Running head: GENDER AND HOPE

# Levels of Hope in Male and Female Youth Development Workers

"Hope is the difference between probability and possibility. If we follow probability there is no hope, just a calculated anticipation authorized by the world as it is. But to 'think' is to create possibility against probability." (Stengers, in Zournazi 2002, p. 245)

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## **Introduction**

#### **Purpose**

Hope is a belief about the future that has been measured and analyzed in the field of positive psychology in recent years. 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). Waypower (i.e. pathway-thinking) is the problem-solving component of hope, involving an individual's perception that he/she can generate effective pathways around or beyond obstacles to achieve desired goals (Schwartz, Tiamiyu, & Dwyer, 2007). Willpower (i.e. agency-thinking) is the motivational "can-do" component of hope and is the perceived capacity to persevere in the face of whatever one encounters along the way to achieving one's goals (Schwartz et al., 2007). Higher levels of hope are consistently related to better outcomes in a variety of areas of life (Snyder, 2002). People higher in hope have been shown to set more challenging goals and are more likely to attain their goals (Peterson & Byron, 2008). High hope individuals have also been shown to be better at coping with obstacles because they tend to have multiple, alternate routes, allowing them to better manage or avoid stress associated with setbacks (Peterson & Byron, 2008). Additionally, having higher hope is correlated with higher self esteem, greater optimism, less depression, and higher overall self-reported well-being (Bullough, 2011).

Given these positive correlations, this study was conducted to examine hope among youth development workers. Specifically, the researchers sought to investigate whether male and female youth development workers have different levels of hope. This study is important because of its potential to provide valuable information to managers and leaders of youth development programs who oversee staff of different genders. The researchers sought to determine if there

would be a utility in engaging women and men differently in order to support them in their development and maintenance of agency and pathways in the field of youth development. The researchers also sought to understand the factors contributing to high or low levels of hopefulness for youth development workers.

Considering the importance of employing highly engaged and committed workers to serve and care for today's youth, this study has important implications. Knowledge of the relationship between gender and hope could lead to changes in management policy and practice that better equip youth development leaders and staff with the will and the way to reach their personal and organizational goals and feel positively about the future.

#### **Literature Review**

Previous research on hope provides insight into possible outcomes of this study and considerations for why hope is important for youth development workers. A (2017) study conducted by Chaudhary, et. al. measuring the elderly in India found that, based on responses to Snyder's (1991) Hope Scale, males were found to have higher hope than females. A statistically significant difference was found for hope among males and females, and the researchers discuss the "higher open spectrum for males in our society, either in regard to career, friends or movability" as possible reasoning for this outcome (Chaudhary, et. al., 2017, p. 206).

Sun and Shek (2012) reviewed theories of hope and optimism as they relate to adolescents and found that sociocultural expectations of gender roles affects adolescents' goal orientation, aspirations, and perceived pathways. They discuss findings from past studies that "girls tended to report having more obstructed goals, greater goal frustration and lower goal-related self-efficacy than boys" (Sun & Shek, 2012, p. 5). This information speaks to the possibility of girls growing into women who may also feel less hopeful if they are facing more

barriers, more frustration, and lower belief that they can achieve their goals than men.

Youssef and Luthans (2007) conducted a study to measure hope, optimism, and resilience as they are related to four key areas of organizational behavior in the workplace: 1) Performance, 2) Job Satisfaction, 3) Work Happiness, and 4) Organizational Commitment. While gender was controlled for the study, hope was positively correlated to all four areas. This finding demonstrates the importance of studying hope for youth development workers. If increased hope is correlated with positive outcomes in work environments, the factors impacting hope should be of interest to managers focused on effectively hiring, supporting, developing and retaining staff in youth development settings.

