

THE CONSTRUCT OF HOPE: EFFECTS OF HOPE ON INTEGRATION OF  
IMMIGRANTS INTO THE UNITED STATES

by

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IMMIGRANTS INTO THE UNITED STATES

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## ABSTRACT

**Purpose:** The purpose of this integrative review was to examine the construct of hope relative to integration of immigrants into the United States.

**Methods:** Following best practice guidelines for developing integrative reviews, the authors synthesized quantitative and qualitative evidence to describe the background and significance of hope in fostering success of immigrants in the United States.

Abstracts were collected using 13 search terms (*hope, health, health status, public health, holistic health, health promotion, healthcare, nursing, immigrant, immigrant experience, acculturation, integration, and assimilation*) within seven databases. Two authors independently screened the results and mutually selected references that met inclusion criteria. Three authors read and analyzed the eligible literature to extract key findings.

**Findings:** Findings address what has been reported on hope and the role of hope in successful integration.

**Clinical Implications:** Nurses should be aware of hope's role in the healthy integration of immigrants into the United States.

## The Construct of Hope: Effects of Hope on Integration of Immigrants Into the United States

In spring 2016, I (the student) set a goal to pursue Departmental Honors in Nursing by completing a thesis revolving around global health. My broad, initial interest involved investigating the lives of people living in low-income countries and how to best reach their individualized needs. I met with my Honors academic advisor, Dr. Lisa Bashore, to discuss my interests, project mobilization and the logistics of composing a senior thesis. Dr. Bashore introduced me to Dr. Pamela Frable, a public health nursing professor who was working on a photovoice project aimed at maintaining hope among English language learners (ELLs). Dr. Frable agreed to join our interests and serve as the chair of my thesis committee. Following her approval, I sought mentorship from Dr. Glenda Daniels of Nursing and Dr. Richard Enos of the English Department, both from whom I had taken classes previously. Dr. Daniels is an affiliated faculty member of Texas Christian University's (TCU) Comparative Race and Ethnic Studies program and has done extensive research in African-American health. Dr. Enos has a background in English with emphases on rhetoric and composition and offered perspectives unique from those of the registered nurse committee members.

I began attending Dr. Frable's Saturday morning English classes at the First United Methodist Church of Hurst, where we met with ELLs who emigrated from the Democratic Republic of Congo, Mexico, and Cuba. These experiences with immigrant (Glossary) English students helped me brainstorm general ideas and topics I wanted to explore more deeply. In the meantime, I composed a literature review that addressed the general construct of hope and its relationship with health. I designed a theoretical

framework (Appendix A), which hypothesized an interaction within Maslow's Hierarchy of Needs (1970), the World Health Organization's definition of health (1948), and the general construct of hope. Over the next year, the project evolved into an integrative review of the literature on hope, health, and integration of United States (U.S.) immigrants (Glossary). As I began analyzing and discussing my findings, I found relationships to this original framework I designed. Guided by Maslow's Hierarchy of Needs, I investigated hope's profound influence on the physical, social, and mental well-being (Maslow, 1970) of immigrants living in the US.

### **Community Relevance**

Integration refers to the mutual adaptation of immigrants and their host communities (Jiménez, 2011). Hope is a complex human phenomenon that supports human action and coping (Lange, 1978). Helping individuals and communities find, maintain, and restore hope can be an important public health nursing contribution toward creating conditions in which populations thrive. The existing literature explored the relationship between hope and health in the general U.S. population as well as barriers linked to the immigrant experience, but limited literature addressed hope as a means of fostering successful integration among immigrants. According to the 2016 Current Population Survey, immigrants and their U.S.-born children account for 84.3 million of the 309 million people residing in the US (27 percent) (as cited in Zong & Batalova, 2017). The State Department Worldwide Refugee Admissions Processing System (2017) reported the US admitted 84,994 refugees (Glossary) in the 2016 fiscal year, an 18 percent increase from 2015. As immigrants and host communities continue to blend together, certain determinants of health demand renewed attention. People

within the US must confront a reality wherein their health is not independent of, nor immune to, others' footsteps. To better understand the interdependence of hope, health, and immigrant integration in the United States, further research is needed.

### **Theoretical Framework**

Maslow's (1970) theory, which consists of five categories of human needs, offered insight into the development and existence of human motivation (Glossary). Maslow presented a new analysis of life's needs and uncovered their roles in driving behavior.

### **Theoretical Definitions**

According to Maslow (1970), succession within the five-tier hierarchy is contingent upon satisfying the preceding needs. *Biological and physiological needs* lie at the base of the framework: air, food, drink, shelter, warmth, sex, and sleep. *Safety needs*, i.e. protection from elements, security, order, law, stability, and freedom from fear, are only truly sought once the physiological needs are met. Satisfying the defined safety needs further motivates a person to seek *love and belongingness needs*, or friendship, intimacy, trust and acceptance, and receiving and giving affection and love. Satisfaction with love and belongingness motivates dedication to *esteem needs*, e.g. achievement, mastery, independence, status, dominance, prestige, self-respect, and respect from others. Upon grasping the basic needs of biological and physiological function and safety, and psychological needs of love, belongingness and esteem, a person craves *self-actualization*. A self-actualized person recognizes his or her personal potential, reaches for self-fulfillment, and unceasingly seeks personal growth and peak experiences (1970). Rather than emphasizing factors that hinder progress and

explaining how to overcome impeding psychopathological conditions, Maslow theorized that healthy advances in life are influenced by a person's positive motivation to achieve.

### **Operational Definitions**

*Hope.* Maslow's constructive analysis of how behavior governs needs invites discussion of hope as a contributing variable. Hope plays a critical role in a person's individual journey through life and the progress he or she makes within society. For the purpose of this review, I will refer to hope by the words of Lange (1978): "[Hope] is a mixture of feelings and thoughts which center on the fundamental belief that there are solutions to significant human needs and problems" (p. 171). Lange further described hope as "a way of dealing with the uncertainties of the present in anticipation of a future which will be more gratifying and closer to one's deeply felt needs, goals, aspirations, dreams and wishes" (p. 171).

*Health.* The World Health Organization (WHO) outlines health as "a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity." According to the WHO construct of health principles, physical, social, and mental well-being are bound inextricably. Simply put, holistic health cannot be achieved in social isolation (WHO, 1948). Concentrating within the context of health as defined by the WHO, hope may support health-promoting behaviors and increase health knowledge (Feldman & Sills, 2013). Maslow's hierarchical framework aids examination of the construct of hope and hope's relevance to health and integration (Appendix A). His theory of motivation as a cognitive and behavioral process can be moderated by hope. This integrative review is guided by the principle that motivation and hope regulate behavior together. The two are interlaced in a process through which (1) hope

potentiates motivation, (2) motivation directs action, (3) action begets achievement, and (4) achievement reinforces hope.

