivated to reach our goals and the ability to think of different routes or pathways when we get stuck. As a result, he defined hope as having the cognitive energy and the pathways to reach identified goals (Snyder, 1995).

Therefore, as mentioned above, hope is a cognitive framework that consists of goals and agency and the pathways to reach these goals (Snyder, 1995).

Measuring Hope

In order to better understand hope, Snyder (2002) wanted to clarify whether an individual's hopeful thinking was situation-specific, trait-like, or a combination of the two. Trait hope is used to understand and measure the amount of dispositional hope that a person has which is the amount of hope measured across all areas of the individual's life (Cheavens & Ritschel, 2014). Dispositional hope, in turn, is the amount of hope that a person inherently carries with them. Situation-specific hope is when hope might be more significant in a specific domain (such as a career) and lower in other domains (such as relationships; Gallagher et al., 2019).

Snyder developed three scales to measure individual differences in hope: the Trait Hope Scale (adult version), the State Hope Scale (adult version), and the Children's Hope Scale (CHS). To measure trait hope, Snyder and his colleagues (2000) developed the Trait Hope Scale. This scale is used to measure and understand the amount of hope that an individual inherently possesses. It measures the amount of goal-directed thinking across all types of situations (Gallagher et al., 2019; Snyder et al., 1991). An individual who has trait-like hopeful thinking is an individual who has learned this type of pathway and agency thinking in their early years, and therefore this scale measures the individual's ability to maintain hopeful thinking across different contexts and environments (Cheavens & Ritschel, 2014; Snyder, 2000). The other measure of hope is the State Hope Scale, and this scale measures an individual's hopeful thinking in a given moment of time as well as the individual's changes in hope over time (Cheavens & Ritschel, 2014; Snyder, 2000). And finally, the CHS measures a child's perception of their ability to meet their goals (Gallagher et al., 2019). The CHS scale measures hope in children who are 7–16 years of age, and this scale specifically looks at agency (motivation and belief in themselves) as well as pathway thinking (ability to make a plan to reach their goals) to

determine the level of hope children have (Gallagher et al., 2019). The CHS “describes how children think about themselves and how they do things in general” (Snyder et al., 2002, p. 269). When hope is measured using these scales, the number scored correlates to the amount of hope the individual possesses. Those individuals who score high are therefore reported as having high levels of hope, and those who score low are reported as having low hope.

Measuring an adolescent’s level of hope allows the school counsellor to understand the relationship between hope and other psychological constructs. As measured by the hope scales, people with higher hope are found to have greater coping mechanisms, an internal locus of control, and a greater sense of well-being (Snyder, 1995, 2000). On the other hand, adolescents who report low levels of hope are more likely living with depression, anxiety, and other negative emotions (Snyder et al., 2002).

High Hope and Low Hope

There are many psychological benefits of having a hopeful mindset, and overall, individuals with higher amounts of hope cope better in life than do those with low amounts of hope (Snyder, 2002). There are certain skills and mindsets that high hope people possess that allow them to experience greater successes. For example, those with higher hope have the skillset to implement positive self-talk through challenging times. Furthermore, they view personal challenges and setbacks as opportunities for growth and learning and have the confidence and agency to think of creative ways to achieve their goals when goals are not being reached (Cheavens & Ritschel, 2014; Snyder, 2002; Weingarten, 2007). Individuals with high hope take a curious approach to their challenges and view the situation with an open mind which allows them to adjust and persevere (Snyder, 2000; Snyder et al., 2002). Furthermore, when it comes to reassessing their unmet goals, higher hope individuals tend to have the skillset to creatively think of different approaches to reach their goals (Snyder, 1995). Furthermore, higher hope individuals set more difficult goals and experience less distress in the process of pursuing their goals (Snyder, 1995). In areas of healthy living, higher hope people

seek out healthier behaviours by choosing to engage in physical exercise, choose healthier eating habits, and are more likely not to smoke (Corn et al., 2020; Snyder, 1995).

On the other hand, low hope individuals often have an overall negative emotional mindset (Gallagher et al., 2019; Snyder, 2000). Decreased hope causes them to be uneasy and uncertain about the process of making goals, and they often believe that they are unable to achieve the goals that they set for themselves (Snyder, 2002). Their self-talk is often unhelpful and consists of thoughts such as “I can’t” and “this is too hard for me,” and these negative thoughts decrease the chances of the individual following through on their goals which sets up a negative feedback loop (Gallagher et al., 2019; Snyder, 2000). Low hope people lack the motivation and perseverance to achieve their goals when faced with setbacks or barriers (Gallagher et al., 2019). These setbacks produce a sequence of negative emotions and unhelpful thoughts, which cause the individual to ruminate about their lack of success rather than thinking about the positive learning opportunities present in their challenges (Codutti & Schoen, 2014). Those who have low hope lack the agency to persevere through setbacks by thinking of different pathways to reach their identified goals (Gallagher et al., 2019).

Hope and Optimism

Optimism and hope are two different constructs that need to be delineated from one another in order to understand how they are both utilized as psychological strengths. Although they are similar, they are accessed at different times in life. Scheier and Carver (1985) described optimism as the expectation that good things will happen. Seligman created a different understanding of optimism in his positive psychology approach; Seligman posited that optimism is an internal strength that fortifies the individual and is accessed when coping in stressful situations (Shatte et al., 1999). Learned optimism is an individual’s ability to describe and frame a bad situation or event that has happened to them as something valuable and more positive (Shatte et al., 1999). Optimistic people believe and expect good things will happen to them (Carver & Scheier, 1999; Carver et al., 2010).

Comparatively, the concept of hope is distinctly different from optimism. Hope is a learned skill that places an emphasis on agentic thinking in which the individual views themselves as capable and autonomous (Cheavens & Ritschel, 2014). Hope is a better predictor of psychological health and well-being because hopeful individuals are able to successfully implement a goal-setting process and access a growth-oriented mindset to reach their goals even when setbacks and challenges make their goals difficult to achieve (Cheavens & Ritschel, 2014).

The origins of these two constructs are still not completely understood (Fletcher, 2020; Otis et al., 2016). Hope and optimism are both traits of individuals that are learned in one's environment and are also traits that may be inherited (Fletcher, 2020). Studies show that hope and optimism are learned at a young age through secure attachments with a parent or caregiver (Otis et al., 2016; Snyder, 2000). When a child has secure and consistent relationships, they learn early in life that the world is secure, and they build an internal belief based on this (Carver & Scheier, 1999). Optimism is thought to be a way of thinking that can be passed down from the child's caregivers and contribute to their personality, similar to traits such as neuroticism and extraversion (Carver & Scheier, 1999). School counsellors can teach adolescents how to be optimistic by modelling optimistic thoughts and teaching them how to reframe negative thoughts. Optimism is a skill that makes up an important part of developing a more hopeful mindset, and students can learn how hope and optimism work together and the role that optimism has in developing hope.

Commonalities and Differences

Hope and optimism are both future-oriented, goal-driven constructs and are both associated with higher levels of well-being (Carver et al., 2010). Optimism and hope are similar because they are both agentic ways of thinking (Clement et al., 2020). Optimistic thinking occurs when the individual values the goal and believes that the goal is essential to them. This value gives the individual the motivation to follow through on their goals (Snyder, 2002). Another

example of this agentic thinking is the idea that optimistic people are more active in the goal setting process. Furthermore, when their goals do not go the way planned, optimistic people are more likely to continue to pursue their goals rather than withdraw and quit (Carver et al., 2010). Optimistic people have more confidence and expect that they can reach their goals and follow through on achieving them.

Hope and optimism work well together when there is a higher probability of reaching one's goals. However, when the goal becomes difficult to achieve, hope is the quality that perseveres in uncertain times. In these unpredictable and shifting situations, hope is the quality that is needed so that the individual can carry on even though the expectations of reaching their goals are far-fetched (Bury et al., 2016). When people are faced with serious life challenges such as illness, childbirth, caregiving, and big life transitions, optimists are able to recover quicker and experience less distress than those who have a more negative outlook on life (Carver & Scheier, 1999). When looking at how this is different from having a hopeful mindset, hope involves more than just a positive expectation. Bury et al. (2016) state that hope and optimism are conceptually different and "hope is not a mere derivative of expectation or confidence in obtaining one's hoped-for goal, rather, hope may be what individuals turn to when the prospect of obtaining their personally significant desire is unclear" (p. 598). For those working with adolescents in school counsellor roles, this is important to consider because hope is something that can be learned and can help adolescents cope with challenges and difficult times in life (Cheavens & Ritschel, 2014).

Benefits of Hope

Snyder's theory (Snyder et al., 2003) defines hope as experienced when people set goals, find the mental energy to reach their goals, and persist and persevere if they come up against roadblocks, setbacks, or barriers. A hopeful mindset allows the individual to think of alternate pathways to continue to reach the desired goal. As goals are reached, the individual is rewarded with positive emotions that reinforce their ability to set goals and achieve them, and

these emotions further motivate the individual in the goal setting process (Gallagher et al., 2019). Feedback is also received, albeit in a negative sense when their goals are not met and the individual is flooded with the opposite sense of success, when they are blocked by perceived barriers and unable to reach their desired goal.

People who have high amounts of hope enjoy pursuing goals and pursue them with a positive emotional mindset (Snyder, 2002). They are positively rewarded, set realistic goals, and have the means and the motivation to reach their goals. This feedback loop continues to reinforce this process positively and increases their motivation and sense of personal agency (Snyder, 2002). Furthermore, this mindset contributes to cognitive resilience as the feedback loop continually reinforces the individual to continue thinking of pathways and feel motivated about their goals (Snyder et al., 1991). Higher hope people tend to be attracted to positive and constructive information and discussions, whereas low hope people are the opposite. Those who have low levels of hope tend to focus on the negative aspects, and they often ruminate and get stuck on negative thoughts and emotions (Gallagher et al., 2019; Snyder, 2000). Higher hope individuals also cope better with psychological and physical stressors as they have the mindset necessary to tolerate pain for a more extended period of time (Snyder et al., 2005). This mindset contains the cognitive skills of goal-setting, motivation, and optimistic outlook to continue and persevere despite their pain to achieve their goals (Snyder et al., 2005).

