Clients’ hope arises from social workers’ compassion: Young clients’ perspectives on surmounting the obstacles of disadvantage

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Abstract

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

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

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

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

The After-School Program Context for the Research: Stand Up Help Out!

The adolescent leadership development program, Stand Up Help Out! (SUHO) is for African-American youth on Chicago’s South Side. SUHO focuses on helping youth respond actively and constructively to the many challenges of living in a poverty-level community. SUHO is youth-led: Youth actively plan program goals and activities, evaluate the program, and contribute to future program design. The program curriculum is described more completely elsewhere (Bulanda, Tellis & McCrea, under review), as is the program evaluation process (Bulanda, Szarzynski, Silar & McCrea, 2013). A weekly “sharing circle” enabled youth to share personal beliefs, stories, and concerns. This was also a time for the youth to give feedback about the strengths and needs of the programming, and plan for future programs. The SUHO program
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prioritized providing supportive counseling to youth, especially for those who reported traumas verbally or conveyed their need non-verbally (by withdrawal or context-inappropriate aggression). Instructors and counselors were M.S.W. school social workers and/or graduate students in social work, supervised by a Professor with more than 25 years clinical social work experience with children and youth.

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

**Prior Research about Hope and Compassion**

Hope Theory

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

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

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

Although “scant research has examined the role of positive expectancies for one’s future in low-income African-American children and adolescents” (Cedeno, Elias, Kelly, & Chu, 2010, p. 215), some have applied Snyder’s theory of hope to this population. Hope moderated some of the negative impact of violence, specifically in the areas of self-concept and externalizing behaviors (Cedeno et al., 2010). Youth who witnessed acts of violence but had less personal experience of violence had higher levels of hope (Hinton-Nelson, Roberts, & Snyder, 1996). While hope agency was positively related to academic achievement (GPA), hope pathways were not (Adelabu, 2008). Hope lessened the negative effects of stressful life events, and for children with lower levels of hope, as the number of stressful life events increased, internalizing behaviors increased and life satisfaction decreased (Valle, Huebner, & Suldo, 2006). Ethnic minority youth do not have low levels of hope and can regard barriers as challenges to overcome (Roesch, Duangado, Vaughn, Aldridge, & Villodas, 2010).

Compassion

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

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

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

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

Youth said that receiving compassion instilled hope in the cared-for person, a finding that prompted the more in-depth study of compassion and hope reported here. The hope resulting
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from receiving compassion was linked to feeling cared-for and valued: “I feel relief, like ‘somebody’s helping me.’ And then I’ll be, I’ll feel happy.” The hope they experienced was not an optimistic attitude, but was action-oriented, in that receiving compassion helped youth find solutions to both personal and community problems. Underscoring a connection between receiving compassion and inspiring hope, youth described being deprived of compassion as associated with despair. One young woman who withheld her compassion from a peer victim of bullying was filled with regret:

It actually felt pretty bad [when she withheld her compassion] because like, when we was in 6th grade, I wasn't really with the kids that was doing it [bullying], but . . . I wouldn't tell anyone to stop or anything. And then like, later, during that year, she had killed herself. So then, it was like I felt like I probably could have stopped that if, had I taken action.

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

Methods

Building on literature regarding compassion and hope in part as personality qualities or traits, we examined the two variables as traits and also as relationship-based experiences. Based on findings from preliminary studies, we hypothesized that: 1) There would be a direct, positive relationship between compassion and hope, in that youth with higher levels of hope would also have higher levels of compassion (operationalized as a positive correlation between scores on the Children’s Hope Scale and scores on the Compassionate Love Scale), and 2) Youth would regard hope as developed and sustained through compassion. This exploratory study used a convergent design (Creswell & Plano Clark, 2011) and directed content analysis (Hsieh & Shannon, 2005).
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The interviewer, who was not an instructor in SUHO and so only knew the youth in her research capacity, offered all the youth enrolled in two SUHO programs the opportunity to participate in this study. All the youth assented, resulting in a systematic, non-probability sample. Saturation was reached with the sample of 48 interviewees. Forty completed both the individual interview and the scales. The initial program evaluation interviews were authored by the youth, administered by the youth to each other, and were very open-ended (“Can you talk a little bit about what you liked about SUHO? Can you talk about what you didn't’ like?”). The compassion interviews also were relatively open-ended (“How do you define compassion? Can you give me an example of receiving compassion?”). Building on those foundations, the questions in this study’s interviews and focus group honed in on compassion and hope (“How do you think you developed your sense of hope? What do you do when you are discouraged or fail? Are there times you feel hopeless and can you tell me about one of those? Are there times you’ve worked hard to sustain your hope even though you feel discouraged, and can you tell me about one of those?”).