*Integration.* As reported in the National Academy of Sciences, Engineering, and Medicine (2015), *integration* refers to the changes that immigrants and their descendants—and the society they have joined—undergo in response to migration. Further, integration is the process by which “members of immigrant groups and host societies come to resemble one another” (Brown & Bean, 2006, para 1). Jiménez (2011) explained successful integration in five parts: 1) language, 2) socioeconomic integration 3) residential integration, 4) political integration, and 5) social integration. These five components of integration correlate to the first three steps of Maslow’s Hierarchy of needs. Socioeconomic, residential, and political integration address the basic physiological and safety needs, while language and social integration play key roles in achieving love and belongingness. In order to reach the higher levels of Maslow’s pyramid—self-esteem and self-actualization—immigrants need to be fully integrated into society. Successful integration is fundamental to an immigrant’s holistic health.

## **Methods**

### **Integrative Review**

The authors chose to create an integrative review to synthesize research results. An integrative review is an established method for knowledge synthesis that allows researchers to include a broad sampling frame for a wide range of purposes. Integrative reviews are especially suitable for comprehensively presenting complex healthcare concepts relevant to nursing (Whittemore & Knaf, 2005). Following best practice



guidelines for developing integrative reviews, the authors synthesized quantitative and qualitative evidence to describe the background and significance of hope in fostering success of immigrants in the US.

### **Procedure**

The general search process began in January, 2016, and ended in May, 2017. With the direction of Dr. Bashore and the TCU Nursing Librarian, Alysha Sapp, I began searching the literature, exclusively covering the construct of hope and hope's relationship to health. The search progressed to include immigration and integration beginning September, 2016. Abstracts were collected using 13 search terms (*hope, health, health status, public health, holistic health, health promotion, healthcare, nursing, immigrant, immigrant experience, acculturation, integration, and assimilation*) within seven databases. Two authors independently screened the results and mutually selected references that met inclusion criteria. Three authors read and analyzed the eligible literature to extract key findings.

Moher, Liberati, Tetzlaff, and Altman (2009) developed the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) to help standardize reporting in systematic reviews, in effort to increase transparency and consistency of the research process. Following recommendation by Whitemore, Chao, Jang, Minges, and Park (2014), the student presented the search process using the PRISMA framework (Appendix B).

## Findings

The final eligible literature sample included nine fully-accessible manuscripts: four quantitative and five qualitative (Appendix C). Two of these manuscripts were dissertations: one qualitative (Green 2013) and one quantitative (Luna 2013). Findings are presented and discussed in the context of two themes: *Defining Hope* and *Factors Moderating Hope's Influence*.

### Defining Hope

This set of studies demonstrated the challenges of assigning a single definition to *hope*. *Hope* is an intricate concept and may be understood and described distinctly among people of different communities and backgrounds. Within the English language, people use synonyms of the word *hope*, such as *optimism*, *wish*, *dream*, *expectation*, or *aspiration*. When communicating in a different language, people may substitute *hope* with other words or phrases. For example, the literal translation of *salir adelante* is “upward mobility,” but participants intended the Mexican cultural phrase to communicate perseverance and hope for the future (Hanna & Ortega, 2016, p. 57). The Eritrean immigrants and refugees (Green, 2013) were asked directly about *hope* and responded by labeling their feelings in terms of *hope*. Korean immigrant women (Shin & Shin, 1999), when asked about their experiences rather than specifically *hope*, expressed their hopes of new lives in America in the context of “dreaming” for better futures (p. 606).

### Factors Moderating Hope's Influence

*Hope's* interactions with background variables, such as socio-demographics (Glossary), pre-migratory and host environments, and behavioral experiences,

moderate its influence on immigrants' integration. In Mexican mothers, *hopelessness* was dependent on working status, household size, degree of family support, conflict between parent and child, and depression. Marsiglia, Kulis, Perez, and Bermudez-Parsai (2011) defined hopelessness as "the expectation that negative outcomes are inevitable or that positive outcomes will not develop" (p. 8). When these variables were assessed independently, mothers felt less hopeless when they achieved higher degrees of education and had stronger family support, and more hopeless when they lived in larger households or were unemployed ( $p < .001$ ) (2011).

Feldman and Sills (2013) illustrated how *hope* interacted differently with certain variables across ethnicities. Level of knowledge affected *hope's* influence on the Asian participants in the study ( $p < .05$ ), while perceived importance of behavior change did not. Latinos were more likely to increase healthy behaviors when they were hopeful and knew more about the health topic. However, in the Latino population, importance of behavior affected *hope's* influence ( $p < .05$ ), while level of knowledge did not. They were more likely to adapt healthy behaviors when they were hopeful and felt the health topic was important to them. Independently, *hope* was not a significant predictor of healthy behavior changes for either population.

Haitian older adults placed emphasis on feeling honored and respected by the surrounding community, as well as having the resources, such as food, transportation, and basic language skills, they needed to lead healthy lives (McCaffrey, 2008). One participant stated:

When my family and I came from Haiti I thought it was the end for me. I would never fit in this new place because of the language and I was told Americans

hate the Haitians. Now I find people who give me hope for a future here not only for my family but for me as well (2008, p. 37).

One non-Haitian resident explained that before exposure to Haitian immigrants at the senior center (Appendix D), he was “afraid to to speak with Haitians on the street” because they seemed so different (McCaffrey, 2008. p. 38). The ability to communicate with English-speakers affected the Haitians’ integration into the community. Luna (2013) discussed language brokering – the adolescent or young adult immigrant role of interpreting and translating for older family members (Glossary). Language brokering was associated with increased hope ( $p = .009$ ) and agency thinking ( $p = .001$ ) (Glossary) in adolescent Mexican immigrants.

A major theme among Burmese and Bhutanese participants was a great hope for the future of their children:

I don’t think about myself. I don’t think about what can I do for a living, or [finding a better] job. My expectation is for my kids’ education. The most impressive experience is the education for my kids. They can [. . .] learn the things that we never learned before (Hauck, Maxwell & Reynolds, 2011, p. 340).

The Korean women immigrated with similar hopes for their children to receive advanced education. One participant described “I had a hope of bringing up my children in such a country [America]” (Shin & Shin, 1999, p. 607). Participants believed that children who grew up in the US were more likely to succeed than the children living in their home countries.

Pre-migratory and host-community environments influenced immigrants’ hopes and expectations for their futures. The conditions they faced at home and in their host-

community affected the nature and levels of their hopes. Eritrean refugees recounted the hostile conditions they faced back home:

I had no hope because you don't own yourself – they [the military] tell you where to sleep, they tell you what time you have to eat, they tell you what time you have to take a shower, they tell you what time you have to go to the bathroom. So, if you don't own yourself, you don't have hope (Green, 2013, p. 143).

