Hope Matters

Introduction

Elizabeth J. Clark and Elizabeth F. Hoffler

Hope is an important concept, not only for individuals, but for society. We all use and rely on hope, but we may not understand it fully. Hope is an essential experience of the human condition. It is a psychological asset; a guard against despair; a way of coping; and a quality-of-life enhancer. Hope is not simple optimism, nor is it wishing. Hope does not equate with denial, and by definition, hope can never be false. Hope is a way of thinking, feeling, and acting (Clark, 2012b). Hope is flexible, evolving as situations and realities change. It is not static but has a time aspect and a consideration of the future.

Vaclav Havel, the human rights activist, playwright, and president of the Czech Republic, who spent many years in prison because of his efforts against Communist oppression, frequently used the concept of hope in his activism and in his work. He said, “Hope is a dimension of the soul, and it’s not essentially dependent on some particular observation of the world, or estimate of the situation. It is a state of mind” (Havel, 1990, p. 120).

In his book The Anatomy of Hope (2005), physician and researcher Jerome Groopman emphasized that there is an authentic biology of hope and that belief and expectation are key elements of hope. Although there are common elements, hope is not a uniform variable. There is a tendency to think that everyone hopes in a similar fashion, but as a coping characteristic, hope is individualistic, and persons have various capacities for hoping and different approaches to maintaining hope (Clark, 2012b). Personal hope is embedded in a broad social context, and a person’s hope develops within a particular family culture and within a historical framework and set of experiences. In addition, there are different types of hope. There is generalized hope, and there is hope for achieving a particular goal. Professionals, perhaps too often, may narrow their view to think in terms of therapeutic hope—hope based almost solely on the outcome of therapy (Nuland, 1995).

In contrast, there is transcendent hope—hope that transcends reality—according to which the seemingly unreachable may sometimes become reachable. Also, we now know that hope may have larger-scale applications in reducing risks, inoculating segments of society from despair, and fostering resiliency.

Greene (2012) defined resiliency as a balance between stress and the ability to cope with repeated stress. A presidential commission on mental health reported that “resilience means the personal and community qualities that enable us to rebound from adversity, trauma, threats, or other stresses—and to go on with life with a sense of mastery, competence, and hope” (New Freedom Commission on Mental Health, 2003).

There are high-hope individuals and low-hope individuals (Snyder, Cheavens, & Scott, 2005). People’s level of hope can be strengthened by caring social networks or diminished by neglect, abuse, and traumatic events. Some people—those who experience significant trauma—may become hope-lost.

An acute loss of hope—what some refer to as the “death of hope”—is very serious because a helpless person becomes a helpless person. Hopelessness is a condition of inaction that affects psychological, social, physical, and spiritual health and overall quality of life. It is easier to prevent a person from becoming hopeless than to help a hope-lost person find hope again (Farran, Herth, & Popovich, 1995). Preventing hopelessness and helping low-hope and hope-lost individuals reframe and regain hope is the goal of the therapies and efforts of social workers.

In the face of even the direct situations, social workers remain hopeful. We understand how difficult it is for people to change and maintain, how hard it is to overcome suffering, setbacks, disappointments, loss, and just plain bad luck. Even knowing this, social workers do not give up when trying to help those in poverty, those with severe dysfunctions, those who are addicted, or those on parole. We believe that families can be functional, workplaces can be healthy, and communities can be safe. Despite threats of terrorism and world unrest, we believe that peace is always preferable to war and that we have a global obligation regarding world resources and all other peoples.

This singular capacity—to be hopeful about future change—allows social workers to practice in prisons, in drug rehabilitation clinics, in domestic violence shelters, in suicide prevention centers, in child protective services, and on the battlefield. It is hope that prevents the school social worker from giving up on the difficult teenager or the probation officer from giving up on a repeat offender. It is hope that encourages social workers to practice in populations struggling with great challenges and areas struggling with unrelenting poverty, such as Appalachia,
American Indian reservations, and inner cities. Because of hope, social workers choose to work in health and mental health settings despite the prevalence of incurable diseases or chronic conditions.

As social workers, we do not live or work by denying the reality of the world today. Instead, we recognize that our collective hope transcends reality and that our combined efforts will continue to improve the world in which we live. Social workers have a passion for social justice, for fairness, for making this world a better place. It is this purpose that forms the bedrock of our careers, but it is possibility and hope that keep us moving forward.

Does this mean that social work can lay claim to the profession of hope? We believe they can (Clark, 2012a). Social workers are the holders of hope for clients, communities, and society—dispensing hope as a physician dispenses medicines or as a judge dispenses justice.

Social workers fully understand the power of hope. We recognize its utility, its essential function in solving both individual and community problems. Hope provides the framework and underlies most, if not all, of our social work interventions. We all came to the profession of social work to make a difference—to bring about positive social change—to better society (Clark, 2009). We could have chosen other professions, but we did not. We chose social work. If we ever doubt the importance of our work or the importance of the profession, we simply need to take only a moment and think what the world would be like without social workers.

If the profession of social work ended this decade, would it matter? Would it matter to those who are marginalized and devalued? Would it matter to those who live in extreme conditions and yet are invisible to the greater society? Would it matter to children who are being abused and mistreated or to the elderly who are trying to overcome obstacles to aging well? Would it matter to all of those who have lost hope and see no way forward?

As this book so aptly illustrates, those questions can be answered in the affirmative. It would matter, and matter greatly. The world would be a much less hospitable and less caring place without social work.

We recognize there are some days, weeks, and even months when our own professional hoping capacity seems low, when we are discouraged and feel ineffective. If this is your situation, we believe you will be inspired by your colleagues and their hopeful examples in the following chapters. The content will leave you energized, with your own level of professional hope restored.

The 58 authors in this text address the continuum of hope from the individual to the global. Some describe transformation through hope; others used hope as a catalyst for change. Still others write about restoring hope at the client, community, or organizational levels. Also included are descriptions of strategies for using hope clinically, for researching the concept of hope, and for exploring hope and human rights. Of particular significance for professional social workers are the chapters that describe how social workers maintain their own professional hope.

What is equally important and unique is that social workers intertwine hope at all levels and in all instances with advocacy and social justice. This linkage is what sets social work apart. We can only conclude that, as a profession, we have the potential—the social work potential—to make a great difference.

References


Clark, E. (2012b). You have the right to be hopeful. Silver Spring, MD: National Coalition for Cancer Survivorship.


Dying with dignity, clinging to hope, and making the most of it all. The words are still clinging to that fragile piece of my heart, and I want to remind you that hope matters. In fact, it matters more than we tend to profess with our lips or our lives. The tears returned as I scrolled through the news article last night. It was about Brittany Maynard.