#### **Research Question and Hypotheses**

This study was conducted in order to answer the following research question: Do male and female youth development workers have different levels of hope? Considering the literature reviewed prior to the study, the researchers hypothesize that males in the youth development profession will average statistically significant different levels of hope than females in the profession based on their responses to Snyder's (1991) Hope Scale. The null hypothesis is that there will be no difference between males and females in their levels of hope  $\rightarrow H_0: \mu_M = \mu_F$ . The alternative hypothesis is that there will be a difference between males and females in their levels of hope  $\rightarrow H_1: \mu_M \neq \mu_F$ . Through careful study design and statistical analysis of data, the researchers seek to discover whether the null hypothesis can be retained or rejected based on the following sample of youth development workers.

#### Method

#### Sample

Participants in this study included 37 adults. Participants consisted of 18 females and 19

males between the ages of 19 and 58. All participants in this study currently work or have worked in a youth development environment. Participants were recruited from nine states across five regions of the country to provide a geographically-diverse sample.

The majority of study participants were between 20 to 40 years old and have received a bachelor's or master's Degree (79%). The sample was split almost equally in terms of gender (51% male and 49% female). Well over half (66%) were Caucasian, with the next largest group being African American (26%). The majority of the participants in this study work full time in youth development (74%) with the greatest number working in the field for 6 to 10 years (32%) or 1 to 5 years (22%) (see Appendix A for participant demographics figures).

#### **Measures and Procedures**

The research design of this study was non-experimental and correlational as it studied the relationship between hope in males compared to hope in females in youth development settings.

The independent variable was the gender of the respondents and the dependent variable was the hope scale score.

The variables in this study were measured by conducting a survey that collected demographic information and levels of hope using the Adult Dispositional Hope Scale (Snyder et al., 1991) (see Appendix B for complete survey). This assessment tool was the first to be developed based on Snyder's Hope Theory. The Adult Dispositional Hope Scale is a questionnaire that contains twelve rated questions using the Likert scale from 1 (definitely false) to 8 (definitely true). Four questions address agency thoughts (e.g. Q2 "I energetically pursue my goals") and four questions address pathway thoughts (e.g. Q1 "I can think of many ways to get out of a jam"). Agency is defined as goal-directed energy and pathway is defined as planning to meet goals (Edwards et al., 2007). The remaining four questions of the Hope Scale are set as

distractors and not calculated in the overall hope score but are used to make the focus on hope less obvious. Distractor questions were excluded from this research. The scores of the remaining eight agency and pathway questions were summed to achieve a Total Hope Score for each participant.

All participants were asked and consented to take a brief survey for a statistics group project that would ask them questions about the future. Each researcher identified at least eight adults of an equal number of males and females in a convenience sample. Participants were offered the survey either electronically or via paper handout, depending on what the researchers thought would best facilitate their completion. Once participants were identified, there was a five-day window to complete the Adult Hope survey. Participants were asked to read directions carefully and complete both demographic and study question sections of the survey to the best of their ability. After the survey-completion window closed, data was collected and compiled to determine results. Participant names were replaced by numbers and survey questions were coded with a numerical value for data analysis (see Appendix B).

#### **Results**

**Table 1: Hope Scores** 

	Males (n=19)	Females (n=18)
Mean	54.52	54.67
StDv	4.30	5.62
Median	55	55
Mode	55	56
Range	16	19

The results of the study show an average hope score of 54.59 (SD 4.91) for all study participants (male and female combined). The mean hope score for males was 54.52 (SD 4.30), while the mean hope score for females was 54.67 (SD 5.62). The descriptive statistics regarding the results of the study can be found in Table 1. To analyze the data, a two-sample t-test assuming equal variances was performed. This statistical analysis test was selected because two independent sample sets were being compared. Additionally, an F-Test was utilized to determine whether the test should be performed assuming equal or unequal variances. The observed F-value was 1.71 and the F-critical value was 2.23. With the observed F-value less than the F-critical value, the analysis was completed assuming equal variances. The two-sample t-test assuming equal variances resulted in an observed t-value of 0.09 and a two-tail t-critical value of 2.03 (p =0.932). Since the observed t-value was found to be less than the t-critical value, the null hypothesis cannot be rejected. There was not a statistically significant difference between the hope scores of the male and female samples. The observed difference is likely due to chance.