As one Eritrean participant cited, “The hope of getting somewhere else and pursuing whatever my dreams were at the time, such as to go to school where there is no intimidation, there's no fear, and where opportunity is available” (2013, p. 146), as motivation for leaving Eritrea. The pre-migratory conditions Eritreans faced shaped their expectations for their lives in the US. In Latino adolescents and young adults, hope levels varied according to role the participants' demographics played within the context of their host-environments (Stoddard & Garcia, 2011). Rural young adult males were more hopeful than rural young adult females ( $p < .05$ ), and urban young adult males were more hopeful than urban youth males ( $p < .10$ ). Possibly correlated to hope or hopelessness, rural adolescent females felt they were more likely to be killed by the age of 21 than urban adolescent females ( $p < .05$ ). The Latinos' host-community environments seemingly influenced their levels of hope. The Korean women expressed gratitude for new sources of hope they found in their host-community:

In America everyone, regardless of sex, can work on an equal footing.... In this sense I think that women can possess more power in America.... Now I feel proud that I have the ability to provide for my family.... Now I feel that my

thoughts are also being reflected when deciding important matters (Shin & Shin, 1999, p. 611).

## Discussion

### Defining Hope

When inspected closely, a participant's reference to *salir adelante* in context of working hard for the American dream may correspond directly to Snyder's Hope Theory (1991). Snyder dissected *hope* into two pieces: agency and pathway. The participant believed he could achieve the American dream [agency] through hard work and determination [pathway]. Eritrean immigrants and refugees responded to direct hope questions that prompted discussion specifically referencing *hope* (Green, 2013). Had the researchers asked participants to describe their expectations or their dreams, it is possible *hope* would not have been mentioned. The Korean women were asked to describe their overall immigration experience (Shin & Shin, 1999). In response, participants referenced their dreams for new lives in America, alluding to their hopes, but did not use the word *hope* itself. Similarly, in the study by Hauck et al. (2011), Bhutanese and Burmese refugees explained their hopes in terms of expectations that their children would receive educations in America.

### Factors Moderating Hope's Influence

*Hope* levels varied among individual ethnicities based on different factors that promoted or inhibited their hope. Additionally, levels varied throughout underlying communities within each ethnicity, e.g. Mexican mothers, older Haitians, and Korean women.

**Non-linear progression of needs.** Feldman and Sills (2013) rationalized that “not all goals are adopted by all people” (p. 741), specifically between different ethnicities. The results between subsamples in their 2013 study showed that hope did not directly predict behavior change, and that the variables regulating hope’s influence on behavior were unique to ethnicity (Asian vs. Latino). The authors referenced Snyder and colleagues’ (1991) Hope Theory, which, as stated earlier, explained hope as a goal-directed type of thinking.

Maslow (1943) ascertained that goals can change, depending on priority needs at the moment. According to Maslow (1943),

The less prepotent needs are minimized, even forgotten, or denied. But when a need is fairly well satisfied, the next prepotent (‘higher’) need emerges, in turn to dominate the conscious life and to serve as the center of organization of behavior, since gratified needs are not active motivators (p. 395).

Level of perceived importance significantly correlated to behavior change in the Latino subgroup, while knowledge played a greater role in behavior change for Asian participants. Analysis of Maslow’s study of behavior (1943) and Snyder’s construct of hope (1991), suggests that if a person does not prioritize a need and in turn adopt a goal to achieve that need, hope alone will not be enough to motivate behavior. Perhaps the Latino participants had personal experiences that led them to value cardiovascular health and therefore adopt the goal of heart-healthy behavior. It is possible some Asian participants felt they had sufficiently satisfied their physiological needs and were focused on pursuing higher level needs.

***Physiologic and safety needs.*** Maslow (1943) assigned *physiological and safety* needs as the most prepotent needs in his hierarchy (Appendix A). He asserted that meeting any other needs is contingent on satisfaction of these most basic needs. *Physiologic and safety needs* relevant to the process of integration include survival, financial security, and environmental security.

*Survival.* Korean, Burmese, and Bhutanese immigrants expressed hope for their children as a main drive for immigrating to the US. Maslow (1943) discussed sex as a means of meeting both physiological and love and belongingness needs, but stresses that “sex may be studied as a purely physiological need” (p. 381). Looking through Maslow’s lens, hope for the success of one’s children may be motivated by the physiological need to reproduce offspring to carry on the family.

*Financial security.* Mexican mothers experienced more hopelessness if they lived in a larger household and were not currently working. Maintaining a household with a large number of people is costly and requires greater financial capabilities. Additionally, living in a larger household increases the need for one parent (likely the mother) to stay home to take care of young children or older adults. The financial consequences may leave basic needs like food and housing unsatisfied or seemingly unattainable. Haitian older adults identified free meals and transportation assistance at the senior center as new sources of hope for their futures in America. These interventions helped ease the financial burdens Haitian individuals and families faced in their new community.

*Environmental security.* Pre-migratory and host-community environmental factors seem to affect the immigrants’ experiences with hope and well-being. The environmental hardships Eritrean refugee participants faced prior to migration



threatened their basic well-being and left them feeling generally hopeless. Their hopes for a safer life with “no fear” (Green, 2013, p. 146) appear driven by these conditions. Maslow (1943) explained, “A person who is lacking food, safety, love, and esteem would most probably hunger for food more strongly than for anything else” (p. 373). The Eritrean refugees’ basic physiologic and safety needs, such as eating and using the toilet at will, were unmet in their home country. They focused their hopes in correspondence with meeting these basic needs. The refugees explained if they did not feel they were in control of their own lives, they did not have hope for their futures. Like the Eritrean refugees, Latino female immigrants may have been less hopeful when they perceived less control over their own lives. Among Latino youth and adolescents, rural young adult Latino females reported feeling less hopeful than rural young adult Latino males. Rural Latino adolescent females also expressed a worry of being killed by the age of 21. Rural Latino females may be more likely to experience violence at a young age (i.e. domestic violence, dating violence) than their urban or male counterparts.

***Love and belongingness needs.*** Maslow (1943) described how a person longs for affection and a place in society. In the context of integration, an immigrant seeks support first from family, and then from the host-community.

***Family support.*** Family support played a role in strength and resilience (Glossary) for Mexican mothers, who felt less hopeless when they had stronger family support. Mexican mothers who were working felt less hopeless, which could be partly explained by the social interaction found in a working environment. Work relationships, especially those with other Mexican-heritage mothers, may offer supplemental family-like support.

*Host-community support.* The degree to which immigrants feel accepted in their new community influences hope levels. Older Haitian immigrants were more hopeful when they felt welcomed by their host-community. They explained they felt lonely before joining the senior center, particularly because they could not speak English and faced cultural gaps (Glossary). As cited by Jiménez (2011), a recent national survey found that “94 percent of US residents believe that ‘being able to speak English’ should be somewhat or very important in determining if someone is a true American” (p. 5). Haitian participants felt more hopeful and accepted when they had the help of a Creole interpreter at the senior center. The staff who volunteered support at the center benefited from the interactions as well. They were hesitant to speak to Haitians when they saw them because they thought Haitians were very different from them. Now, the community welcomed the Haitians’ presence and valued the new friendships.

