



## Other-oriented hope: Initial evidence of its nomological net



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### ABSTRACT

Three studies with Canadian undergraduate participants sought to initiate the construct validation of a self-report measure of other-oriented hope. Study 1 generated a 16-item measure, and demonstrated that scores on it were predicted by self-oriented hope, empathic concern, and perspective-taking. Study 2 showed that other-oriented hope was predicted by self-oriented hope, compassionate goals, and interdependent and relational self-construals, controlling for socially desirable responding. Study 3 showed that other-oriented hope was predicted by quiet ego functioning; low self-interest and high other-interest; and low self-enhancement values and high self-transcendence values. Findings are discussed in relation to the broader perspectives of *other-interest* and *mental balance*, which could serve as the basis for future work on other-oriented hope.

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### 1. Introduction

If our wives could see us now! I do hope they are better off in their camps and don't know what is happening to us.

[~Frankl, 1992, p. 48.]

Frankl's compelling words illustrate *other-oriented hope*, or hope aimed at another person's betterment. The emotion theorist Lazarus (1999) argued that to hope is "to believe that something positive, which does not presently apply to one's own life, could still materialize" (p. 653). Lazarus viewed hope as an emotional state of anticipated positive goal attainment and a readiness to engage in goal-directed behaviour. Lazarus also described hope as "a cognitive (emotion-focused) coping process" (1991, p. 285) that is typically called upon under states of duress. As an emotion or a coping process, Lazarus (1991, 1999) emphasized that hope involves a blend of both positive and negative judgments and affects, reflecting the uncertainty of the occurrence of the hoped-for outcome. The aspects of hope emphasized by Lazarus overlap with those of other hope theorists. Nursing researchers Dufault and Martocchio (1985) define hope as a "confident but uncertain expectation of achieving a future good which, to the hoping person, is realistically possible and personally significant" (p. 380). In the most

influential psychological perspective on hope, Snyder and colleagues posit that hope is "a positive motivational state that is based on an interactively derived sense of successful (a) agency (goal-directed energy), and (b) pathways (planning to meet goals)" (Snyder, Irving, & Anderson, 1991, p. 287). These two alternative definitions of hope, like the definition of Lazarus, emphasize cognitive, emotional, and behavioural aspects of the hoping process.

Importantly, Lazarus (1999) acknowledged the possibility of others being the target of one's hopes. Therefore, adapting Lazarus' (1999) definition of hope to reflect its specific instantiation toward others, as well as to incorporate its emotional, cognitive, and behavioural manifestations, other-oriented hope can be defined as "believing in, desiring, and behaving in accordance with the possibility that something positive, which does not presently apply to another person's life, could still materialize".

Despite its relative neglect in comparison to the study of 'normal' hope (or, *self-oriented hope*), theoretical arguments and empirical findings favour the existence of other-oriented hope. Theoretically, Godfrey (1987) distinguished among hope aimed at one's own benefit (*hope-for-me*), hope aimed at another's benefit (*hope-for-another*), and hope aimed at a relationship with another (*shared life*, or *hope-for-us*). Similarly, McGeer (2004) contrasted egocentric hope with hope that instead reflects "alterocentric concerns of care" (p. 123), and Elliott and Olver (2002) identified *focused on the self* versus *focused on another* as an important dualism within the study of hope.

Empirically, qualitative research has documented the occurrence of other-oriented hope among such groups as parents of ill children,

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people who are themselves experiencing serious illnesses, and both informal and formal caregivers (see review by Howell & Larsen, 2015). Quantitative research aimed at describing the rate of occurrence of other-oriented hope was proffered first by Averill, Catlin, and Chon (1990), who reported that 8.7% of young adults' open-ended descriptions of a recent hope experience concerned the well-being of another person. Subsequently, Bruininks and Malle (2005, Study 2) showed that 38% of young adults' hope-related stories were 'altruistic' in nature, typically concerning hope for positive outcomes of a close other; Howell, Bailie, and Buro (2015) demonstrated that, when asked to list 10 things for which they were hopeful, 67% of undergraduate students generated at least one other-oriented hope statement; and Newton, Herr, Pollack, and McAdams (2014) showed that when middle-aged adults were asked, *What do you hope to accomplish in the future in your life story?*, 25% of responses were other-oriented and 9% reflected a composite of self- and other-oriented hope.

While theoretical arguments and empirical evidence supports the concept of other-oriented hope, another means of advancing its understanding is the development of self-report measures. The measurement of individual differences in other-oriented hope permits examining the association between other-oriented hope and related concepts and, ultimately, identifying its nomological net of antecedents, sequelae, and consequences. Efforts toward developing such scales have thus far concerned the assessment of other-oriented hope among specific populations. Wong and Heriot (2007) devised a scale of vicarious hope within a context of research on parental hopes regarding their children's illnesses; Kopelowicz, Zarate, Gonzalez Smith, Mintz, and Liberman (2003) devised the Hope for the Patient's Future scale, used to assess family members' hopes toward a loved one living with schizophrenia; and Hinds and Gattuso (1991) developed a measure of hopefulness for self and others, the Hopefulness Scale for Adolescents, aimed at youth diagnosed with cancer.