Additional two-sample t-test statistical analyses were performed on other variables such as participant age, level of education, and length of employment in the youth development field (data not shown). No statistically significant differences were found.

#### **Discussion**

#### **Conclusion**

Based upon t-test statistical analysis of our data, we cannot reject the null hypothesis that there is no difference between male and female hope scores among youth development workers. Thus, our research hypothesis that male youth development workers would score statistically different in hope than females has not been substantiated by data from this study. The mean hope scores of 54.67 (women) and 54.52 (men) were not statistically different enough to demonstrate

that men and women are of different populations regarding their level of hope on Snyder's (1991) Hope Scale. Rather this data demonstrates that they are likely to come from the same population and have similar levels of hope. We cannot rule out that a larger sample size, a different study design or different types of statistical analyses (i.e. regression) could identify statistically significant differences in hope levels between the genders, but this study does not.

### Strengths and Limitations of the Study

The sample of participants offered both strengths and limitations to the study and may have contributed to the results. One strength is that the study sample was highly representative of the general youth development worker population in that it had expansive geographical representation, as well as wide ranges in participant age, years of work experience and age groups of youth served. The sample size of 37 is large enough to yield statistically significant results and was achieved through a mixed-mode of survey instruments (online and paper surveys to facilitate responses). We also received an 86% response rate (37/43). The rigorous American Journal of Pharmaceutical Education requires at minimum a 60% response rate for survey research to be generalizable enough to be accepted for publication (Fincham, 2008), and recognizes a mixed-mode approach combining paper and email survey instruments as an "effective approach to help reduce the problem of coverage error in administration of surveys" (Fincham, 2008, p. 2). Thus the diverse engagement of study participants helped to contribute to the representativeness of the study results.

However, the fact that the study participants came from a non-randomized "convenience" sample of known acquaintances of the researchers, most of whom ended up being white (66%) and highly-educated with bachelor's or master's degrees (79%), likely contributed to the high response-rate and may limit the generalizability of the results. This also could have contributed

overall to the relatively high hope scores of the participants (mean 54.59 out of 64 on the hope scale), as higher education is a frequently-used indicator of higher socioeconomic position (Galobardes, et al., 2006). This could be a confounding variable that correlates with higher hope levels as well.

#### **Recommendations for Managers of Youth Development Workers**

Based on the results of this study, the researchers cannot rule out that male and female youth workers may have different levels of hope, but cannot confidently claim that they do. Thus, we recommend that managers of youth workers interested in improving or maintaining strong hope among their staff not treat male and female groups of workers differently based on presumed levels of hope. However, since hope has been found to be both "contagiously passed" (Kretz, 2013, p. 938) from one person to another, and also something that can be taught and professionally developed in people (Luthans, 2002), the researchers instead recommend that leaders administer the Hope Scale to their staff and then derive individual plans to develop increased hope in any individuals who score low. For instance, to further develop agency or "willpower" (p. 104) in staff members with lower hope scores in this area, managers can encourage staff to go after the goals they have set, to anticipate possible obstacles and to recall previous successes (Schwartz et al., 2007). To grow in pathways or "waypower" (p. 104) aspects of hope, managers should encourage staff to break their long-term goals into short-term subgoals, to mentally rehearse steps needed to achieve these goals and to interpret disappointments along the way as points for strategic pivoting rather than personal shortcomings (Schwartz et al., 2007). Engaging hopeful managers who prioritize goal-setting and goal-pursuance among staff, and facilitating that through training, incentives and employee support could create both more hopeful places to work and more effective employees at achieving individual and organizational

goals (Schwartz et al., p. 104).