***Self-esteem needs.*** The Korean immigrant women found a sense of achievement in America they could not reach back in Korea. They felt proud that they could independently provide financially for their families in America and felt more respected at home. They spoke of possessing “power” (Shin & Shin, 1999, p. 611) in decision-making and felt they had more control over their futures. Maslow (1943) explained that self-esteem needs are satisfied by feeling “real capacity, achievement, and respect from others” (p. 381). He classified the needs in two categories: 1) “the desire for strength, for achievement, for adequacy....and for independence and freedom” and 2) the desire for “respect or esteem from other people” (p. 382). In addition to providing tangible financial benefits, employment creates opportunities for goal-setting and achievement. As previously discussed, Mexican mothers were less

hopeless when they were employed. A sense of self-esteem, derived from the achievements and family leadership role associated with employment, could have influenced their levels of hope. The relationship among hopelessness and its determinants (working status, household size, family support, parent-child conflict, and depression) changed when the variables were assessed individually versus collectively. When the other determinants were absent, parent-child conflict and depression did not correlate significantly with hopelessness. Interpreting these data through Maslow's (1943) lens, it is possible *self-esteem needs* were sufficiently satisfied under the optimal working status, household size, and family support. Maslow (1943) explained that the consequences of unfulfilled *self-esteem needs* can progress to feelings of "weakness," "helplessness," and ultimately discouraged goals (p. 382). These experiences of helplessness and discouragement could equate to hopelessness and its correlation with depression. In the presence of satisfactory self-esteem, parent-child conflict and depression did not significantly moderate hopelessness. However, when self-esteem was not sufficiently satisfied, participants were vulnerable to other adverse influences.

Mexican-American high-school students were more hopeful when they participated in language brokering, perhaps because the process guided them to achieve something. They interpreted and translated for their families every day and helped people they cared about integrate into their community. This analysis could explain why language brokering was significantly associated specifically with agency thinking ( $p = .001$ )— if participants noted their achievements through language brokering and in turn recognized their potential to achieve again in the future.

## Implications

### Nursing

The nurse should listen closely when patients, especially immigrants, speak about their experiences with *hope* or other terms that are suggestive of hope. Understanding patients' perceptions of *hope* and the factors that make each individual hopeful is key in helping them channel hope's powerful influence on health and integration. Humans live in the context of their place of origin, family of origin, and their host community. The nurse should be aware of the individual, family, and larger community and understand how *hope* plays out on each level independently and collectively.

The nurse can prepare to foster or maintain hope by gathering information about the patient, family, and situation. When immigrant patients speak about their pre-migratory or host-community environments, the nurse should tune in for possible references to hope. The first step is to identify words that may be used in place of *hope*, as definitions of hope vary within the contexts of language and culture.

Upon establishing understanding of a patient's definition of hope, the nurse should seek out factors that promote or inhibit the individual's levels of hope. These moderating factors can be determined by assessing the patient's goals for the future—short and long-term. The nurse can then help the patient find pathways towards achieving these goals, whether they are physically, mentally, or socially-motivated.

### Host-Communities

The host-community environment profoundly influences the integration experience. Programs that promote interaction between immigrants and members of the

host-community help optimize the integration experience for both parties. Nurses can advocate for immigrants by suggesting community projects focused on fostering successful integration. Bringing people together can help them see the similarities they share and diminish the emphasis on their perceived differences.

### **Limitations**

Limitations included the complex nature of hope and the associated difficulty in establishing a definitive causal relationship between hope and health and successful integration. A limited number of studies met inclusion criteria. Variety within the set of studies was a strength and a weakness. The scope of evidence encompassed a diverse range of participants' ethnicities, but results were difficult to generalize because the studies were not repeated. Future research should investigate *hope* as an independent variable. For example, future interview questions aimed at exploring life experiences should specifically address *hope* to help clarify the discrepancy in definitions used across cultures and languages.

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## Glossary

For the purpose of this paper, I use the following definitions:

*Agency thinking*: believing in one's capacity to achieve a set-goal

*Cultural gap*: a difference between two or more cultures that inhibits understanding

*Immigrant*: a person who leaves one country and resides permanently in another

*Grounded theory*: an inductive research method that focuses on extracting apparent themes from data

*Language broker*: an adolescent or young adult immigrant who serves as an interpreter or translator for older family members

*Motivation*: a person's intrinsic drive to act or behave in a particular way

*Phenomenology*: the study of a human experience, as told by the person who lives out that experience

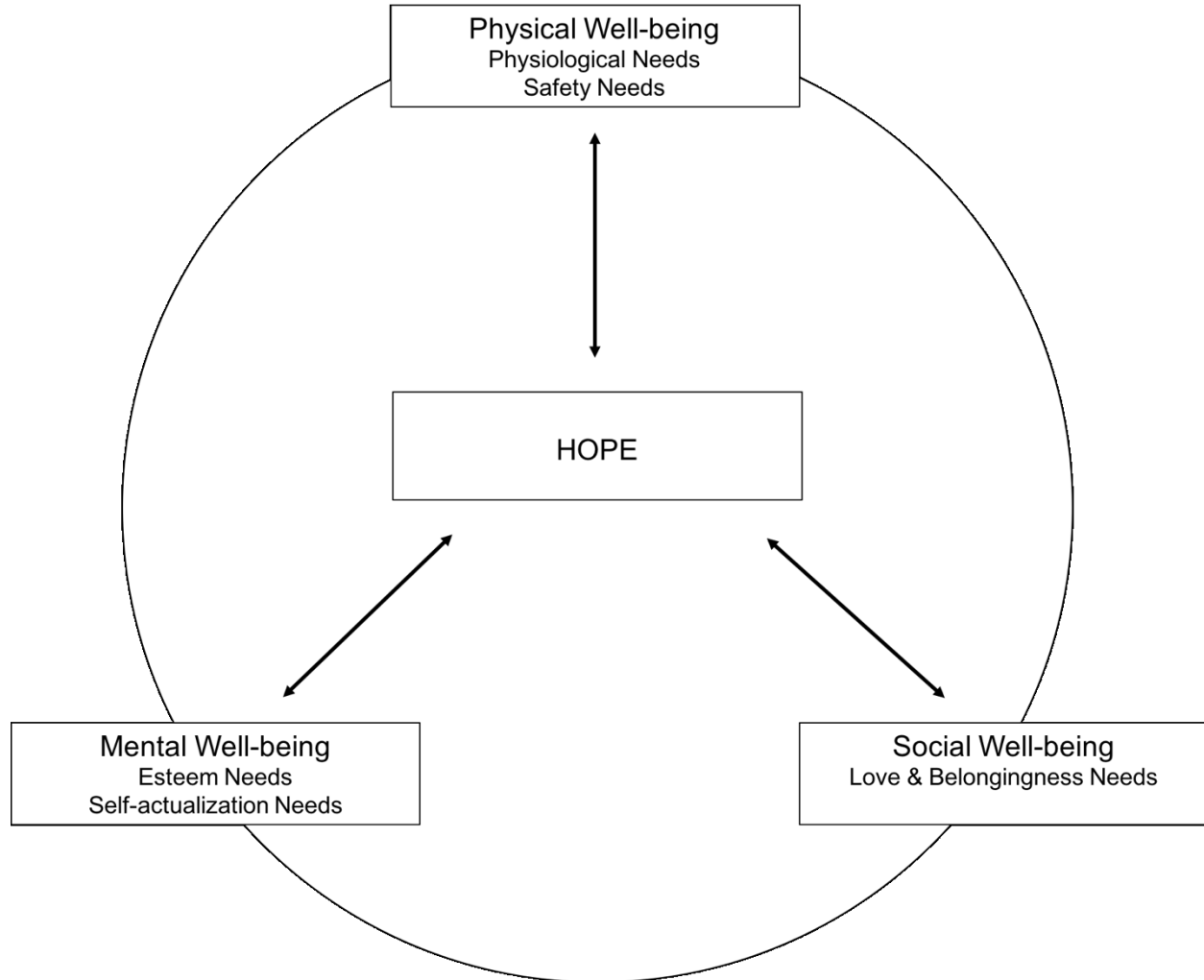
*Refugee*: an immigrant who has been forced to leave a country to escape for safety reasons