Hope has also played a role in the process of posttraumatic growth for patients recovering from cancer surgery, where those with higher levels of hope and optimism experienced positive psychological changes and healing from posttraumatic growth (Ho et al., 2011). In a study of patients recovering from spinal surgery, people who had higher levels of hope could adjust faster to the changes after surgery (Brazeau & Davis, 2018). In populations of people living with mental illness, higher levels of hope can help in the recovery process due to the benefits of hopeful thinking (Park & Chen, 2016). Higher levels of hope help people with illnesses as they report feeling less pain and are able to come up with more strategies to cope

with their pain (Snyder, 2002). Furthermore, those with higher hope ruminate less about their pain than those with lower amounts of hope (Hood et al., 2012).

Hope can be impacted by challenging circumstances. For example, in a group of traumatized veterans, the damage caused by posttraumatic stress disorder (PTSD) diminished their sense of hope (Levi et al., 2012). In their challenging and stressful times, hope empowered these veterans, but they also revealed some deep learnings about hope. They realized that there are significant limitations in life that one needs to be aware of; otherwise, individuals might become broken by their reality. This changed their sense of hope as it forced them to make sense of their realities, which helped strengthen and empower them (Levi et al., 2012). This study also defined hope as either an active and conscious belief or an unconscious belief (Levi et al., 2012). When life is going well, and the individual is established and protected, hope is unconscious (Levi et al., 2012). However, when life presents extreme circumstances and challenges, hope becomes more of an active effort where the individual needs to seek goals, pathways, and agencies that make sense and that contribute to a more hopeful mindset (Levi et al., 2012). In cases where individuals live with PTSD, hope and feelings of self-efficacy decreased the development of PTSD in individuals (Gallagher et al., 2019). The skillset and mindset that individuals have before a traumatic event can act as a protective barrier and minimize the psychological damage caused by PTSD.

Hope has essential benefits in children and adolescents. High hope individuals report better academic outcomes, athletics, physical health, illness recovery, and psychotherapy treatment outcomes (Snyder, 2002). Higher hope individuals engage in health-promoting behaviours, are less likely to smoke, and are more likely to eat healthily and exercise (Corn et al., 2020). Hope plays a vital role in the lives of collegiate athletes and their successes as an athlete and at school. Curry et al. (1997) found that male and female athletes were higher in different measures of hope than nonathletes, and higher levels of hope predicted higher semester grade averages as well as overall self-worth and confidence.

In academic achievement, adolescents with higher levels of hope performed better in standardized testing (Marques, Pais-Ribeiro et al., 2011) as their hopeful mindset decreased their anxiety when writing a test (Snyder et al., 2003). This decreased anxiety to test-taking was a result of the skills that higher hope adolescents learn about how to constructively use feedback to improve test writing (Snyder et al., 2003). Adolescents with higher levels of hope also experienced more meaningful relationships with other people and healthier physical and mental health outcomes (Marques & Lopez, 2014). Adolescence is a time of growth and change, and hope plays an essential protective barrier. For example, hope in adolescents contributes to resilience when faced with difficult life experiences (Valle et al., 2006). Hope also increases an individual's sense of autonomy as it teaches important skills that allow an individual to feel a sense of personal agency. This hope increases children's feelings of resiliency as they feel equipped with the right set of tools to face challenges and setbacks (Mullin, 2019).

Origins of Hope in Adolescents

Attachment

With a deeper understanding of hope as defined by Snyder (2000), along with a sense of its benefits and utility, it is important to understand the origins of hope and how hope develops in the course of childhood and adolescence. Hope is a cognitive construct that all people can learn; therefore, how do adolescents develop a strong, hopeful mindset? Research shows that parental attachment in their family of origin plays a vital role in developing hope in an individual beginning at an early age (Jiang et al., 2013). The work of John Bowlby (1988) in his book *A Secure Base* speaks about the importance of having a secure attachment to a primary caregiver as it provides the basis for all future healthy relationships. A secure attachment forms when an infant realizes that their primary caregiver offers a safe base for them to explore and return to for comfort and care when needed (Bowlby, 1988). As children grow and continue to feel that their base is secure, they can continue to venture out into the world and begin taking risks and

responding and engaging with the world with the understanding that it is safe (Bowlby, 1988). Additionally, Bowlby wrote about the important role that parents and caregivers have in providing a stable home where the children receive significant amounts of their attention and time, which results in healthy and autonomous adolescents due to the parent or caregiver's devotion (Bowlby, 1988).

Adolescents who are securely attached to their parents or caregivers have higher levels of hope, whereas adolescents who have insecure attachments with parents have a lesser degree of hope (Jiang et al., 2013; Otis et al., 2016). This secure attachment continues to be important in adolescents' lives as the cognitive framework is internalized. This helps protect them throughout their turbulent adolescent years, mainly because adolescents begin to shift away from their primary caregivers and towards their peers (Jiang et al., 2013). As hope originates when adolescents feel a sense of control in their lives, it is clear that hope is heavily influenced by external factors such as a trusted parent or mentor (Munoz et al., 2019). When adolescents feel adequately supported in their goal pursuit, they report higher levels of hope and greater life satisfaction (Munoz et al., 2019). Furthermore, youth placed in a residential care home and paired with a mentor and role model benefitted from the positive impact of attachment on hope development. The adolescents reported a more significant amount of hope due to this secure attachment (Sulimani-Aiden et al., 2019). The secure attachment provides the basis for learning goal-directed thought and the components of hopeful thinking such as agency and pathways (Snyder et al., 1997). A secure attachment is therefore linked to hope as parents and caregivers can be influential in shaping and teaching the behaviours and beliefs that contribute to the development of a hopeful mindset (Jiang et al., 2013). Furthermore, these secure relationships in childhood continue to influence the child well into adolescence and contribute to their overall feelings of life satisfaction (Jiang et al., 2013).

Parenting Styles

In addition to a secure attachment, parenting style plays a vital role in developing hope (Shorey et al., 2003). Baumrind's (1966, 1971) seminal research on parenting identified three parenting styles, each with unique characteristics and outcomes: permissive, authoritarian, and authoritative. An authoritative parent provides a secure, firm, and caring environment and contributes to a secure attachment. Research shows the importance of an authoritative parenting style and that this parenting style contributes to a stronger relationship over authoritarian and permissive styles of parenting (Baumrind, 1975).

The skills that are modelled and taught by an authoritative parent are skills that are important in the development of a hopeful mindset. For example, authoritative parents make space for their children to be autonomous yet responsible (Baumrind, 1966). This type of parent communicates their adult perspective and expectations but recognizes, understands, and respects that the child has their own unique interests and their own way of doing things (Baumrind, 1966). Authoritative parenting prepares the child for their environment by placing responsibilities and expectations in an age-appropriate way and, at the same time, giving them the freedom to make their own choices within the given framework set by the parent (Baumrind, 1966). Authoritative parents are more demanding of, and responsive to, their children (Baumrind, 1975). Young children in a preschool setting raised with authoritative parents are more confident in exploring their environment, exhibit more self-control, and are more content (Baumrind, 1971). Authoritative parenting was associated with adolescents who demonstrated autonomy, maturity, social skills, and self-actualization (Dominguez & Carlton, 1997). Furthermore, this parenting style is associated with better mental health outcomes for adolescents, including better adaptive behaviours, lower rates of depression, and greater life satisfaction, self-esteem, and academic achievement (Sahithya et al., 2019). This parenting style results in parents who take an active role in shaping their children's thoughts and behaviours which helps the child develop good social skills and influences their ability to relate

to other people (Baumrind, 1975). An authoritative parenting style that is characterized by parental warmth and trust contributes to a more optimistic outlook for adolescents and contributes to better mental health outcomes in the future (Yu et al., 2018). Secure attachment and authoritative parenting styles are important influences in developing hopeful thinking (Shorey et al., 2003).

This research on attachment is important for school counsellors to understand as they can ensure that the students are engaged in caring and secure relationships with their teachers and other school staff. School counsellors can also educate parents and families about the important role of attachment and authoritative parenting styles and how that contributes to a hopeful mindset. When school counsellors are aware of the research on parenting styles and how it intersects with the development of hope, they are more likely to be able to support students and families.

Risk Factors Impacting Hope Among Adolescents

Adverse life situations can challenge an individual's sense of hope. These adverse situations include traumatic experiences such as neglect and abuse, poor parenting practices, and the loss of a parent through divorce or death (Snyder, 2000, 2002). When children are raised in neglectful homes with insecure attachments, a lack of boundaries, and inconsistent rules and support, hopeful thought can be reduced (Doyle & Cicchetti, 2017; Snyder, 2002). Early experiences in the home have profound and long-lasting influences on children throughout their life as the development of hopeful thought happens in the context of other people and begins in early childhood and extends into adolescence (Snyder, 2002). As secure and healthy adult relationships play an important role in the development of hopeful thinking, it was found that children reared in institutions and subject to unjust treatment by others were found to have unhealthy relationships with others throughout their lives, and lower levels of hope (Doyle & Cicchetti, 2017).

John Bowlby (1988) describes an insecure attachment as the type of relationship formed with the child that is inconsistent and neglectful. Adolescents who have developed insecure attachments with their parents develop challenges in regulating their emotions and this negatively impacts their behaviours (Bowlby, 1988). Devito (2019) discussed the negative impact of an unstable home and insecure attachments with caregivers and found that adolescents' membership in gang life increased due to the lack of a secure attachment. They described the absence of a cohesive and dependable family unit as leading to feelings of hopelessness and loneliness. A gang lifestyle allowed them to feel a sense of acceptance and loyalty that was missing from their own lives (Devito, 2019). Although gang involvement is not an ideal and healthy way of living, the adolescents were searching for secure attachments to increase their feelings of hope (Devito, 2019).