The Compassionate Love Scale, developed by Sprecher and Fehr (2005), was used to measure compassionate love for others and humanity (also see Weibel, 2007, who used it with an African-American adult population). There are two 21-item scales, with one measuring feelings of compassionate love for close others (family members, significant others, and friends), and the other measuring feelings of compassionate love for strangers and humanity. This scale has high internal consistency, with Cronbach’s alpha of .95 for each version of the scale. Four questions were removed that did not apply to adolescents. Sample items are: “When I see family members or friends (or people I do not know) feeling sad, I feel a need to reach out to them”; “I would
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rather suffer myself than see someone else suffer”; “I feel a selfless caring for my friends and family”.

The Children’s Hope Scale (Snyder et al., 1997) is a 6-item scale that measures both pathways (the child's ability to produce routes to his or her goals) and agency (beliefs about the ability to achieve these goals through the pathways). Previous research has found this measure to be both reliable and valid and as having excellent construct validity, with internal consistency ranging from .72 to .86 (Lopez, Ciarlelli, Coffman, Stone, & Wyatt, 2000). Sample items are: “I can think of many ways to get the things in life that are important to me” and “When I have a problem, I can come up with lots of ways to solve it”.

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

Results

The participants ranged in age from 14-18 years old and 60% were female. All the youth had witnessed serious community violence; some were intimidated by gangs even as they were coming to SUHO. There were multiple drive-by shootings at the SUHO program site every year, apparently due to increased turf wars and gang recruitment, necessitating closures of the
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Programs for several days at a time. Police protection was inadequate, as were child protection services. The youth and their families tried to get basic needs met, such as health care, but lacked cars and faced decreasing public transportation resources. The youth saw their family members and neighbors struggle with hunger, disease, unemployment, homelessness, crime victimization, and drug abuse. The majority of youth reported violent corporal punishment from caregivers, and 50% resided with foster parents. About 30% knew someone imminently suicidal who lacked mental health care; 10% had seen a friend or family member commit suicide, and another 10% saw someone die of community violence. Despite the overwhelming and obvious need, mental health, health care resources, and education were grossly inadequate. The valedictorians in the youths’ high schools graduated reading at the 6th grade level.

Hypothesis 1: There would be a direct, positive relationship between compassion and hope, in that youth with higher levels of hope would also have higher levels of compassion. This hypothesis was somewhat supported. All correlations can be seen in Table 1.

Table 1

Correlations Between Measures of Compassion and Hope

<table>
<thead>
<tr>
<th></th>
<th>Full Hope Scale Score</th>
<th>Agency Subscale Score</th>
<th>Pathways Subscale Score</th>
<th>Compassion Stranger-Humanity Score</th>
<th>Compassion Close Other Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pearson Correlation</td>
<td>1</td>
<td>.833**</td>
<td>.845**</td>
<td>.344*</td>
<td>.174</td>
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<tr>
<td>Sig. (2-tailed)</td>
<td></td>
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<td>.026</td>
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<tr>
<td>Agency Subscale Score</td>
<td>Pearson Correlation</td>
<td>.833**</td>
<td>.408**</td>
<td>.357*</td>
<td>.107</td>
</tr>
<tr>
<td>Sig. (2-tailed)</td>
<td>.000</td>
<td>.007</td>
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<td>.501</td>
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<tr>
<td>Pathways Subscale Score</td>
<td>Pearson Correlation</td>
<td>.845**</td>
<td>.408**</td>
<td>1</td>
<td>.223</td>
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<tr>
<td>Sig. (2-tailed)</td>
<td>.000</td>
<td>.007</td>
<td>.155</td>
<td>.242</td>
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<tr>
<td>N</td>
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<table>
<thead>
<tr>
<th>Compassion Stranger-Humanity Score</th>
<th>Pearson Correlation</th>
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<td></td>
<td>.344*</td>
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<td>.357*</td>
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<td>.613**</td>
<td>43</td>
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<tr>
<th>Compassion Close Other Score</th>
<th>Pearson Correlation</th>
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N: 42

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

Significant positive correlations were found between total Hope Scale scores and the agency and pathways subscale scores and the Compassionate Love Scale Stranger-Humanity Version. The Hope agency subscale was correlated with the Compassionate Love Scale Stranger-Humanity Version. Youth with higher hope were more likely to show compassion to others they did not know. In both the Hope and Compassionate Love Scale, the subscales were correlated.

