

# HOPE

## RISING

An Evaluation of the  
**19<sup>th</sup> Annual International  
Family Justice Center Conference**

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**September 2019**



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# EXECUTIVE SUMMARY

The purpose of this report is to present the assessment results for the 19<sup>th</sup> Annual International Family Justice Center Conference held in San Diego, California from March 19-21, 2019. The conference was hosted by the Office on Violence Against Women and the Office for Victims of Crime in the United States Department of Justice, Verizon, and Alliance for HOPE International.

A pre-test, post-test design was implemented through the use of an anonymous web-based survey conducted by the University of Oklahoma's Hope Research Center.

**293** Pre-Conference surveys were completed, and **211** Post-Conference surveys were completed. **100** surveys were matched for analyses of change.

## DEMOGRAPHICS

Participant demographics from the pre-conference assessment showed: Participants report a significant increase in their understanding of Trauma Informed Practice.

**SEX:** **83.9%** Female; **83.9%** Male

**AVERAGE AGE:** **42.05** Years of Age

**RACE/ETHNICITY:** **72.3%** White; **15.1%** Hispanic;

**7.9%** African American; **4.7%** Other

**PROFESSIONAL ROLE:** **35.9%** Advocates; **10.7%** Law Enforcement Officers; **8.5%** Representative of the Courts; **5.2%** Therapists; **1.7%** Survivors; **38%** Other.

## IMPACT OF CONFERENCE

- **87.8%** of participants report an overall satisfaction with the conference.
- **86.3%** of participants agree the content presented at the conference enhanced their knowledge.
- **84.3%** of participants would recommend this conference to others in their community.

## HOPE AND WELL-BEING

- Hope and well-being indicators showed a **statistically significant improvement** from pre- to post-conference assessments
- Participants report a significant increase in understanding of Hope.
- More than **50%** of participants showed a **statistically significant increase** in their Hope scores.

## PREVALENCE OF ACE

- The average ACE score for the participants was **2.64**. Additionally, **31.7%** report an ACE score of 4+
- ACE scores for conference attendees are **significantly higher** than the US adult population

The results of this evaluation show the International Family Justice Center Conference focus on trauma-informed and hope-centered training and peer-to-peer discussions have a measurable impact on hope and well-being in attendees. Alliance for HOPE International continues to demonstrate an evidenced-based commitment to improving hope and well-being for survivors, children exposed to domestic violence, and those working in the field who are committed to ending violence in their communities.

# BACKGROUND

Alliance for HOPE International is dedicated to creating pathways to hope for survivors of violence and abuse and their children. The Alliance hosts innovative programs and initiatives focused on reducing domestic violence and sexual assault and related violence and abuse in the United States and around the world.

The Alliance is one of the leading systems and social change organizations in the country focused on creating innovative, collaborative, trauma-informed approaches to meeting the needs of survivors of domestic violence and sexual assault and their children. Alliance for HOPE International and its allied Centers serve more than **150,000** survivors of domestic violence and sexual assault and their children each year in the United States. The Alliance supports multi-agency Centers in more than ten countries and trains more than **10,000** multi-disciplinary professionals every year.

The Alliance serves as the technical assistance and training provider for the U.S. Department of Justice, Office of Violence Against Women (OVW) for federally funded Family Justice Centers and similar multi-agency models and supports Centers and multi-agency collaboratives in more than twenty countries. The Alliance also serves as the comprehensive training and technical assistance provider for the U.S. Department of Justice, Office for Victims of Crime (OVC), on a National Polyvictimization Initiative involving six Family Justice Center demonstration sites across the country.

The mission of Alliance for HOPE International is to create pathways to hope for women, children, and men who are victims of domestic violence and related sexual assault through collaborative, integrated multi-disciplinary centers, teams, and initiatives in order to break the generational cycle of violence and abuse in families across the United States and around the world.

The Alliance's vision is

“A future where all the needs of victims are met, children are protected, abusers are held accountable, violence fades, economic justice increases, families heal and thrive, hope is realized, and we **ALL work together.**”

The Alliance's programs include:

[The Training Institute on Strangulation Prevention](#); [VOICES](#), a survivor-led advocacy network; the [Justice Legal Network](#) (civil legal services for survivors), [Camp HOPE America](#) (the first evidence-based camping and mentoring program in the United States focused on helping children exposed to domestic violence), and the [Family Justice Center Alliance](#), which supports developing and operating Family Justice/Multi-Agency Centers across the country and around the world.

The Family Justice Center Alliance is the umbrella organization for all Family Justice/Multi-Agency Centers across the United States and around the world. The Alliance has been hosting or co-hosting an Annual International Family Justice Center Conference for 19 years that brings together professionals working with a multi-disciplinary approach in the areas of child abuse, sexual assault, domestic violence, elder abuse, and human trafficking. The conference also attracts elected officials, policy makers, business and faith community leaders, and others interested in collaborative approaches focused on intervention and prevention strategies. Attendees often comment on the community-oriented nature of the Family Justice Center Conference and nearly half the attendees come back year after year. Both OVW and OVC co-sponsored the conference in 2019.