A study of youth in Tanzania found the levels of hope in adolescents fluctuated depending on what was happening in their environment (Nalkur, 2009). Hope fluctuates in the lives of adolescents depending on the attachment with their parents and any adverse changes in their home environment (Jiang et al., 2013). In a population of at-risk youth living on the streets, participants' sense of hope came from external sources rather than from within, meaning that hope was the work of the community and other more hopeful people (Nalkur, 2009). These youth could only feel hope when they also felt a sense of belonging and acceptance from others. They felt hope for the first time when they received shelter and safety and expressed their need to have friends and a community that loved them (Nalkur, 2009). Hopeful thought was made possible when their basic needs were met and they were in a secure relationship with an adult.

Further evidence indicating how the environment can impact the relationship between hope and psychological outcomes is seen in catastrophic events, such as Hurricane Katrina (Cheavens & Ritschel, 2014). Among adult survivors of this disaster, hope was negatively correlated with symptoms of PTSD as well as overall psychological distress (Cheavens &

Ritschel, 2014). Most importantly, hope softened the relationship between avoidant coping and psychological distress; that is, hope acts as an important protective factor against the impacts of trauma. This was not limited to only adult survivors; hope also had a strong impact among adolescents. Hope moderated the impact of this trauma for a group of victimized adolescents in a low-income urban neighbourhood (Cooley & Ritschel, 2012, as cited in Cheavens & Ritschel, 2014). Hope helped to protect this group of adolescents in a negative and contentious environment where they experienced psychological distress. Furthermore, hope played a protective factor for adolescents against depressive symptoms and emotional dysregulation when experiencing unjust treatment at school by their peers (Cooley & Ritschel, 2012, as cited in Cheavens & Ritschel, 2014).

Hope as a Protective Factor for Adolescents

Hope acts as an essential protective factor for adolescents and is an important predictor of life satisfaction and well-being (Cheavens & Ritschel, 2014). Adolescents who reported higher levels of hope in coping with stressful life events skillfully reported feelings of self-efficacy, resilience, and were less avoidant (Cheavens & Ritschel, 2014; Gallagher et al., 2019). All these psychological strengths lead to increased hope, which is a protective factor in the adolescent's life. Adolescents who report high levels of hope report feelings of self-efficacy. This provides an individual with a cognitive framework that allows them to cope more effectively with trauma and stressful situations, which increases the resilience of the individual (Gallagher et al., 2019). Self-efficacy also leads to a more hopeful mindset and more skillful coping. Adolescents with high self-efficacy believe that they can problem-solve and have the skills necessary to access resources and rely on personal strengths (Cheavens & Ritschel, 2014). Self-efficacy and hope were important constructs in a study with adolescent females in Mozambique. Packer et al. (2020) found that adolescent girls who had higher feelings of self-efficacy and hope could stay on track with their goals, thus leading to lower rates of teenage pregnancy and child marriage. The researchers found that feelings of self-efficacy and hope led to a greater sense of

competence and self-confidence which played a protective role in the girls' lives (Packer et al., 2020). Further evidence on the positive impact of self-efficacy and hope was found in a study by Rew et al. (2017), in which 80 ethnically diverse homeless youth participated in a strength-based intervention to improve their "psychological capital." The study indicated that the homeless youth population increased their feelings of hope and self-efficacy, which helped them decrease health-risk behaviours through actions such as refusing alcohol, practicing safe sex, and making goals to find a job and housing (Rew et al., 2017).

When adolescents encounter trauma and challenges, recovery and hope take place in the context of other critical social relationships (Herman, 1998). These secure relationships contribute to resilience in adolescents facing trauma (Ruiz-Roman et al., 2020). When an adolescent is not cared for by caring and supportive adults, they can disconnect from important relationships in their lives. When this disconnection occurs, hope is created when the community gathers around the individual in a supportive and caring manner during difficult times (Weingarten, 2007). Resilience is developed in all adolescents when they have caring adults who connect with them during challenging times. Although resilience has individual characteristics, it is created through relationships with people and the context in which they live (Ruiz-Roman et al., 2020). Resilience is not developed alone but is built with the support of others (Ruiz-Roman et al., 2020). School counsellors can help to ensure that adolescents are able to identify an adult who takes a sincere interest in their life and can support them during challenging times. This research further demonstrates that resilience builds hope and acts as an essential protective factor for adolescents, making it possible to make healthier choices amidst difficult times.

How to Increase Hope in Adolescents

Many types of environments can contribute to lower levels of hope and negative outcomes for adolescents. Adolescents living in child and youth care centers have many challenges that affect their hope for the future because they lack the benefits of secure

attachments and family relationships. These secure and caring attachments provide the basis for the development of hopeful thinking, and without these attachments, the amount of hope one has is compromised. When youth living in residential centers were positively impacted by trusting relationships and interventions that focused on social and emotional support, they experienced increased self-esteem, optimism, and hopeful thinking (McNeal et al., 2006; Teodorczuk et al., 2019). Teodorczuk et al. (2019) worked with a group of adolescents living in youth care centers, and through the implementation of positive psychology interventions, they noticed many psychological benefits. These benefits included improvements in self-esteem and communication as well as increased feelings of self-worth made possible by the strong connections the youth formed with adults at the youth care center (Teodorczuk et al., 2019). A study of youth living in a residential treatment center that implemented a treatment program where the youth were exposed to caring relationships and the teachings of hopeful thinking found that the levels of hope increased after the treatment program (McNeal et al., 2006).

Taken together, research shows that a hopeful mindset is made up of a family environment, caring and trusting relationships with adults, a good school environment, and social skills training opportunities. All these factors contribute to a cognitive framework that makes up a hopeful mindset. These factors can be introduced to youth to increase their reported levels of hope (McNeal et al., 2006). In extending the importance of parental relationships and family in the development of hope in adolescents, Munoz et al. (2019) found that when adolescents believe that they have a reliable adult who is interested and helps them achieve their goals, a sound sense of internal hope is developed. Furthermore, in cases where an adolescent does not have the external hope of a parent or guardian, an adult mentor can help them achieve the same internal sense of hope by acting as an important role model and parental figure for the adolescent (Sulimani-Aiden et al., 2019). This research points to positive and nurturing relationships that are not necessarily familial and are the building blocks of hope (Lopez et al., 2000).

Schools, Adolescents, and Hope

Adolescents spend many hours and days at school among teachers and other adult professionals. Schools are important environments for adolescents to learn to increase their hopeful thinking and benefit from the school professionals who can support them in learning a more hopeful mindset. Hope is increased when adolescents trust the relationships and the interactions they have with their teachers and peers at school (Marques, Lopez, et al., 2011). More specifically, when adolescents are part of a school community where their interactions with teachers and other school professionals are predictable, consistent, and reliable, greater amounts of hope are experienced (Marques, Lopez, et al., 2011). The environment creates hope for the adolescent, and although school counsellors can work directly with the adolescent to increase hope, the school environment must be modified as well (Marques, Lopez, et al., 2011).

Relationships with other people at school are one way adolescents can cultivate hope. In *Reclaiming Youth at Risk*, Urie Bronfenbrenner states that “every child needs at least one adult who is irrationally crazy about him or her” (Brendtro et al., 2019, p. 53). School counsellors have an opportunity to help students by building a strong therapeutic alliance and implementing hope-based interventions in therapy. They also have an opportunity to educate and collaborate with other professionals in the school community about the importance of developing connections with the students in their classrooms. When teachers understand the relational needs that all youth have, they are more likely to take the time to form strong attachments with their students (Brendtro et al., 2019). These necessary attachments are the building blocks to facilitating a more resilient and hopeful mindset. School counsellors can educate the school staff about building a school that will increase student resilience (Barr & Gibson, 2020).

When life presents challenges and obstacles for adolescents, relationships at school are even more critical. Sometimes the students come to school with previous experiences of trauma and other challenges, and the school plays an important role for these youth. Relationships are

important for adolescents who experience adversity, and adolescents would benefit from schools that adopt school-wide programs that put relationships with students at the forefront. Hambrick et al. (2018) found in their study with a group of child-welfare-involved youth that the adolescents who had higher levels of quality relational support showed higher functioning levels than those who did not. Furthermore, Nalkur's (2009) study with parentless street youth found that the presence of a supportive adult connection and a stable environment were crucial to the development of hope. Adolescents who reported having a secure adult relationship experienced greater hope and were less likely to engage in harmful substance abuse behaviours and potentially dangerous sexual behaviours (Brooks et al., 2016). As trauma negatively impacts a child's development trajectory, the children who have the protective factor of secure relationships can cope with the impact of the trauma (Hambrick et al., 2018). Studies on resilience also show that supportive relationships with family members or someone in the community contribute to building an internal sense of resilience (Barr & Gibson, 2020). When individuals have an internal locus of control as well as a sense of self-efficacy, they are able to protect themselves from trauma stressors in their lives and are able to live successfully despite the early trauma and challenges (Barr & Gibson, 2020). These studies show us the important role that strong, supportive relationships play in the lives of youth and how they act as important factors that increase the youth's resilience in the face of childhood adversity.

Urie Bronfenbrenner's seminal work on child development and the role that the different environments such as family, school, and community play in the child's development have important implications for counsellors and school communities. Bronfenbrenner believed that if there was a problem with a child, it was essential to look at that child's surrounding ecology to understand better how to support them (Brendtro, 2006). For example, for children to develop into healthy adults, they need secure attachments with primary caregivers, supportive teachers, and acceptance into peer groups (Brendtro, 2006). When the ecology surrounding the child is

not optimal, the child's development suffers. Therefore, the most important intervention with a child is determining and looking at the child's surrounding ecology.

As John Dewey believed, schools are responsible for the cognitive, social, personal, and moral development of children, and therefore schools play an important role in youth development (Stephens et al., 2011). In the case of a school community, school counsellors and teachers must collaborate and help build a positive environment for the child by reaching out to their parents, caregivers, and teachers. Platt et al. (2020) found that schools must adopt a school-wide holistic approach to ensure the well-being of their students. A school must also have a mental health specialist such as a counsellor who can educate and guide the other adults in building a positive and caring school climate. Thus, school counsellors have an essential role in building a school climate that can benefit all students.