Hypothesis 2: Youth would regard hope as developed and sustained through compassion.

All participants stated that they believed that being cared for and giving and receiving compassion gave them hope, except for one participant who responded she was unsure about the connection. The youth’s responses to the question “Some young people said that they feel that being cared for and giving and receiving compassion gives them hope. What do you think about this connection?” are presented in Table 2.

Table 2

Youth Responses to the Relationship Between Hope and Compassion

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

Receiving compassion instills confidence, which leads to hope

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

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

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

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

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

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

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

I feel that if someone is showing you compassion, especially your family or friends that would give you hope because that keeps you uplifted mentally and that makes you feel good about yourself and that gives you hope.

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

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

Compassion instilled confidence in youth, which helped them feel more hopeful, “Basically it’s like boosting their confidence and making sure that they on top of their goal and actually believe in them self and have faith in their goal.” Instructors’ belief youth could prevail was contagious:

They’ve kinda helped me you know not accept defeat. Like one of my instructors, they’ve helped me to not accept the fact that I can’t do something and not just give up so easy and just keep striving for the best and don’t give up.

Without compassion, there can be no hope:

If you wasn’t shown compassion then there’s not really much you can hope for at all. Because, like, without compassion you really can’t find some… Without compassion, hope and compassion coincide. So like, if there’s no hope, then like there’s no way that you can give hope to somebody else, which is like a form of compassion. And, without compassion, there is no hope to be given.
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Youth in the focus group confirmed the responses of the youth in the interviews. SUHO also gave youth hope because it offered peer support to surmount the obstacles in their environment.

According to 52% answering “Do you feel like the After School Matters program has helped you to have hope?”, mentoring younger children nurtured youths’ compassion, and thereby their hope: “I have hope in my mentee and hope he gets somewhere in life and that his future will be bright in some way or another.” For others, being a mentor gave them hope because the children’s idealization of them helped them feel valued:

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

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

Discussion

Q: “You’re saying your relationship with your [after school program] instructor gives you hope -- how does that work?”

A: “Feeling alone, it’s just the worst feeling. But knowing that there’s somebody else in the world and that you’re actually talking to, that you actually have conversations with on a daily basis, knowing that there’s somebody that … has made it through what they went through, and knowing that you can, you should never use the word can’t, but you can get over this, no matter what you’re faced with, any obstacles, you can make it. It might just, it might take time, but eventually you can make it.”
The great majority of youth talked about receiving compassion as instilling and sustaining their hope: it caused them to feel they could accomplish goals for their futures. Since the SUHO instructors did not intentionally try to instill hopeful thought as a specific set of cognitive processes, it is clear, as the youth said, that hope naturally stemmed from receiving compassion that was manifested in encouragement, belief in the youth, helping youth to rise above defeats, being non-judgmental, and helping the youth to give compassion to others (via the peer support and also mentoring younger children). Youth internalized the affirmation from compassionate relationships, resulting in the experience of agency Snyder identifies as key to hope.

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

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

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

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

If you don’t have a strong support system you gonna immediately feel like there isn’t anyone that cares for you, uh you’re in this by yourself. That’s like, in our studies, we’ve found that the majority of teens that join gangs feel as if they are the only people that show, that cares for them and show compassion towards them. So that’s why they join the gangs. So, um, in order to keep teens out of trouble…that would be helpful.
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Extending Snyder’s theory of hope, these findings can be helpful in understanding youths’ experiences of awakening hope. While the youths’ statements seem to affirm that “Goal directed thinking almost inevitably arises in the context of other people who teach hope” (Snyder, 2000, p. 31), hope itself is not taught, nor is it awakened by imparting cognitive skills or coping strategies. According to these youth, hope is ignited by receiving compassion.

**Conclusion**

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

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