### 1.1. The current research

The aim of this research was to initiate the process of establishing a self-report measure of other-oriented hope for use with a general adult population. A construct validation approach was followed, reflecting the steps identified by Simms (2008; and based on Loevinger, 1957) of substantive validity (e.g., reviewing the literature; defining the construct; identifying the need for a new scale; developing initial items), structural validity (e.g., collecting and evaluating item responses; creating provisional scales), and external validity (e.g., determining convergent and discriminant validity). Study 1 aimed to identify and evaluate items comprising a provisional scale and to examine external relationships with self-oriented hope and empathy. It was hypothesized that other-oriented hope would be predicted by both self-oriented hope and empathy, reflecting characteristics of future orientation toward desired outcomes and concern regarding the welfare of others, respectively. Two further studies tested scale structure and convergent and discriminant validity of the newly devised measure of other-oriented hope.

## 2. Study 1

### 2.1. Method

#### 2.1.1. Participants and procedure

Study 1 participants were 258 introductory psychology students at a Canadian university. Females comprised 67.8% of the sample, and the average age was 21.37 ( $SD = 4.84$ , range = 17–48). In this and the remaining studies, consenting participants completed the package of questionnaires and received partial course credit. In this and the remaining studies, fluctuating sample sizes and degrees of freedom across analyses reflect missing values; we employed pairwise exclusion of cases with missing values.

### 2.1.2. Measures

**2.1.2.1. Other-Oriented Hope Scale.** The first author and a research assistant generated positively- and negatively-worded items to reflect other-oriented hope, following basic item-writing guidelines (Simms, 2008). A rational-theoretical approach to scale development was taken, wherein a thorough literature review served as the basis for item generation (Simms, 2008). From an initial pool of 52 items, 12 were omitted after being judged as only indirectly rather than directly focusing upon a positive outcome of another (e.g., *It would concern me a great deal if someone I knew lost their job*), thereby avoiding undue overlap with concepts such as empathy and compassion. The remaining 40 items emphasized thoughts, feelings, and actions reflective of a positive orientation toward another person's goals, consistent with the definition of other-oriented hope proffered above. Items (e.g., *The goals of other people I'm close to are as important as my own*) were rated on 6-point scales with endpoints labelled 1 (*strongly disagree*) and 6 (*strongly agree*). One item was omitted as it had kurtosis > 1.00; all other items had skewness and kurtosis < 1.00. After appropriate reverse-scoring, the remaining 39 items were subjected to a principal components analysis. Because all items were aimed at assessing the same underlying construct, and a parsimonious, single representation of the commonality among variables was sought, items with high loadings on the first unrotated component were identified (see Goldberg & Velicer, 2006). Items were retained if they had a loading  $\geq 0.40$  on the first component and cross-loadings on all other components of  $< |0.40|$ . In total, 14 positively-phrased items and two negatively-phrased items were retained, as shown in Table 1. A total score is calculated by summing across the items after reverse-scoring where appropriate, with higher scores denoting greater other-oriented hope.

**2.1.2.2. Hope.** The Integrative Hope Scale (Schrunk, Woppmann Mag, Sibitz, & Lauber, 2010) incorporates items from three existing hope measures (i.e., the Miller Hope Scale, the Herth Hope Index, and the Snyder Hope Scale). Twenty-three items assess four dimensions of self-oriented hope: positive future orientation (e.g., *I look forward to doing things I enjoy*), trust and confidence (e.g., *I have deep inner strength*), social relations and personal value (e.g., *I feel loved*), and lack of perspective (e.g., *I feel trapped, pinned down*). Items are rated on 6-point scales, with endpoints labelled 1 (*strongly disagree*) and 6 (*strongly agree*). Schrunk et al. evidenced validity by showing that the scale directly predicted quality of life and indirectly predicted depression. Total hope scores are calculated by summing across all items, with higher scores denoting greater hope.

**2.1.2.3. Empathy.** Two subscales from the Interpersonal Reactivity Index (Davis, 1980), empathic concern and perspective taking, assessed trait empathy. The 14 items (e.g., *I am often quite touched by things that I see happen*) were rated on 5-point scales, with endpoints labelled 1 (*does not describe me well*) and 5 (*describes me very well*). There is evidence that perspective taking and empathic concern correlate with independent measures of sensitivity to others (Davis, 1983). Scores are summed across items such that higher scores denote higher empathy.

## 3. Results and discussion

Table 1 shows item-level descriptive statistics for items of the Other-Oriented Hope Scale based on the Study 1 sample. Table 2 shows descriptive statistics and inter-correlations for all measures employed in Study 1. Cronbach's alpha for the other-oriented hope measure was acceptable. Other-oriented hope correlated with empathic concern, perspective taking and self-oriented hope; self-oriented hope also correlated with the empathy indices.

A regression analysis examined the prediction of other-oriented hope from self-oriented hope scores and scores on the two empathy subscales (see Table 3); gender and age were included as covariates.

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