Bronfenbrenner's (1981) ecological framework also emphasizes how different environments such as the family and school influence the individual and how the individual influences their environment. Schools play an essential role in supporting family life as well as supporting the adolescent. Often, families turn to schools when they need help and access to different resources to support their child or family. In the case of adolescents attending schools, counsellors and school communities play an essential role in supporting family life and adolescents (Yohani, 2008). Some families face different challenges such as work schedules, lack of support from neighbours and friends, and inflexible childcare arrangements that prevent the parents from being present in their role as a caregiver, which negatively impacts the child's development and further impacts the parents (Bronfenbrenner, 1981). When the adolescent begins to feel unsupported, we see the adolescent's perception being affected, which may contribute to feelings of anger, overwhelm, and despair which impacts the way they learn to view their world (Bronfenbrenner, 1981). When we understand how their different environments impact youth, we understand the important role that a school counsellor can play by linking families with outside services to support families in the different ways they need. This

collaborative and supportive relationship between the school, community, and family will help support the youth in essential ways. What is also of importance is that the youth's perception continues to contribute to the formation of their attachments and their ability to connect with other people (Yohani, 2008). These proximal processes (family, school, and peers) interact with each other in early childhood and contribute to an adolescent's subjective feelings about their life which, in turn, shape their social and emotional development (Yohani, 2008).

Diversity in Schools and School Counsellors

Our public schools in Canada deal with a wide range of students with diverse needs, experiencing different challenges, and with a range of backgrounds. It is for this reason that schools need to understand how to increase hope in the lives of all adolescents. Schools and school counsellors need to be aware of how to support students who are at risk of having potential threats to their overall feelings of hope. Therefore, it is important to consider the role of relationships in supporting those who are at risk of having low amounts of hope.

It is projected that in 2031, one in four Canadian children will be immigrant children, contributing to a large range of diversity and needs in our schools (Statistics Canada, 2010). This is not an issue limited to the future; between the years 2015 to 2017, Canada welcomed 40,000 Syrian refugees that faced the challenges of integrating into the Canadian school system and acculturating into Canadian culture (Cheyne-Hazineh, 2020). School communities play important roles in helping refugee youth settle into their host country. Research found that the most influential support with refugee students was when the adolescents were supported with stable relationships in the host country (Fazel et al., 2012). Stable relationships were important factors in predicting psychological health, and adolescents who felt supported by their peers with stable relationships experienced better psychological functioning and increased hope (Fazel et al., 2012).

As hope is associated with better mental health and psychological functioning (Griggs, 2017), it is important to recognize the role of relationships for adolescent refugee students who

would benefit from the school community's help in settling into their new host country. The strong relationships formed with the professionals in the school provide important protective factors for the family and can make a significant difference in their lives. Protective factors for a refugee family are increased when families are adequately supported with outside help from agencies which offer counselling (Fazel et al., 2012). This counselling support helps the adolescent and their family heal from any trauma associated with intrafamilial violence or abuse as well as any instances of discrimination or racism experienced by the adolescent in the host country (Fazel et al., 2012). When school counsellors collaborate and provide education for school staff, this helps the school staff better understand the various challenges that youth might face and are therefore more likely to provide the nurturing relationships and community needed to build resilience and increase hope. Diversity is present in schools in many different ways and school counsellors can adopt universal strategies that will be helpful for all students regardless of their diverse and unique backgrounds.

Hope-Based Interventions

Hope is a vital resource because the impact of a hopeful mindset in an adolescent's life is profound. School counsellors can use hope-based psychotherapeutic approaches to teach adolescents about hope (Larsen & Stege, 2010). Therefore, a school counsellor must understand how to facilitate and co-create a hopeful environment for youth clients.

Psychotherapeutic approaches that focus on building hope and optimism protect against symptoms of PTSD and depression (Gallagher et al., 2019). Research on the positive psychological concepts of optimism and hope found that these strengths acted as protective factors against suicide ideation (Clement et al., 2020). Hope-based interventions were found to be helpful in increasing psychological strengths such as hope, and decreasing symptoms of depression and anxiety (Cheavens, Feldman, Gum, et al., 2006; Lopez et al., 2000). Because hope is dynamic and multifaceted, hope-based interventions can focus on increasing the different aspects of hope. For example, hope-based interventions can have a (a) cognitive

focus, (b) behavioural focus, (c) temporal focus, and/or (d) an emotion-focus in therapy (Larsen & Stege, 2010). Thus, school counsellors can implement hope-based interventions in a whole-class setting, with smaller groups of students, or in a one-on-one counselling context. To build hope, the school counsellor can approach the adolescent from any of the dimensions of hope: cognitive, behavioural, temporal, or emotion-focused.

With a cognitive focus to building hope, a school counsellor can begin by having the students share some of their hopes for the school year as well as some useful goals related to school life and other areas such as relationships or athletics. A cognitive focus operates on the belief that all people can learn hopeful thinking and that hopeful thinking can be increased (Lopez et al., 2000). A school counsellor can also work with adolescents on the visualization of their preferred life by completing a vision board and learning about how to set goals and plan for different ways to achieve their goals (Larsen & Stege, 2010).

School counsellors can also approach hope building by having the adolescents think about behaviours that would invite hope into their lives. A hopeful mindset is connected to the future and other people in the individual's community (Hedtke, 2014), therefore, a strategy to build hope with an adolescent includes thinking about who the adolescent would like to build relationships with moving forward. The school counsellor can begin by brainstorming with the adolescent about their strengths, all the things that are going well for them, as well as the behaviours that are leading them to their successes. Next, they can brainstorm behaviours that are leading to a negative outcome and compare that to their strengths. Some adolescents might benefit from social skills training through which they can learn about and practice prosocial skills. Having good social skills will help the adolescent meet new friends, and good friends provide stability and comfort. This also aligns with the idea that hope is created alongside other people. By engaging in hopeful behaviours, the adolescent can begin to attract people capable of supporting them when they need it. Finally, by engaging in more hopeful actions, the

adolescent can begin to feel better about themselves which motivates them to behave in ways that are oriented to a hopeful way of being (Larsen & Stege, 2010).

Further, a temporal aspect of hope incorporates time into counselling and supports the adolescent's goal-setting by focusing on their future (Larsen & Stege, 2010). Because hopeful thinking is made of goal-setting and is future-focused, it is crucial to help adolescents build a hoped-for vision of their future (Larsen & Stege, 2010). Adolescents can create a timeline and project into the future what they envision themselves doing at 18 years of age and again at 25. In the temporal dimensions of hope, the school counsellor can also help the adolescent identify values that are important to them as they are envisioning their ideal future. They can reflect on their family of origin and identify values that they resonate with, and these values can help to inform the goals that they identify. This will help to ensure that the goals are clear and realistic and in line with who they are, otherwise, they might not be worth pursuing. Hopeful thinking also develops in the context of time as it begins in childhood and continues to develop into adolescence as the youth learns to set goals, find pathways to reach their goals, and develop the right mindset to see their goals come to fruition. This all occurs in the context of time (Snyder, 2000).

Hope-based interventions also address hope as an embodied emotion where the school counsellor can have the adolescent reflect mindfully on how a hopeful mindset makes them feel. For example, they can identify a hopeful thought, how that hopeful thought makes them feel, and where in the body they feel that hopeful mindset. Having the adolescent learn to reflect on how hope made them feel can increase positive emotions and help the youth recognize the rewards of a hopeful mindset (Larsen & Stege, 2010). This embodied emotion approach to hope recognizes the importance of being mindful of feelings as a personal strength. As a result, being mindful is associated with greater happiness and personal awareness (Kabat-Zinn, 2012). Mindfulness might help to increase clients' hope and allow them to recognize that their positive

emotions are making them feel stronger, confident, and optimistic about their life (Larsen & Stege, 2010).

Research appears to support this assertion; Munoz et al. (2018) reported that a mindfulness meditation intervention reduced an individual's perceived stress and increased their feelings of hope. Participants in the study took part in a 6-week program that followed some of the traditional practices of Buddhism. For example, they practiced a) awareness of breath, b) body scan, c) mindful movement, d) listening meditation, e) loving-kindness, and f) yoga movements (Munoz et al., 2018). When the participants had an opportunity to quiet their mind and not respond to any of their worries, they could create the space to increase their ability for hopeful thought (Munoz et al., 2018). This evidence is also in line with C. R. Snyder; in his book *The Psychology of Hope*, he states that meditation can reduce stress, creating hope (Snyder, 1994). Meditation and mindfulness allow individuals to shift their attention to their pathways thinking, away from their ruminating and focus on the present problem and stressors that interfere with creative thought. Furthermore, mindfulness meditation creates a mental focus for the individual, which can help them move past obstacles and challenges during difficult times (Snyder, 1994, 2000). Mindfulness-based intervention can improve emotion regulation, perceived stress, and internalizing symptoms such as depression and anxiety (Fung et al., 2019). School counsellors can support mindfulness practices in schools by facilitating mindfulness-based interventions.

School counsellors can also increase hopeful thinking in a therapeutic setting by explicitly teaching the adolescent client about hope. This can be accomplished by introducing the concepts that make up Snyder's hope theory and learning the associated skills. Snyder's hope theory describes hope as a cognitive framework supported by an emotional mindset (Cheavens, Feldman, Gum, et al., 2006). Therefore, adolescent clients must be taught to (1) set meaningful goals, (2) brainstorm different pathways to reach their goals, (3) name sources of support, and (4) identify ways to change their pathways to reach their goals if needed

(Cheavens, Feldman, Gum, et al., 2006). This positive framework can help youth clients move towards a more hopeful orientation in therapy and help them build on their strengths and competencies to reach their desired outcomes. Instead of focusing on the adolescent's problems as many psychotherapeutic interventions do, hope-based interventions such as the one described above by Cheavens, Feldman, Gum, et al. (2006) allow clients to focus on their strengths, identify what is currently going well in their lives and what they can continue to do, as well as what they aspire to be in the future. This approach increased clients' agentic thinking, instilled a greater sense of meaning in their lives, increased their self-esteem, and decreased their feelings of depression and anxiety (Cheavens, Feldman, Gum et al., 2006).