*Resilience*: the capacity to overcome adversity

*Socio-economic demographics*: social and economic statistics characteristic to a certain population, such as age, sex, education, income, occupation, religion, family-size, etc.

Appendix A

*Theoretical Framework: Hope and Maslow's Hierarchy of Needs*



The framework is organized by terms of physical well-being, social well-being, and mental well-being, in accordance with the WHO definition of health (1948). The student discussed the relationship between hope and health by exploring Maslow's Hierarchy of Needs within each term (Maslow, 1970).

### **Physical Well-Being**

**Physiological needs.** People are motivated to achieve their physiological needs on their innate biological drive to pass their DNA along to future generations (P. Frable, personal communication, November 28, 2017). Derived from whatever level of positive

expectation that certain future needs are attainable, a person will seek Maslow's physiological needs of food and shelter. Outcomes of physical well-being invite consideration of hope as a precursor to motivation. For example, a person's access to motivation for engaging in health promoting behaviors, like healthy eating and exercise, depends on the individual's established degree of hope. Examination of data from a cross-sectional survey conducted among clinic patients in the Midwestern US revealed a correlation between hope and health behavior (Nothwehr & Perkins, 2013).

Participants (n=149), 18 years and older, had body mass indexes (BMI) of at least 25 kg/m<sup>2</sup>. Measured by the 12-item Children's Hope Scale (CHS) (Snyder et al., 1997), and self-reported behavioral strategies, Nothwehr & Perkins (2013) found participants with higher self-reported levels of hope (4 to 16) were statistically significantly more likely to actively seek nutrition and exercise than participants with statistically significantly lower self-reported levels of hope (0 to 3) ( $p < 0.05$ ). Findings that hope correlates to motivation for healthier habits should be considered in weight-loss interventions and health promotion support.

**Safety needs.** People who are hopeful will seek safety and stability of achieved physiological needs. They are motivated to acquire some type of organization in order to meet Maslow's safety needs, such as security, order, and freedom from fear. For example, people with higher levels of hope may be more likely to seek health knowledge and adhere to treatment regimens. Lloyd, Cantell, Pacaud, Crawford, and Dewey (2009) addressed the relationship among hope, maternal empathy, medical regimen adherence, and glycemic control in adolescents with type 1 diabetes. Twenty-nine adolescent girls and 21 adolescent boys were examined using the CHS (Snyder et

al., 1997), and the Self-Care Inventory (SCI) (Weinger, Butler, Welch, & La Greca, 2005). According to CHS and SCI results, higher hope correlated with better adherence ( $r = 0.63$ ,  $p < .001$ ). Sustained support for these findings was found in the higher levels of hope associated with lower HbA1c levels, a test of blood sugar control ( $r = - 0.39$ ,  $p = .007$ ) (Lloyd et al., 2009). In accordance with these results, future treatment plans should assess for hope to predict likelihood of adherence. In another study regarding health promotion, the Centers for Disease Control and Prevention identified six behaviors that cause the most preventable mortalities (Allen, Carlson, van der Beek, & Ham, 2007). Behaviors included inadequate nutritional intake, sedentary lifestyle, tobacco use, unintentional and intention injury, high risk sexual behaviors resulting in human immunodeficiency virus and sexually transmitted diseases, and drug and alcohol abuse. Hopeful individuals are less likely to engage in such health-harming behaviors (Allen et al., 2007). Promotion and assessment of hope can be used in healthcare as too assess for risk of harmful behavior.

### **Social Well-Being**

**Love and belongingness.** Results comparing the U.S. gross national product (GNP) and mean life satisfaction from 1947 to 1998 indicated that higher economic status will only enhance quality of life when the most basic physiological needs are met (Allen, Carlson, van der Beek, & Ham, 2007). Pearson correlation analysis revealed sizeable increases in production of goods and services per average citizen, but there were no significant increases or decreases, in life satisfaction over time (Robison & Carrier, 2004). In addition, Allen et al. (2007) found that mental and social problems occur at greater incidence in wealthier societies. So, while the needs for food and



shelter will motivate a person to work to earn money, research on further progress in life satisfaction should encompass hope as a variable. People who are hopeful are more inclined to seek social interaction. In their search for love and belongingness, including friendship and intimacy, people are inclined by nature to maintain proper hygiene, pay attention to and follow the law, and participate in society. Snyder et al. (1997) proposed a study among school children in Kansas to investigate hope's relevance to social interaction. The participants were diagnosed with arthritis, sickle cell anemia, or cancer, and completed the CHS (1997) and the Children's Social Desirability Questionnaire (Crandall & Katkovsky, 1965). Results indicated that high levels of hope correlate to more positive perceptions of social interaction ( $p < .001$ ) (Snyder et al., 1997).

### **Mental Well-Being**

**Esteem.** Hope is an expected indicator of self-esteem, and vice versa. The person who is hopeful is more likely to seek Maslow's esteem needs, such as achievement, independence, and self-respect. Along the hopeful journey of attaining these needs, people are motivated to make progress, accomplish things on their own, and take on challenges. Harvey & Clapp (1997) organized a study to trace levels of hope and compare them to self-reported self-esteem. Subjects ( $n = 79$ ) rated themselves, rated another person, reported what they hoped and expected others would say about them, and completed a self-esteem assessment scale. After completing the pre-test, participants received fabricated reports that either confirmed or negated their hope. The subjects then rated their feelings of positivity or negativity toward themselves and the others they believed had rated them, along with their feelings of pleasure or disappointment. The research showed that subjects with lower

levels of hope also reported lower self-esteem than those with higher hope ( $r = .26$ ) ( $p < 0.5$ ) (Harvey & Clapp, 1965). In addition, the individuals with lower expectations were more heavily impacted by negative feedback and less affected by positive feedback than those with higher hope (Harvey & Clapp, 1965). In concurrence with these findings, Korner (1970) found that hope offers strong coping value. Korner (1970) summarized hope's benefits in the coping process; "If the outcome may involve disappointment, threat, destruction, and despair, man's need for protection becomes overwhelming. Hope induces a feeling of 'assumed certainty' that the dreaded will not happen, that despair will not occur" (p. 134). Korner's discovery implies that people with high hope possess a healthy potential to persevere through adversities in life, like disease and illness. Hope should be promoted through encouraging healthy behavior, making knowledge available, and providing sensitive care.