## BACKGROUND

The Alliance, its allied, affiliated Centers, and all its faculty members at the Annual Conference adhere to a set of Guiding Principles (shown below) that focuses on trauma-informed, hope-centered work.

The Alliance focused in 2019 on creating tracks that represented each program and focus area of the Alliance. They also selected speakers with a strong reputation for public speaking and challenged each speaker to focus their remarks in the context of trauma-informed and hope-centered work. All speakers were individually screened and vetted by Alliance team members.

In 2016, the Alliance collaborated with the University of Oklahoma to evaluate the relationship between Hope, Resiliency, Adverse Childhood Experiences, and well-being in the lives of those attending the Alliance’s annual conference. Each year since,

the Hope Research Center has conducted a conference evaluation. The Alliance’s conference is the first annual use of the Hope and ACE Scales at a national or international domestic/sexual violence conference. The motivation for surveying conference attendees has been inspired by Hope Theory and the Alliance’s commitment to begin measuring all programs, initiatives, and activities through the lens of the science of hope. As noted above, the conference draws a multi-disciplinary audience including law enforcement officers, prosecutors, system-based advocates, community-based advocates, doctors, nurses, therapists, judges, criminal defense attorneys, civil attorneys, probation/parole officers, elected officials, camping and mentoring program professionals, job training program officers, survivors of violence and abuse, faith community members, school system leaders, and many others.

## FAMILY JUSTICE CENTER GUIDING PRINCIPLES



# CONFERENCE DESCRIPTION

The Alliance's 19th Annual International Family Justice Center Conference included training and interactive peer-to-peer discussions on issues related to the handling of domestic violence, child abuse, sexual assault, strangulation, elder abuse, human trafficking and stalking cases. The theme of the conference was:

**“Hope Rising.”**

The three-day conference focused on trauma-informed, hope-centered promising/best practices for all types of professionals. Ten tribal nations, thirty-seven states, and nine countries were represented among the attendees. The agenda included plenary sessions, workshops, and social gatherings designed to provide training, education, and vicarious trauma mitigation for professionals working in the field of violence intervention and prevention. The conference is the largest annual gathering nationally or internationally of professionals working in Family Justice/Multi-Agency Centers where professionals come together under one roof – allowing adult victims and their children to come one place to access services and support – instead of victims being forced to go from place to place and agency to agency, telling their stories over and over again.

## PURPOSE OF THE REPORT

The purpose of this report is to examine the impact of the 19th Annual International Family Justice Center Conference for conference participants. The research agenda for the Alliance for HOPE International is to advance a framework of hope-centered and trauma-informed work. In that context, this study examined hope as a coping resource for those who have experienced trauma. Findings from this study will be used to further communicate the science and power of hope within the Family Justice Center framework.

## CONFERENCE FOCUS AREAS

The 2019 Conference included seven tracks with the following focus areas:

1. Effective Handling of Non-Fatal Strangulation Cases
2. Expanding of Family Justice/Multi-Agency Centers
3. Working at the Intersections of Co-Occurring Trauma (Polyvictimization)
4. Improving the Law Enforcement Response
5. Best Practices for Civil and Criminal Justice Professionals
6. Trauma Informed Advocacy
7. Camp HOPE America: Breaking the Cycle



# HOPE THEORY

**HOPE** is a future expectation of achieving the goals we set in combination with the belief that we have the pathways and willpower to pursue those goals (Hellman & Gwinn, 2017; Snyder 2002). Hope theory specifies an iterative relationship between agency (willpower) and pathway (waypower) thinking as it relates to goal pursuits.

## AGENCY THINKING

reflects the motivational aspect of hope theory. To the extent that a person can devote mental energy to begin and continue a strategy toward attaining the goal they would be considered agentic. Agentic thinking would require that one desires the goal as well as believing they had the capacity to pursue, sustain, and achieve the goal (Arnau, Rosen, Finch, Rhudy, & Furtunato, 2007).

## PATHWAYS THINKING

reflects the ability of the individual to conceive one or more mental strategies to goal attainment. Hopeful people are able to clearly articulate viable pathways toward their goals. Moreover, they are able to develop alternative strategies toward a desired goal when faced with a barrier. Snyder (2002) articulates that individuals with high hope will be confident in their ability to pursue their chosen pathway. Hope theory further prescribes that both agency and pathways are necessary components of hope. Any deficit in willpower or pathways thinking reflects lower hope. Neither agency nor pathway thinking alone is sufficient to sustain hope. Achieved successes in the pursuit toward a goal will enhance motivation and desire (agency). Likewise, energized and excited thoughts about a goal encourage thoughts related to our planning how to achieve the goal and problem-solving potential barriers.