Another important aspect of teaching youth clients about hope is to teach them to become aware of their negative thoughts and self-talk that could be preventing them from reaching their goals. When adolescents begin to challenge their negative thoughts and learn to replace their thinking with positive thoughts, they can increase their feelings of hope by increasing their sense of agency (Codutti & Schoen, 2014). Adolescents suffering from any mental illness, such as depression or anxiety, can benefit by learning a) how to set meaningful goals, and b) how to identify the steps and pathways to achieve their goals (Park & Chen, 2016). Hopeful thinking is increased when adolescents feel supported in the goal-making process with an adult such as a school counsellor. Hope is an active process, therefore teaching adolescents to be mindful of their thoughts and set goals for themselves can lead to hopeful feelings (Hedtke, 2014). If a goal is not met, it is essential to teach the adolescent client about important hopeful thinking such as regoaling (Codutti & Schoen, 2014; Hill et al., 2014). *Regoaling* is a "process of disengaging from one set of goals and reengaging a new set of goals" (Hill et al., 2014, p. 2) and is a term used in the explicit teaching of hope (Snyder, 2002). A hopeful mindset allows the adolescent to believe that there is no such thing as failure, and if their goals are not reachable, goals can be reexamined and changed accordingly (Codutti & Schoen, 2014). Hopeful thinking teaches the client that mistakes and failure are a regular part of

life, and regoaling allows them to identify what went wrong and use their experiences as a learning opportunity to become more aware of their strengths and weaknesses (Snyder, 2002).

Hope is a multidimensional construct, and as a result, hope-based interventions are made up of a combination of solution-focused, narrative, and cognitive-behavioural strategies (Marques, Lopez, et al., 2011). One specific example of a hope-based intervention that incorporates all three therapeutic modalities in schools is Building Hope for the Future. This program is designed to cultivate strengths in middle school students (Marques, Lopez, et al., 2011). The program was developed on the important premise that hope is a social process, and therefore, the school counsellor works with a group of students that are learning and encouraging one another throughout the program. The students are explicitly taught about hope theory and the contributions of a hopeful mindset. The students learn about goal setting, but the focus is on setting simple, concrete goals that the students can achieve (Snyder, 1995). In addition, students learn to set goals that are attainable but slightly challenging. In this hope-based intervention program, the students learn about agency and pathways. They learn the important hope language around positive self-talk and viewing setbacks as learning opportunities rather than failure. They work in their group and share with one another about a time in their past when they were successful. The group also identifies heroes or role models that they look up to. They are also introduced to the concept of regoaling and what they can do when they become stuck and cannot reach a goal (Snyder, 2002). And finally, adolescents are taught to reward themselves when they reach their goals (Snyder, 1995). At the end of this hope-based program, the students are encouraged to share personal hope stories based on what they learned about hope. This narrative activity helps the students write about a goal they identified along with the journey they took to reach that goal. They are encouraged to highlight any obstacles and challenges they overcame along the way (Marques, Lopez, et al., 2011). This study found that the students who took part in the program experienced increases in hope and

an increase in their positive attitudes towards themselves and feelings of self-worth (Marques, Lopez, et al., 2011).

Summary

The literature review suggests that hope serves as a protective factor among adolescents and serves as an important psychological resource (Munoz et al., 2019). The research also indicates a strong link between hope and increased mental health and well-being. As a future school counsellor working with adolescents, it is important to understand the protective role that hope can play in an individual's life. Secure relationships characterized by warmth, trust, and care are at the heart of developing hope among this population of adolescents. It is from here that a trusting therapist can utilize hope-based interventions to allow at-risk youth to begin healing from trauma, PTSD, depression, anxiety, and other mental health challenges.

Snyder's (1994) seminal work on hope conceptualized hope as a cognition and an emotion where goal-directed thought is taught and supported. Adolescents are taught how to set achievable and meaningful goals and the different pathways to reach their goals. Hope theory also believes that hopeful thinking is based on learning motivation and the language and thoughts that support positive thinking, such as "I am capable of achieving this." Hope-based interventions are made of positive psychological interventions that teach adolescents many important skills in school. Hope is a multidimensional construct and school counsellors can help adolescents develop a more hopeful mindset by teaching the different dimensions of hope such as: cognitive, behavioural, temporal, and emotion-focused dimensions.

Implications for Counselling Psychology

The research uncovered in the literature review reveals that hope plays an important role in an individuals' life and has important implications for those working with youth in a school counselling context. In this section, I will discuss these implications and the ways in which a school counsellor can leverage research about hope so adolescents can be supported in the

development of a more hopeful mindset at school. As the research consistently indicates that hope leads to better mental health outcomes and acts as a protective barrier in people's lives, school counsellors must understand what contributes to hope and be aware of hope-based interventions that can support all youth in the development of hope. Furthermore, as youth spend a large amount of their time in a school setting, it is important to understand the ways school communities can help increase hope by adopting various school-wide initiatives.

Strengthen Relationships in a School Community and Family

The development of hope is supported by the professionals in the school community and school counsellors through the development of secure relationships. As the research indicates, students who have higher levels of hope fare better in their lives (Snyder, 2000; Snyder et al., 2005). School counsellors play a role in developing a more hopeful mindset in adolescents by collaborating with staff in a school about the important role that relationships and connections have in the development of hope (Pedrotti et al., 2008; Teodorczuk et al., 2019). Schools play a unique role in educating students, promoting their psychological health and well-being, and helping adolescents reach their fullest potential (Pedrotti et al., 2008). Within the school community, school counsellors play an essential role in leading a school community in mental health programming by advocating for the mental health of their adolescent clients and educating teachers, support staff, and school administration about how they can contribute to the development of hope in the school community. School counsellors can create opportunities to build resilience through strong relationships among the teaching staff and adolescent students as this is the most important factor in building a resilient school (Barr & Gibson, 2020).

Ruiz-Roman et al. (2020) posit that resilience is strengthened in adolescents and achieved through the interactions of interpersonal relationships in their environments. Resilience is not the responsibility of the adolescent to develop on their own but is achieved as a result of positive interpersonal relationships with adults inhabiting their school community. Building resilience requires a community, and Ruiz-Roman et al. (2020) state that "one cannot fight

alone against the world” (p. 323). School counsellors can help to build positive interpersonal relationships with adolescents so that they can begin to develop some resilience. These critical interpersonal relationships are defined by trust, acceptance, and feeling valued and unconditionally supported (Ruiz-Roman et al., 2020). When relationships are built on trust and respect, it allows the adolescent to feel cared for which helps to support a resilient process within the individual to develop the self-confidence and agency to face adversity (Ruiz-Roman et al., 2020). Thus, these relationships contribute to building resilience in adolescents and can act as a protective barrier in their lives. Furthermore, these relationships play a mitigating role in the development of hope for all youth, and therefore, school counsellors can collaborate with teachers and other support staff in the school and remind them of the vital role these relationships serve for youth (Otis et al., 2016; Ruiz-Roman et al., 2020; Snyder et al., 2002).

School counsellors also play an important role as a liaison between the school, adolescent, and home environment. When an adolescent is working with a school counsellor or is part of a school-wide initiative to increase their level of hope, the adolescent’s parents or guardians must be learning alongside their child to support the development of hope at home. The parents and guardians need to be aware of the importance that their relationship plays in developing hope in their adolescent child. The research indicates that to increase hope in adolescents, the environments they belong to, such as home and school, need to be modified (Marques, Lopez, et al., 2011). Therefore, the school counsellor must be a liaison between the school, adolescent, and home to support the development of hopeful thinking. Furthermore, when parents are educated about hope and make changes to their relationship with their child, they themselves experience increased hope, which helps them provide the level of support that their adolescent needs (Brown, 2018).

Hope as a Learned Skill

Hope is a skill that can be learned, but students and teachers need to develop and support hope in themselves and for each other. Hope is an active process that consists of

learned skills and mindsets, and school counsellors play an important role in guiding teachers and students in this process of developing hope. When students have high levels of hope, research shows that they benefit greatly and are more satisfied with their lives, engage more with school and academics, are less likely to drop out of school, and report better mental health and psychological well-being (Marques et al., 2015; Snyder et al., 1991).

School counsellors can utilize the skills required to increase the adolescent's hope through individual counselling sessions. For example, they can begin by supporting the adolescent in building some goals for themselves based on their interests, values, and strengths and weaknesses (Pedrotti et al., 2008). This goal-setting process allows adolescents to think about their future and the direction they want to steer themselves. Goal-setting helps adolescents feel a sense of control and personal agency as they set their own goals based on their values and interests. As the student leads the process, the role of the school counsellor is to ensure that the adolescent is creating goals that are achievable and reduced to smaller goals that work towards achieving the larger set goals (Pedrotti et al., 2008). As the home environment is one of the strongest predictors in developing resilience, the adolescent must be encouraged to share their goals with their parents or guardians to receive further support and encouragement in the goal-setting process (Dias & Cadime, 2017). The school counsellor can initiate the communication that needs to occur between the counsellor, family, and the adolescent by scheduling a time for a meeting to discuss their identified goals and preferred future.

The next step in developing a more hopeful mindset is to teach the adolescent about agency and pathway thoughts (Pedrotti et al., 2008). The adolescent will learn skills that will allow them to adopt a more hopeful orientation. Teaching adolescents about agentic thoughts helps them learn and practice the attitude needed to stick with their identified goals. For example, the school counsellor can teach the adolescent about adopting positive self-talk. The adolescent client can track their positive and negative self-talk in a journal and keep track of the

times they make positive statements about themselves and times when they do not (Pedrotti et al., 2008). This activity helps to see how their thoughts affect their behaviours as well as the beliefs they develop about themselves and their abilities to reach their goals. This is an important skill, and teaching adolescents how to change their thinking habits increases more hopeful thought, self-compassion, and life satisfaction (Umphrey & Sherblom, 2014).