**Self-actualization.** Self-actualization is a strong motivator for continuously setting and reaching goals, taking advantage of opportunities and experience, and exploring one's meaning in life. Self-actualizers are interacting fully with society because they are constantly seeking to understand other's needs. At the point in which a person recognizes his potential, reaches for self-fulfillment, and yearns for further personal growth and experiences, he is hoping for further life-satisfaction. Sumerlin (1997) used the Brief Index of Self Actualization, the Hope Scale (Snyder et al., 1991), and a subjective health and life satisfaction rating. Undergraduate and graduate students ( $n=149$ ) of a large university were assessed with expectations of finding correlations among self-actualization, hope and life satisfaction. Calculations by Sumerlin (1997) revealed a positive correlation between self-actualization and hope ( $p$

< .001), and the concept of striving was positively correlated with feelings of fulfillment. Interestingly, women's scores on the Brief Index of Self-Actualization were higher than men's (Sumerlin, 1997). These results warrant further research related to self-actualization and gender differences.

Self-actualization may not be reached in a state of despair, or hopelessness. The natural progress leading up to Maslow's highest achieved need is bound to a state of hopefulness. As Lange (1978) pointed out, the "major differences between hope behavior and despair behavior include levels of activity, comfort, relatedness to people, and competence" (p. 174). Each of these behaviors is managed within the three elements of health, as well as within Maslow's categories of needs. Each variable holds essential roles in the existence of the others. As previously stated, health cannot be achieved in isolation; complete well-being of the physical, social, and mental self is founded in hope and entirely dependent on wholesome coordination within the being. Holistic health should be approached accordingly by patients and physicians.

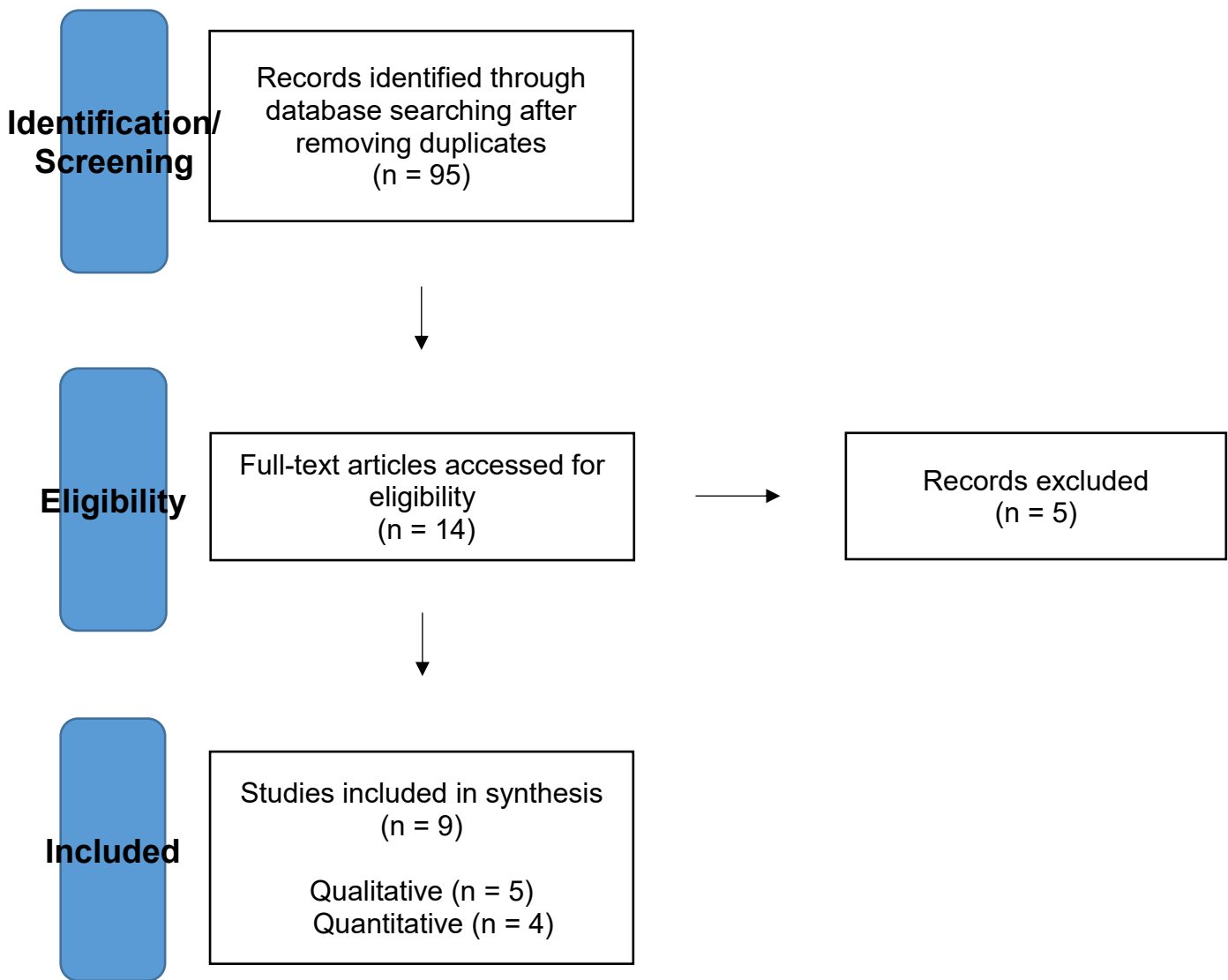
Appendix B

*PRISMA*

Databases: Academic Search Complete, Cinahl Complete, Global Health, Medline Complete, ProQuest Nursing and Allied Health, PsychINFO

Search terms: acculturation, assimilation, immigrant, immigrant experience, integration, health, healthcare, health promotion, health status, holistic health, hope, nursing, public health

\*Limiters: published in U.S., abstract available, English



Appendix C

*Summary of Individual Evidence*

*Summary of Individual Evidence*

<b>Citation</b>	<b>Design/purpose</b>	<b>Sample</b>	<b>Results</b>	<b>Strength of Evidence<sup>a</sup></b>
Feldman & Sills (2013).	Quantitative correlational Quasi-experimental  Test hope's ability to predict CVD knowledge and health-promoting behaviors following CVD education	n = 425 immigrants  Latino (n = 272) Asian (n = 119) White (n = 12) Multi-ethnic (n = 11) African (n = 6) Indian (n = 4) Un-reported (n = 1)	<ul style="list-style-type: none"> <li>• Hope x knowledge predicted health-behavior changes in Asian subsample (p &lt; .05).</li> <li>• Hope x importance predicted health-behavior changes in Latino subsample (p &lt; .05)</li> </ul>	Level II
Green (2013).	Qualitative Interviews  Reveal role of hope in how East African refugees survive, cope, and grow in the face of adversity	n = 4 Eritrean refugees and immigrants English-speaking	<ul style="list-style-type: none"> <li>• Eritrean refugees and immigrants equated hope to life and hopelessness to life being lost.</li> <li>• Participants portrayed hope as critical to survival.</li> </ul>	Level III