#### Notable Observations and Recommendations for Future Research

The results of this study draw attention to two key observations that would be interesting to explore through future research. First, when considering that the average Hope Scale (Snyder et al., 1991) score for the population of everyone who has been recorded taking the test is 48, which equates to about 75% hopeful on the 1-8 scale (Lopez et. al, 2000), it is interesting that our study sample's average hope scale score (men and women together) comes in quite a bit higher at 54.59, equating to about 85% hopeful on the 1-8 scale. Noting this difference, the researchers decided to do a 1 sample T-test to determine if it was statistically significant, and found  $T_{obs}$  (I-8.164I) >  $T_{crit}$  (I+/-2.028I). The observed value of the test statistic exceeds the critical value (p < .05), so the null hypothesis of no difference is rejected as there does appear to be a statistically significant difference in hope scores between this study's sample and the general population. The observed difference is probably not due to chance and the researchers wonder if that could possibly have something to do with our study sample being made up exclusively of current or former youth development workers, a career area that may be associated with workers who have higher hope. When hope was studied in teachers, for instance, hope has been found to be related to teachers' persistency in teaching (Bullough, 2011; Kelchtermans, 1999), commitment to teaching (Tirri et. al, 1999) and teacher identity formation (Estola, 2003), all aspects related to agency or pathways to some degree. Perhaps teachers, or youth workers more generally, derive higher hope from the potential of the youth they work with, or maybe the people who choose to do youth work—focused on looking ahead to develop citizens of the future—are inherently more hopeful, or maybe just having higher hope is necessary to stay in a field that often requires one to manage the challenges of working with at-

risk youth. While the researchers did not find in the current literature a specific study looking at the relationship between hope and youth workers or hope and workers in the helping professions in general compared to hope in workers in other professions, we feel there could be strong potential for this relationship to exist and recommend this to be a direction for future research.

Additionally, considering this study found no statistically significant difference in levels of hope for American male or female youth workers, while previous studies found women's hope to be lower than men's (see for example, Chaudhary et al., 2011, focused on hope in the elderly in India and Sun & Sheck, 2012, focused on hope in American adolescents) that could signify the potential for greater parity of opportunity and agency for both genders in youth work jobs in the US as compared to other countries or other professions. In India, where historically women have had fewer career pathways available to them and have been more restricted in their ability to make and act on decisions for themselves compared to Indian men, it may make sense that hope as measured by Snyder et al.'s (1991) pathway (planning to meet goals) and agency (goal-directed energy) subscales for Indian women would be lower than men who culturally are offered more pathways and agency to begin with. Additionally, adolescent girls in Sun & Sheck's (2012) study reported having more obstructed goals, greater goal frustration and lower goal-related self-efficacy than boys, which could theoretically manifest into having lower hope as adult women than men if they feel that they are facing more barriers, frustration and a lower belief that they can achieve their goals. And yet the female youth workers in this study did not demonstrate significant difference in hope scores than their male counterparts. Perhaps this could be related to the greater proportion of women (7/10) in youth work than men (Yohalem et al., 2006) and the subsequent opportunities for pathways and personal agency that having a larger presence in the field could afford women. While the bounds of this study cannot substantiate

such a claim, the researchers recommend future studies look at how levels of hope may intersect with gender parity in different national cultures and workplace organizational or career cultures.

#### **Author Contributions**

All researchers participated in the study design and coordination, development of hypothesis, and statistical analysis of data. M.K. contributed to drafting the introduction (statement of purpose, literature review, and research question and hypotheses). J.J. contributed to drafting the method section, including information regarding sample, measures, and procedures. K.T. led the team in statistical analysis, contributed to the organization of sample demographics and data, and drafted the results. K.B. project managed the team and contributed to drafting the discussion (conclusions, strengths and limitations of study, as well as recommendations for managers of youth development workers and future research). All authors provided feedback, revisions and editing before approving the final manuscript and accompanying PowerPoint presentation.