Lastly, teaching adolescents about their pathway thoughts consists of helping students brainstorm different routes to reach their goals and the strategies they can access when they come up against a roadblock or setback. Teaching pathway thoughts teaches adolescents that there are many different ways to reach a goal, and when one pathway does not work, they need to adjust and choose a different pathway to reach their goal. Agentic and pathway thinking are especially important when the adolescent is faced with challenging life circumstances and must adapt to the changes in their environment. These skills allow them to move through uncertain and challenging times in their lives.

Hope Assessment

When working individually with adolescent students in a school, the school counsellor can begin by measuring the amount of hope they have, using the Children's Hope Scale (CHS). This assessment is helpful for a school counsellor as it helps inform their clinical work with the adolescent and can track their progress in the development of hope throughout the school year. Once a measure of hope has been taken, the school counsellor can identify the adolescent's strengths and areas that need further attention. For example, the CHS might indicate that the adolescent lacks the skills needed for agentic thinking but is strong in areas of pathway thinking. The CHS will provide an overall measure of their global hope, the skills they have in hopeful thinking, as well as an understanding of the overall level of hope the adolescent has (Pedrotti et al., 2008). Further to understanding the level of overall hope, it is also important to measure the levels of hope they have in different areas of their life using the Domain-Specific Hope Scale (DSHS; Pedrotti et al., 2008). If the adolescent is experiencing lower levels of hope related to

their school academics as indicated by the DSHS, then this will allow the school counsellor to focus on increasing hope in that particular area of the adolescent's life. Furthermore, if hope is low in the academic domain, the school counsellor can help the adolescent identify pathways to reach their academic goals which will increase their overall academic achievement (Bryce et al., 2020). Since the development period of adolescence is a time of psychological growth and change, the executive functioning of the adolescent brain might not be ready for pathway thinking (Bryce et al., 2020). It might require support and guidance in the development of that specific hope skill and an assessment of hope will help the school counsellor to identify important areas of support (Bryce et al., 2020).

School-Wide Initiatives to Increase Hope

Mentoring

Relationships are an important protective factor for adolescents, and the presence of secure relationships leads to an increase in hope (Ludy-Dobson & Perry, 2010; Yohani, 2008). An example of a structured program that promotes secure relationships is the SPARK mentoring program that pairs youth between the ages of 11 and 18 with preservice teachers in a collaborative relationship. The preservice teacher is allowed to connect and build a meaningful and trusting relationship with a referred adolescent (Peterson, 2020). These teachers are educated about Carl Rogers and his person-centred approach, as well as the importance of developing sacred relationships with their mentees, treating them with respect, and not focusing on their behaviours and past challenges (Peterson, 2020). Furthermore, they are advised not to fix their mentee but to focus on building a relationship, embracing who they are, and building on their inherent strengths (Peterson, 2020). This SPARK mentoring program benefits both the participating youth and preservice teachers and is an effective program to foster meaningful relationships that help youth develop hope.

To provide further support for the importance of secure relationships in the development of hope, Badecemi et al. (2019) looked at the effects of a mentoring program implemented in a

school with at-risk school children who had insecure attachments and paired them with university students acting as a secondary caregiver to the child. The study found that these attachment relationships provided space for the student to form secure attachments. As a result, the students reported feeling happier, calmer, and were better able to regulate their emotions, thus experiencing decreased emotional problems. These secondary secure attachments were successful in helping the students regulate their behaviour by receiving care and security from the university student caregiver over a period of time (Badecemi et al., 2019).

Mindfulness

Another school-wide initiative used to increase hope with adolescents is the practice of mindfulness. Mindfulness is the practice of teaching individuals how to train their mind to become aware of itself and the present moment in a nonreactive way by learning to observe one's thoughts, feelings, and behaviours as they are experienced (Siegal, 2010). Mindfulness is described as the ability to purposefully focus one's attention on one thing at a time in a nonjudgmental fashion (Sunthararajah, 2019). Mindfulness practice allows individuals to develop a greater awareness about their body and mind and their thoughts, feelings, and emotions, which teaches them to be more self-compassionate and wise (Kabat-Zinn, 2012).

Mindfulness has important implications for adolescents because it helps to strengthen and stabilize their brain so that they can achieve a more emotionally regulated state, and this can help them navigate the changes and challenges that present themselves in adolescence (Siegal, 2010). This mindful awareness training also changes the adolescents' brain so that they are able to embrace challenging situations rather than fear and run away from them (Siegal, 2010). Furthermore, mindfulness practice also helps target any youth in a school who have been subject to any adverse events in their lives; children who experience adverse events and trauma in their early life are at greater risk of developing future health problems (Ortiz & Sablinga, 2017).

Sunthararajah (2019) found that mindfulness-based therapies reduced symptoms of depression, anxiety, and stress in a group of adolescents. When individuals can begin to slow their thoughts down and recognize that their emotions do not define who they are, they can begin to see that these emotions are an “experience” and this gives them some distance from their strong emotional reactions that used to happen without thought (Siegal, 2010). A 6-week mindfulness-based intervention was used to support a group of youth, and the results showed that their levels of perceived stress decreased and their feelings of self-esteem and hope increased (Munoz et al., 2018; Sunthararajah, 2019). Mindfulness-based interventions can be used in a school setting by teachers and school counsellors to help students learn to regulate, increase their attention-awareness, and increase their positive thinking (Eva & Thayer, 2017). Furthermore, because youth spend most of their time in a school setting, mindfulness interventions in an education setting rather than a clinical setting are more likely to capture more marginalized youth (Eva & Thayer, 2017).

Hopeful Minds

Another program that can be used in schools to increase the overall level of hope is the Hopeful Minds program (Kirby et al., 2021). This program can be used in classrooms to focus on improving the social and emotional skills necessary for the development and maintenance of hope (Kirby et al., 2021). It also teaches the skills that make up the behavioural and cognitive aspects of hope that are developed and taught through cognitive behavioural strategies, visualization, and mindfulness, as well as agentic and pathway thinking so that students can learn about hope theory and the skills necessary for hopeful thinking (Kirby et al., 2021). The adolescents that took part in this intervention at school reported increased levels of hope, increased confidence, and felt better equipped to deal with stressful events at school and home (Kirby et al., 2021). These stressful events included incidences of bullying, exam preparation and writing, and conflict with relationships at school and home. The adolescents felt like they had increased some of the critical agentic thinking skills such as a more “stick with it” attitude

and thinking strategies that help them persevere when challenges and obstacles arise that prevent them from reaching their goals (Kirby et al., 2021). The Hopeful Minds program is an evidence-based program that can be used school-wide and can be incorporated into classroom instruction by the teacher or a school counsellor in group counselling sessions to increase hope and the associated skills to improve the psychological well-being of youth.

The school counsellor plays a dynamic role in creating a hopeful school. This can be done by using holistic school-wide programming that focuses on some of the identified protective factors of hope, such as relationships. It is also achieved by explicitly teaching adolescents about hope and supporting the goal-setting process for adolescents and helping support their efforts to build pathways to reach their goals and adopt the necessary mindset to help them stick with their goals and persevere through challenges. This can be achieved through school-wide initiatives as well as hope-based interventions with the adolescent client in a group or individual counselling context.

Fundamental Next Steps for Research

One area of further research includes a greater understanding of the impact and potential benefits that parents and families experience as a result of their children using hope-based programs and interventions in schools with counsellors. It would be essential to understand if an adolescent who increases their overall level of hope as measured by the CHS would increase the level of hope within a family unit. Research in this area would allow us to further understand if hope transfers from the adolescent receiving hope-based interventions at school to the family and home environment. Furthermore, if families benefited from the adolescent taking part in a holistic approach to the development of hope at school, it would have important implications for school counsellors to understand that the hope-based interventions being used in counselling and at school are having a positive impact on the family unit.

If such an effect were found, research in this area could also look at the potential circular impact of hope on the family and the adolescent. The increase in the family's level of hope

might further increase the adolescent's level of hope, thereby positively impacting both the family and the adolescent's overall well-being and psychological health. This research could demonstrate that key stakeholders (parents/guardians and teachers) need to be involved in hope-based interventions with their adolescents, as they influence and impact each other's level of hope and psychological well-being.

More longitudinal research needs to be done to determine if hope was maintained long-term after hope-based interventions were completed at school with a school counsellor. This longitudinal data would provide a more accurate picture of how hope is maintained after hope-based interventions at school are completed and whether or not hopeful thinking needs to be continually reinforced in order to stay hopeful. Furthermore, as the attachment relationship with parents or guardians is especially important in the development of hope, examining this in-depth would be helpful to understand what hope interventions are the most useful in involving the youth's parents. This would be helpful for counsellors to further understand what aspects of hope are the most useful for parents to know about, as well as the degree and depth to which they need to understand this in order to support their child in their development of hope (Otis et al., 2016). Furthermore, longitudinal research looking at the long-term impact of hope-based interventions could compare the different therapeutic modalities and which ones were the most effective long term.

The adolescent period marks a critical time in an individual's development, and future research could continue to investigate the role in which attachment plays in the development of hope, specifically as it relates to the adolescent's perception of the relationship with their parent or caregiver (Jiang et al., 2013). Existing research indicates that these necessary attachments and relationships contribute to resilience and hopeful thinking. However, when the adolescent begins their process of individuation and begins to create some space from the adults in their life, it would be important to understand how hope is impacted. As adolescents naturally move away from parents and try to become independent, sometimes the relationship can be

compromised even though the parents are emotionally and socially supportive of their child. However, if these relationships are described as more hostile by the adolescent, while the parent continues to be supportive, future research could better understand how this would impact the development and maintenance of hopeful thinking on the adolescent's part. This understanding would have implications for school counsellors as they could educate parents about parenting teenagers and the important development of hope that can occur as a result of secure attachments. Parents could also be educated about the levels of hope and what happens to hope when the adolescent begins to view their well-intended parent as unsupportive.