Hanna & Ortega (2016).	Qualitative Interviews Grounded theory  Understand experience of Mexican immigrants	n = 7 Mexican immigrants 27 ≥ 54 years old  Male (n = 2) Female (n = 5) Legal residents (n = 2) Undocumented (n = 5)	<ul style="list-style-type: none"> <li>Mexican immigrants possessed an ability to persevere they call <i>salir adelante</i>, which helped them believe they can achieve the American dream.</li> </ul>	Level III
Hauck, Maxwell and Reynolds (2011).	Qualitative Interviews Grounded theory  Reveal acculturation experience of Burmese, Bhutanese, and Iraqi immigrants.	n = 46 Middle-Eastern refugees and immigrants  Burmese (n = 15) Bhutanese (n = 15) Iraqi (n = 16)	<ul style="list-style-type: none"> <li>Burmese and Bhutanese immigrants focused their hope on the future of their children.</li> </ul>	Level III
Luna (2013).	Quantitative descriptive correlational Linear multiple regression Non-experimental  Investigate experience of Latino Language Brokers	n = 63 Mexican immigrants American high-school students living in Oregon  Born in Mexico (n = 5) Born in U.S. (n = 58) Male (n = 18) Female (n = 44)	<ul style="list-style-type: none"> <li>Greater frequency of language brokering in Mexican-American youths significantly correlated to increased hope (p = .009) and increased agency thinking (p = .001).</li> </ul>	Level III



Marsiglia, Kulis, Perez, Bermudez-Parsai (2011)	<p>Quantitative descriptive longitudinal Linear multiple regression Non-experimental</p> <p>Examine factors correlated to women's self reported hopelessness symptoms</p>	<p>n = 136 Mexican immigrants Mothers of adolescents ages 14-18 English-language learners Living in Arizona</p>	<ul style="list-style-type: none"> <li>• Mexican immigrant mothers were less hopeless when employed, received higher education, and had greater family support (<math>p &lt; .001</math>).</li> </ul>	Level III
McCaffrey (2008).	<p>Qualitative phenomenology</p> <p>Describe integration experience of Haitian older adults into the community</p>	<p>n = 16 Haitian immigrants ≥ 65 years-old Creole-speaking only</p> <p>Male (n = 8) Female (n = 8)</p>	<ul style="list-style-type: none"> <li>• Community-wide interventions aimed at health and well-being made older Haitian immigrants feel accepted and hopeful for self and families' futures in US</li> <li>• The community identified language as the greatest barrier to integration.</li> <li>• Members of the host-community welcomed the Haitians after learning they were more similar than different.</li> </ul>	Level III

Shin & Shin (1999).	Qualitative phenomenology  Describe acculturation experience of Korean immigrants	n = 6 Korean women immigrants Ages 35-55 Living in New York City	<ul style="list-style-type: none"> <li>• Korean immigrant women hoped and dreamed for new life in America, especially for their children.</li> <li>• Upon arrival, experienced nostalgia, alienation, and cultural gaps.</li> </ul>	Level III
Stoddard & Garcia (2011)	Quantitative Secondary data analysis Descriptive cross-sectional Community-based participatory research Non-experimental  Investigate protective nature of hope among Latino adolescents	n = 98 Latino immigrants 12 ≥ 24 years old Rural and urban settings in a Midwestern state	<ul style="list-style-type: none"> <li>• Among Latino immigrants, rural young adult males were more hopeful than rural young adult females (<math>p &lt; .05</math>).</li> <li>• Urban young adult males were more hopeful than urban youth males (<math>p &lt; .10</math>).</li> </ul>	Level III

a

<sup>a</sup> Evidence appraised using Johns Hopkins Nursing Evidence-Based Practice Model, Appendix D: Evidence Level and Quality Guide

Appendix D

*Annotation of Evidence*

Articles we (the student and faculty) selected for synthesis met criteria for one of two categories: “Significance of Exploring Hope as it Relates to Integration” or “Hope’s Role in Fostering Successful Integration.” This appendix provides annotation of each article we included.

### **Significance of Exploring Hope as it Relates to Integration**

Feldman & Sills (2013) published a quantitative article that investigated hope’s influence on changing cardiovascular health behaviors. Researchers included 425 participants, 272 of whom were self-reported Latinos and 119 Asians. The remainder of the participants were white ( $n = 12$ ), multi-ethnic ( $n = 11$ ), African American ( $n = 6$ ), Indian ( $n = 4$ ), and unidentified ( $n = 1$ ). Participants had been in the US. a mean of approximately 15.7 years. The procedure began with each participant filling out a pre-screening questionnaire and receiving a health screening, including a finger stick, blood pressure measurement, and height—weight measurements. Participants received results of their screenings immediately, along with basic cardiovascular risk-factor education, including the recommendation to decrease saturated fats in their diet and increase exercise by 10 minutes a day. Participants were then post-screened and invited to attend optional “enhanced education booths.” One month later, researchers contacted participants on the telephone. Latino participants rated the importance of diet and exercise change higher than Asian participants ( $p = .02$ ). Latinos attended more education booths ( $p = .01$ ). At one- month follow-up, Latinos reported they reduced their fat and salt intake, as well as increased their exercise levels, more than Asian participants ( $p = .02$ ). Within the Latino subsample, analysis showed a connection between *hope x perceived importance*. In the presence of hope, higher levels of

perceived importance influenced reduced salt and fat intake, increased exercise, and increased information seeking. *Hope x importance* did not significantly influence Latino's decisions to visit a doctor in the last month. Analysis within the Asian subsample yielded significant results when testing the effects of *hope x knowledge* on health-promoting behavior at the one-month follow-up. In the presence of hope, increased knowledge predicted decreased fat and salt intake and increased the likelihood a participant had visited the doctor in the last month.

Green (2013) conducted a qualitative study on the lived experience of East African refugees using community-based participatory research. Data collection revolved around participants' subjective descriptions of their personal and related experiences with hope and hopelessness. The researcher directed the conversation using four overarching topics: 1. Participants' definitions of hope and hopelessness, 2. Participants' personal experiences of hope throughout the hard times in their lives, 3. Participants' experiences of hope as helpers to other survivors of war and displacement, and 4. Participants' recommendations to human service providers working with East African refugees and immigrants. The participants most associated hope with relation to living and survival. The themes of hope equating to life and hopelessness equating to no life recurred throughout the interview: "If a person is hopeless, then there's no life" (p. 142). One proverb seemed to encompass the group's shared understanding of hope: "If you lose some money, nothing is lost. If you lose some friends, something is lost. If you lose hope, everything is lost." (p. 142) Participants discussed that their hopes shifted over time depending on the environment around them. For example, one participant explained how he used to have a hope of returning back to Eritrea after the

independence war, but when political corruption took hold, his dream shifted toward hoping he could one day take his family to visit his homeland.