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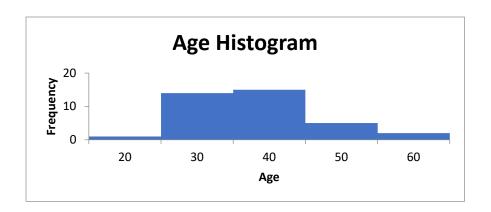
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**Appendix A**Participant Demographics Figures

Age(Years)	Frequency		
<20	1		
21-30	14		
31-40	15		
41-50	5		
51-60	2		

Gender	Frequency		
Female	18		
Male	19		



Education Level	Frequency
Less than High School Diploma	0
High School Diploma or Equivalent (e.g. GED)	1
Some college, no degree	5
Associate degree (e.g. AA, AS)	1
Bachelor's degree (e.g. BA, BS)	16
Post graduate work (e.g. graduate certificate)	1
Master's degree (e.g. MA, MS, MEd)	13
Professional degree (e.g. MD, DDS, DDV)	0
Doctorate (e.g. PhD, EdD)	0

## Appendix B

Survey with Codebook



#### PADM8410 Group Survey Project

Hello. We are grateful for your help with this study. Your participation should take approximately 5-10 minutes. We hope that you will answer all questions. However, you may skip any questions that you do not wish to answer. Please answer all questions honestly. Select one answer for each question on the survey. Mark the answers that feel right when you first read them.

Confidentiality procedure: All of your answers will be kept confidential. We will not discuss the specific information you provide with anyone. We ask for your name so that we know who has completed the survey, but as soon as we receive your questionnaire, we will assign it an ID number. We will remove your name from your questionnaire so that your answers are not linked with your name and survey results will be interpreted generically. Again, thank you for your help!

Blue denotes variable name in excel Purple denotes coded response values Red denotes notes

#### **Section 1. Participant Information**

Age (pleas	se list in years	s):	Age			
Gender: _		_ Gender	Female = 0	) Mai	le = 1	
How woul	d you describ	e yourself? (n	nark all that ap	ply) Race		
O America	an Indian or Ala	iska Native [0]	○ Asian [1]	<ul> <li>Black or Afr</li> </ul>	ican American	[2]
O White	3]					
○ Hispani	c, Latino, or Sp	anish [4] O	Native Hawaiia	an or Other Pa	cific Islander [5	1
Other: _		Not coded	l because of co	omplexity / Th	ose who mark	æd
multiple a	lso not coded					
etc.):	_	•	te abbreviation			
State	SC = 0	AZ = 1	<b>GA = 2</b>	<b>WA</b> = 3	MA = 4	NY = 5
MD = 6	WV = 7	US = 8				
•		•	ld of youth dev ership-develop		•	aching,
○ No [0]	○ Yes. pa	rt time [1]	O Yes, full	time [2]		

# 

## What is the highest level of education that you have completed? **Education**

- Less than high school diploma [0]
- High school diploma or equivalent (e.g. GED) [1]
- Some college, no degree[2]
- Associate degree (e.g. AA, AS) [3]
- Bachelor's degree (e.g. BA, BS) [4]
- Post graduate work (e.g. graduate certificate) [5]
- Master's degree (e.g. MA, MS, MEd) [6]
- Professional degree (e.g. MD, DDS, DVM) [7]
- Doctorate (e.g. PhD, EdD) [8]

# Section 2. Survey

*Directions:* Read each item carefully. Using the scale shown below, please select the number that best describes YOU and put that number in the blank provided.

# **Hope Scale (Sum of Eight Items)**

- 1. = Definitely False [1]
- 2. = Mostly False [2]
- 3. = Somewhat False [3]
- 4. = Slightly False [4]
- 5. = Slightly True [5]
- 6. = Somewhat True [6]
- 7. = Mostly True [7]
- 8. = Definitely True [8]

1. I can think of many ways to get out of a jam. HOPE1
2. I energetically pursue my goals. HOPE2
3. There are lots of ways around any problem. HOPE3
4. I can think of many ways to get the things in life that are important to me. HOPE4
5. Even when others get discouraged, I know I can find a way to solve the problem HOPE5
6. My past experiences have prepared me well for my future. HOPE6
7. I've been pretty successful in life. HOPE7
8. I meet the goals that I set for myself. HOPE8