Hope is not only a way of thinking that comprises the agency and the pathways to achieve one's desired goals but is also experienced when the likelihood of achieving a goal is low and unlikely (Bury et al., 2016). That is why hope is often studied when people are ill, dying, or grieving, as the likelihood of achieving their goal of living contains some degree of uncertainty. In the case of youth, hope acts as a protective barrier for them and has many positive psychological benefits, and it is clear that close relationships play a part in the development of hope. Future research could continue to understand the importance that hope plays on the counsellor's part, as the counsellor can be an important relationship in developing hope for the adolescent. If the counsellor reports low levels of hope for their client, understanding how this would impact the adolescent's development of hope would be helpful for the school counsellor. If the school counsellor believes that the adolescent does not have much hope for healing, it would be essential to understand the different ways that the counsellor can increase their sense of hope in these situations to make them a more effective counsellor. Furthermore, understanding the different ways to increase hope on the counsellor's part is imperative for counsellors who want to use hope-based interventions.

Exploring the role of spirituality/religion on the counsellor's level of hope would have implications for school counsellors using hope-based interventions and learning to become

more hopeful counsellors. Understanding the role that religion and spirituality play in the depth of hope on the counsellor's part would help us understand if that positively impacts their adolescent clients at school and whether or not the school counsellor could more effectively impact and strengthen hope in the lives of adolescents as a result. If this does have an impact, these findings would have important implications for school counsellors as they could strengthen their own hope by adopting a more spiritual or religious lens. Understanding what contributes to a counsellor's development and understanding of hope would be essential to understand. Being hopeful is imperative on the counsellor's part as it contributes to a more hopeful therapeutic relationship, and this has important implications on the recovery and healing of the client (Park & Chen, 2016).

Future research on different therapies, specifically eye movement desensitization and reprocessing (EMDR) therapy on the healing and level of hope in adolescents who have experienced trauma and adverse life events, would be beneficial. EMDR is a therapeutic, evidence-based treatment used for individuals who live with PTSD, substance abuse disorders, anxiety, and/or depressive disorders (Gainer et al., 2020). Future research could further understand if this type of therapy plays a role in developing hope in adolescents. If so, school counsellors would benefit from learning this specific intervention and having this therapeutic intervention as an option in a school counselling context.

Recommendations for Practice

As hope is a psychological strength and one of the strongest predictors of well-being (Gallagher et al., 2019), school counsellors must support the development of hopeful thinking in youth through the adoption of hope-based interventions in therapy as well as school-wide initiatives to foster strong and supportive relationships for youth. According to Platt and colleagues (2020), mental illnesses are often diagnosed in adolescence making this period of development a critical time to implement hope-based interventions. This has implications for schools, and it is recommended that school counsellors play a significant role in preventing

mental illness in adolescents. Furthermore, levels of hope during adolescence are at their lowest, thus negatively impacting adolescents' psychological health and well-being and presenting a window of time when psychological problems begin to surface (Otis et al., 2016). Therefore, school counsellors must remember that adolescence is a critical period of development, and we need to ensure that teachers and school staff are prepared and educated around ways to support hopeful thinking.

In order to support the development of hope, it would be helpful for school counsellors to have an understanding of Snyder's hope theory, hope-based interventions, mindfulness practices, as well as an understanding of how to create a trauma-sensitive environment for youth who are suffering from trauma (Eva & Thayer, 2017; Lopez et al., 2000; Ludy-Dobson & Perry, 2010). Hope is not a passive process; it is an active one where students are taught how to set goals and pursue them (Snyder, 2000). Therapy in this context is purposeful, directive, and requires active engagement by both the student and the counsellor. The student learns about the different cognitive, behavioural, and emotional aspects that make up hope theory and contribute to therapeutic transformation (Lopez et al., 2000). The school counsellor must aim to create change within the student on a deep level where perceptions and attitudes shift. Through opportunities to self-reflect, the adolescent can be supported by the school counsellor to become an autonomous individual capable of living their desired life (Lopez et al., 2000).

As Lopez et al. (2000) outlined in "Building a House of Hope," there are two major stages in hope therapy. The first stage consists of instilling hope, and the second stage consists of increasing hope. Each stage uses different strategies and techniques to achieve the overall goal of increasing hope (Lopez et al., 2000). Narrative therapy is used in the first stage so that students can begin to make sense of their lives and integrate all their implicit memories from childhood and begin building a coherent life story (Siegal, 2010). This first stage allows the individual to explore their memories and understand how the memories and experiences recollected from their childhood have shaped and contributed to who they are in the present

(Siegal, 2010). In this narrative process, individuals can make sense of the story they have been telling themselves over the years and how this personal narrative impacts their present functioning (Siegal, 2010). This “hope finding” strategy can help the client identify their strengths and resilience so that they can begin to build positive feelings about themselves as they intentionally look for times in their lives where they have been resourceful and shown resilience and strength. Throughout this first stage, the therapist must develop a strong relationship with their client by collaborating, validating, and building a strong bond. This relationship is an important part of the hope-building process (Lopez et al., 2000). Relationships provide an important protective factor for at-risk youth and help to build hope in individuals. When the counsellor and client have a strong therapeutic alliance, it can help the adolescent build their strength to self-regulate and become more resourceful and thoughtful, which leads to the development of hope (Siegal, 2010).

In the second stage, the counsellor supports the development of increasing hope in the individual through narrative, solution-focused, and cognitive behavioural therapy interventions. In this stage, the student is given the opportunity to reflect on any automatic problematic thoughts and negative patterns of thinking that are preventing them from setting goals and creating the necessary steps to achieve them (Lopez et al., 2000). With the support of the counsellor, they can learn optimistic ways of thinking, reframe negative events, and learn to view life in more hopeful ways. Solution-focused therapy would direct the client to focus on solution talk and shift their focus away from their problems and towards building solutions by looking at the strengths and resiliencies they have demonstrated so far in their life (Lopez et al., 2000). This process involves using a variety of strategies and skills to remind the client about their successes so far and how they have coped previously to different setbacks and obstacles (Lopez et al., 2000). The client can identify their thought process, their attitudes and feelings, and remember to focus on what they are in control of and capable of doing (Lopez et al., 2000). Finally, as adolescents are naturally thinking about their future, it is important to help them

visualize their life as they would like it to be and then help them identify achievable goals and pathways to reaching their desired life (Cheavens, Feldman, Gum, et al. 2006).

When working with youth in a counselling setting, the school counsellor can measure an adolescent's level of dispositional hope using the CHS (Marques, Lopez, et al., 2011). A low level of hope would predict and indicate certain psychological needs. Knowing their level of hope would help inform the therapeutic work with the adolescent and help build a treatment plan for therapy. This measure of hope would indicate and give voice to many parts of the individual such as agentic thoughts, self-efficacy, motivation, optimistic thinking, self-worth, academic achievement, mental health, and life satisfaction (Marques, Lopez, et al., 2011). Hope-based interventions are strength-based and allow the therapist to promote growth and improvement for the client through a combination of mindfulness, solution-focused therapy, narrative therapy, and cognitive behavioural therapy (Lopez et al., 2000). The fundamental goal of hope therapy is to increase the individual's hopeful thinking and empower them to engage in agentic and pathway thinking as well as increase their positive and goal-directed thoughts (Lopez et al., 2000). School counsellors can work with other professionals in the school, such as teachers and administrators, and help them identify any students who may have low levels of hope. Working with these identified students one-on-one or in a group setting can help increase their hopeful thinking and act as a prevention for poor mental health. Furthermore, those students who come to the counselling office seeking help have already identified some level of hope, and the school counsellor can tailor their therapeutic interventions based on the presenting problems they co-identify with the client (Lopez et al., 2000).

Hopeful thinking can be increased among adolescents with the implementation of a school-wide curriculum. Building Hope for the Future is a 5-week program designed for middle school students that incorporates Snyder's hope theory and involves parents or guardians, school teachers, and peers in the process of hope development (Marques, Lopez, et al., 2011). Hope is explicitly taught to middle school students and key stakeholders such as

parents/guardians, peers, and school teachers to help support the development of hope in the adolescent's life (Marques, Lopez, et al., 2011). They learn about Snyder's hope theory, goal setting, and important hope language (Marques, Lopez, et al., 2011). The adolescents in this study benefited from this 5-week hope intervention. Results showed that life satisfaction and self-worth increased with this group of youth compared to the control group who reported no change in hope, self-worth, or life satisfaction (Marques, Lopez, et al., 2011). School counsellors need to remember the involvement of parents and/or guardians in the hope process. As hope is created in relationships, counsellors need to collaborate with parents and/or guardians and other key stakeholders by providing workshops that explicitly teach about hope so that they can be involved in and support the change process.

School counsellors can implement mentorship programs within their school community to increase the hope of adolescents. Mentorship programs pair an adolescent youth with an adult in the community and are an effective way to positively influence the adolescent's psychosocial development (Miranda-Chan et al., 2016). In a longitudinal study by Miranda-Chan et al. (2016), adolescents with a mentor experienced many positive benefits from the relationship such as higher levels of educational success, lower criminal activity, increased feelings of optimism and self-efficacy, and lower rates of depression. This study points to the importance of youth having an adult outside of the family that takes a sincere interest in the individual, and school counsellors can facilitate this process. Mentorship programs have been incredibly successful and significant contributors to hope in the adolescent population who report low levels of hope. Sulimani-Aidan et al. (2019) identified important roles that mentors fulfilled in the lives of adolescents. These roles included role modeling important skills such as study habits and learning how to be independent and self-sufficient. These skills are important because they contribute to the development of a more hopeful mindset (Sulimani-Aidan et al., 2019). The youth who participated in this study were transitioning out of a residential treatment facility and were matched with a mentor to help with various challenges. The support and care

provided by their mentors were instrumental in increasing the youth's hopeful thinking and feelings of resilience, and as the youth came from more disadvantaged homes, these relationships provided the help and support they needed (Sulimani-Aidan et al., 2019). This study found that overall, the mentorship relationship increased the youth's overall feelings of hope and, specifically, their feelings of agency (Sulimani-Aidan et al., 2019). As discussed previously, a component of hopeful thinking involves learning how to develop motivation and feelings around self-efficacy. A mentorship relationship helps to support this type of hopeful thinking in youth. School counsellors can complement the work done by an adult mentor by working individually with adolescents to support the development of hope. For example, a school counsellor can help increase the cognitive component of hope in the form of pathway thinking by helping youth identify their goals, a clear vision of their future, and different ways to reach their identified goals.