Hanna and Ortega (2016) conducted a qualitative, grounded theory (Glossary) study on the lived experience of Mexican immigrants. Participants included seven Mexican immigrants living in Denver, Colorado, between 27 and 54 years old, two of whom were legal residents and five who lived undocumented in the US. Each participant was asked, "What is the lived experience of Mexican immigrants living in Denver, Colorado?" One theme that stood out in analysis was the immigrants' belief in their ability to *salir adelante*, a term that came up in the interviews a total of 33 times. *Salir adelante* directly translates in English to "upward mobility" (p. 57), or to do what one needs to do in order to move forward toward a better life. Upon further probing the participants about the definition, researchers discovered the term holds cultural meaning and alludes to internal strength and perseverance rather than the more literal translation that might suggest a competitive context. One participant described *salir adelante* as "I started to like it [United States] because of the money I made and I began to *salir adelante* and everything" (p. 58). Another stated, "It would be good if one would try hard at work and learn English and not do bad things, *salir uno adelante*" (p. 59). A third explained "The children that are American citizens...many of them are studying, *saliendo adelante*" (p. 59). Analysis concluded that *salir adelante* referred to Mexican immigrants' abilities to persevere in the face of adversity and their belief that they can achieve the American dream through hard work and determination. As one participant stated, "One comes to the US to *salir adelante*" (p. 58).

Stoddard & Garcia (2011) published a secondary analysis of a community-based participatory research study on hopefulness in Latino youth. They analyzed results for 98 self-reported immigrants, sub-analyzing according to age (12-17 = youths) vs. (18-24 = young adults), gender (male vs. female), and location (urban vs. rural) of participants. Questions pertaining to the theme of hope included “Are you hopeful about your future?” and “Do you feel you can reach your dreams for the future?” Overall, 44% (n = 35) of the 98 participants indicated they were hopeful about their future and 25% (n = 24) were confident they would reach their dreams. Within secondary analysis, the question “Are you hopeful about your future?” yielded significant results. Rural young adult males were significantly more hopeful about their futures than rural young adult females ( $p < .05$ ) and urban young adult males were significantly more hopeful about their futures than urban male youths ( $p < .10$ ). Differences in results related to achieving dreams for the future were not significant between subgroups.

### **Hope’s Role in Fostering Successful Integration**

Hauck, Maxwell and Reynolds (2011) investigated the acculturation experience of Burmese, Bhutanese, and Iraqi immigrants. 46 refugees and immigrants from Burma (n = 15), Bhutan (n = 15), and Iraq (n = 16) participated in the qualitative, grounded theory study. Each participant answered 34 questions related to their employment and education, expectations and experience of life in the US, cultural and identity changes, social support, and perceived stress. Burmese participants felt their hope for a better life in America had been met. Two-thirds of Iraqi participants did not feel their expectations for financial stability, employment, or education were met in the US. Overall, the Burmese and Iraqi individuals were satisfied with the “personal freedom they found in

the US” (p. 339). Hope for success of the future generation emerged as a prominent theme for Burmese and Bhutanese immigrants: “I don’t think about myself. I don’t think about what I can do for a living, or [finding a better] job. My expectation is for my kids’ education. The most impressive experience is the education for my kids. They can [...] learn the things that we never learned before” (p. 340).

Luna (2013) presented quantitative analysis on the experience of “language brokering” (Glossary). 63 self-identified Latino youths participated, all of who were high school students living in Oregon. The students were between 14 and 18 years old, 5 were born in Mexico, and 58 in the US. Luna used the Adult Hope Scale (Snyder et al., 1991) to explore the students’ experiences of hope. She investigated the concept of language brokering, or the role of interpreting and translating for older family members that children and adolescents of immigrant families often take on. The researcher hypothesized that as frequency of language brokering increased, students’ levels of hope would increase. Luna’s results reflected a significant correlation between language brokering and adult hope ( $p = .009$ ), as well as for agency thinking ( $p = .001$ ). Results were not significant for pathway thinking. She determined that language brokers may respond to problems more adaptively than immigrant students who do not serve as interpreters for their families.

Marsiglia, Kulis, Perez, and Bermudez-Parsai (2011) published a quantitative, descriptive longitudinal, linear multiple regression study investigating hopelessness in 136 Mexican-heritage women living in the Southwest. They assessed hopelessness using Beck et al.’s (1974) and calculated socioeconomic status using the U.S. Department of Health and Human Services’ federal poverty guidelines (FPG).



Researchers measured family support according to four items scaled 1-5: 1) "Family members are supportive of each other during difficult times" 2) "Family members discuss problems and feel good about the solutions" 3) "Family members consult other family members on personal decisions" 4) "Family members feel very close to each other." Analysis of the variables to assess their relationship to hopelessness revealed Mexican immigrant mothers were more hopeful when they were currently working, when they were more educated, and when they had greater family support ( $p < .001$ ).

In a quantitative, phenomenological study (Glossary), McCaffrey (2008) explored the effects of a senior citizens program on older Haitian adults' integration into the greater community. 16 participants aged 65 and older enrolled in the study, including eight men and eight women. Researchers conducted interviews using an English-Creole interpreter and asked participants to describe their "experience of coming to the center, being involved in center activities, and being with other older adults." Analysis of interview data revealed such interventions made the immigrants feel 1) "accepted, welcomed, and valued in a new community" and 2) "hopeful for a good life in a new place" (p. 37). At the senior citizens center, community volunteers provided meals, information and assistance for accessing social services, and opportunities to obtain other resources such as free senior bus passes. Additionally, the center held parties for holidays like Mother's Day, Father's Day, and Grandparents' Day. The health-promoting interventions offered at the center made the immigrants feel hopeful about their future and their families' future in the US. Non-Haitian members of the center came forward to say that before meeting the Haitians, they thought of them as non-Christians who practiced Voodoo. Now, the community saw them as nice and polite people who were

grateful for the services they received and the friendships they formed. Before joining the integration program, the participants felt they were very different from the other people living in the US and unwelcome. After participating in the program, the Haitians had hope they would make new friends at the center ultimately fit in with the people living around them. They stated they felt more hopeful because they recognized that others valued their presence in the community.

Shin and Shin's (1999) qualitative, phenomenological study explored the immigration experience of Korean women. Participants included six Korean women, ages 35 to 55, living in New York City. Most participants immigrated to the US with ambiguous understandings of immigration and hope for a better life. One participant described how she thought "10 years in a foreign country would be better in many ways than 10 years in Korea." Researchers identified reoccurring themes and assigned four development stages to Korean immigrant women's experiences: Dreaming, Conflicting, Renunciation, and Remorsing. They immigrated with the idea that their children will receive advanced educations and success would come with the new territory. When the participants arrived in America, they experienced "nostalgia for [their] homeland, alienation, and [cultural] gaps that gave [them] great pain and required much time to overcome" (p. 607).