Mindfulness-based interventions are also essential to implement with adolescents in a school setting so they can practice the skills to self-regulate by learning to accept their present emotions rather than react, ruminate, or avoid their feelings and thoughts (Eva & Thayer, 2017). Mindup is an evidenced-based mindfulness program used in schools by teachers, school counsellors, and psychologists. The program teaches students about brain-based behaviour and strategies to increase their social and emotional awareness (The Mindup Curriculum, 2011). Crooks et al. (2020) looked at the impact of a Mindup intervention in a classroom. They found that compared to the control group, the individuals that received the mindfulness intervention improved their adaptive skills, reduced their externalizing and internalizing behaviours, and increased their executive functioning. The program has outlined lesson plans and activities that help students develop a greater awareness by learning deep belly breathing, the functions of the brain, attentive and mindful listening, and how to mindfully respond to stressors in the environment (The Mindup Curriculum, 2011).

Reflexive Self-Statement

Upon beginning the research, I was not clear on the role of hope in my life. As I reflect on the times when I needed to feel hopeful, I see that it played a significant role, but I lacked the awareness and did not realize that hope would improve my overall well-being. Throughout my life, I would characterize myself as an optimistic and hopeful person for whom a sense of hope seemed natural, but I was not clear on how hope was utilized nor was I clear in my understanding of hope. It wasn't until I experienced a sense of hopelessness with the diagnosis and death of my daughter that I could see the vital role that hope could have played in my life. From the research, I learned that hope is a psychological strength and resource and contributes to resilience during times in our lives when the outcomes and future are uncertain. Hope is the enduring psychological strength that continues when hopelessness is imminent. At the beginning of my research, I believed that I was always a hopeful individual, but now I see that I had lost hope, and as a result, my psychological health decreased significantly. It was through rediscovering hope, in my hard work with therapists and a loving, supportive family, that I was able to put the pieces back together again. When I think about working with adolescents in a school counselling role, I want to ensure that I know how to strengthen and build their sense of hope during therapy to build the resilience and the internal resources to function well during uncertain and challenging times in their lives. Hope is a skill that is taught, and as a school counsellor, I want to know how I can support adolescents in becoming hopeful, optimistic, and resilient.

Hope was a concept that I could not define before I began my research. I always believed that it was a feeling but this seemed difficult to put into words. As Bury et al. (2019) state, "hope is an intriguing notion, yet complex and muddy" (p. 483). Therefore, defining and understanding hope in concrete terms did not seem possible. I realized that hope surfaced in different contexts and times in life, such as illness, death, and grief, and I had to further narrow

the context in which I wanted to understand hope. As I want to work with adolescents in a school setting, I narrowed down the concept of hope to adolescents in a school environment.

Hope is a concept that all people understand, but its practical, constructive use often gets overlooked. People hope for things in a wishful sense, but do not view it as a psychological strength that can be accessed and utilized. Hope is discussed with meaning and purpose in churches and with people who have a spiritual perspective, however, hope is created in many more ways than prayer and thoughts. Snyder and his colleagues developed a comprehensive understanding of hope and because of this, hope is now something that can be explicitly taught to people of all ages. Throughout my research, I have realized that some people rely heavily on hope and are aware of hope and the strength and courage it provides them during challenging times. Some people seem to be more hopeful than others, and some people are not aware of how hope can be used as a strength and resource in their lives. Hope is a concept that has spanned millennia and weaves its way through religions and cultures and continues to be utilized in people's lives. For those who live with low levels of hope, I want to help them develop and realize their personal strengths and resiliencies, their inherent competence and resources, so that they can navigate challenging circumstances and life events the best they can. By utilizing hope-based interventions as well as important school-based programs, I aim to help youth further develop this important psychological strength.

As I reflect on my understanding of hope, I realize that hope is not only a way of thinking and a cognitive framework, but hope happens with, and alongside, other people. Hope is contagious, and during times in my life, hope was created through important and meaningful relationships. During the times when I felt more hopeful, it was in large part because of the people I was surrounded by who contributed to my sense of hope despite the uncertainty and challenging circumstances I was faced with. As a future high school counsellor, this has important implications as I can collaborate with the other professionals in the community to help create a school that focuses on connections and relationships. Furthermore, this helps me to

realize the impact that a strong therapeutic alliance can have on my clients in the development of their sense of hope.

School communities and mental health professionals are in the business of educating and helping to instill our youth with a more hopeful mindset. Snyder et al. (2002) state that hope “enables people to set valued goals, see the means to achieve those goals, and to find the drive to make those goals happen” (p. 298). As I look towards my future role as a school counsellor, I have learned that helping youth develop a hopeful mindset is not achieved passively but is actively and explicitly taught. As teaching hopeful thinking is a process, school counsellors play an important role in the development of hope as they can walk alongside the child and support the entire hope process (Snyder et al., 2002). In my most recent professional experiences, I have had students who felt completely hopeless, and it is my professional responsibility to know how to instill hope and support all students in developing a more hopeful mindset during their challenging times. This can be achieved through the implementation of hope-based interventions, a strong therapeutic alliance, as well as collaboration with key stakeholders in the community so that the adolescent is taught important hope-based skills and supported throughout the process.

Conclusion

All people are capable of developing hopeful thinking, and this has important implications for adolescents. Hope can be a psychological strength and an indicator of psychological well-being (Teodorczuk et al., 2019). It is imperative that a school counsellor understands what contributes to hope and subsequently how to support the development of hope in all adolescents. Furthermore, adolescence is a crucial time where many decisions are being made, and it is important that adolescents have the ability to set meaningful goals and are able to view themselves as capable of achieving their identified goals as well as developing ways of pursuing them (Snyder, 2002). Consistent with the foundational research of Snyder

(1994), strong hope is an important protective barrier for adolescents and can help improve their mental health as well as their overall functioning (Teodorczuk et al., 2019).

As a future high school counsellor, I will encounter adolescent clients from a variety of backgrounds, and for this reason, I intentionally looked to find and include studies that were broad-based, capturing the experiences of youth from a wide range of backgrounds. It is important that school counsellors recognize and understand that schools serve a very wide and diverse range of adolescents. Looking at various cultures has given me the information needed as a counsellor to provide all adolescents, regardless of their cultural background, a voice in how hope can be built and utilized in their lives. It is important to understand the different ways that culture can affect the way that at-risk youth conceptualize hope as well as the important and protective role that hope has played in their own life. With this new understanding in hand, I will engage with my student clients using an open, compassionate, and person-centred approach where I am sensitive to the various backgrounds, experiences, cultures, and needs of the adolescents I work with and take a sincere interest in learning about their personal stories and journeys of hope. As a lifelong learner, I want to continue to learn alongside my clients about the different ways that their values, beliefs, interests, and culture impact their relationship with a hopeful mindset. I recognize this to be a continuous ethical endeavour.

This literature review focused on seminal work done on the topic of hope as it is important for mental health practitioners to understand Snyder's (Snyder et al., 1991) model of hope in relation to supporting the development of a hopeful mindset. By understanding the influences and role of hope in the lives of youth, a school counsellor can help to develop an increased sense of hope through the use of hope-based interventions and school-wide initiatives that focus on the development of trusting connections and bonds with other adults and increasing the overall mental health and well-being of the school (Pedrotti et al., 2008; Platt et al., 2020; Snyder et al., 2002). Not only is it important to focus on helping students who are

having problems, but it is also important to focus on building a school community where prevention programs focus on and include all students (Pedrotti et al., 2008; Platt et al., 2020).

School counsellors play an important role in nurturing and supporting opportunities for adolescents to form secure attachments with other people as these relationships are vital in the development of hope and must be the focus in schools (Shorey et al., 2003). Hope-based interventions are important in helping youth learn about the role of hope and the different ways they can cultivate a more hopeful mindset. Teaching youth how to set meaningful and achievable goals, as well as identifying different pathways to reach their goals are the basics in building hope (Snyder, 2000). Furthermore, hope-based interventions teach techniques to increase a youth's agentic thinking (Snyder, 2000). When youth are taught about the importance of positive self-statements and how to increase positive thoughts about themselves, it will help them to counteract any negative thoughts they might have about themselves during times when they are pursuing different goals (Pedrotti et al., 2008).

Hope finding and hope building can be identified through a narrative counselling approach where the youth client tells their story to an empathetic and compassionate school counsellor. A solution-focused approach helps the individual identify a clear vision of their preferred future as well as identify previous strengths and resiliencies that have enabled the youth to move through previous challenges and setbacks. Cognitive behavioural therapy helps youth to identify their thoughts and feelings and how they influences their behaviours, and through mindfulness training, youth can learn to accept feelings and thoughts and move past them towards their desired life. These hope-based interventions provide concrete techniques that can help all youth increase their feelings of hope so that they have the skills, strategies, and mindset to persevere during uncertain times in life and to develop the resilience needed as well as a more optimistic attitude towards challenges and setbacks. These important hope-based skills provide the impetus for change to take place and adolescents to develop the mindset to be more hopeful.

Through this capstone research project, I wanted to better understand what hope was and how it relates to adolescents. Furthermore, I wanted to better understand how I can support adolescents in the development of resilience and strengths to weather challenging times in life. In my recent professional experiences, I worked with at-risk youth who came from a multitude of backgrounds and experiences that impacted and contributed to their poor mental health outcomes. It was during this work experience that I became increasingly motivated to understand how I could support them in instilling and building on inherent strengths and resiliencies so they could heal and develop helpful coping strategies and mindsets to strengthen their thinking and act as protective factors when future adversities and challenges present themselves. As a future high school counsellor, I feel passionate about supporting this group of adolescents so that they can enter adulthood with a better sense of self, clear and well-defined goals, and a hopeful mindset that will help them to persevere during challenging and uncertain times. I want to support them in their journey of building on their strengths and competencies so that they can flourish and lead healthy and hopeful lives.

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