## SIGNIFICANCE OF HOPE

Hopeful people are more likely to flourish, achieve their goals, and experience happiness. Hopeful individuals are able to identify productive paths towards reaching their identified goals, and manage stress when experiencing adversity (Chang, 1998; Irving, Snyder, & Crowson, 1998; Snyder, 2002). Hope has a positive influence on individual health and wellbeing (Gallagher & Lopez, 2009;). Hope is associated with higher positive emotions and lower negative emotions (Feldman & Snyder, 2005; Mascoaro & Rosen, 2005; Michael & Snyder, 2005).

In terms of coping strategies, hopeful people are more likely to engage in healthy coping strategies (Roesch, Duangado, Vaugh, Aldridge, & Villodas, 2010). In this context, hope has been found to be a psychological strength buffering the effects of adversity, predicting adaptive behaviors, and malleable to hope interventions (Cheavens et al., 2005; Klausner et al., 1998).

Hope has been identified as more significant than resiliency in predicting wellbeing and long-term positive outcomes in trauma-exposed children and adults. (Hellman, Gwinn, 2017; Hellman, Featherngill, 2018; Hellman, Munoz, 2019, at press).

# METHOD

## SUBJECTS & PROCEDURE

### CONFERENCE ATTENDEES

Approximately **14** days prior to the conference, individuals registered for the conference and pre-conference were sent an email from Alliance for HOPE International welcoming them to the conference and asking them to participate in a web-based pre-conference assessment. This email explained the voluntary nature of the assessment and clarified that all responses would remain anonymous.

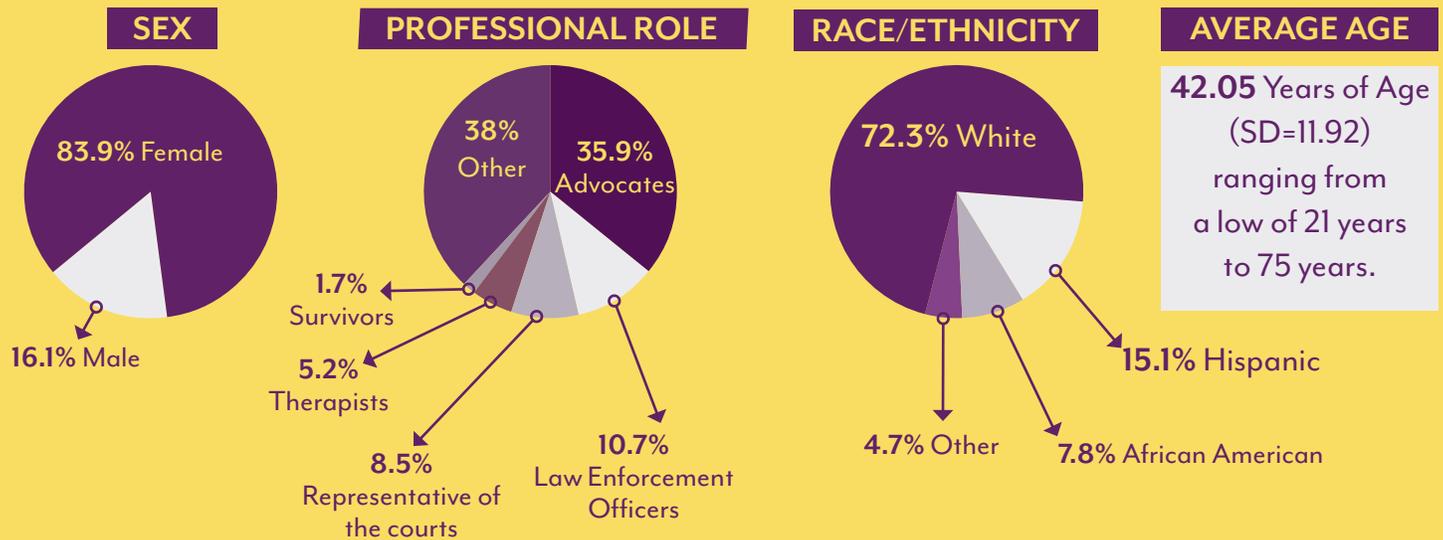
Approximately **7** days after the conference, these individuals were provided an email link to the post-conference assessment. A total of **293** individuals completed the pre-conference assessment and **211** individuals completed the post-conference assessment. While the

numbers differ across variables due to missing data, initial analyses demonstrated that **100** surveys could be matched to both pre and post-test.

Those registered for the conference received an email before to the conference requesting them to complete a pre-conference survey with a link to the University of Oklahoma’s online survey portal. It included this text: “Thank you in advance for completing the survey fully and honestly. It will enrich the experience of all conference participants and help us focus on our work together on trauma, health, hope, and healing.” In subsequent reminders, the same text was used by the following language was added: “If you have already completed the survey, you cannot complete it again.”

## DEMOGRAPHICS

Participant demographics from the pre-conference assessment showed:



# ADVERSE CHILDHOOD EXPERIENCES

**A**dverse childhood experiences (ACEs) are known to be associated with negative consequences across the lifespan and represent a serious public health concern. Left untreated, those who have experienced child maltreatment are more likely to experience poor mental health, engage in health risk behaviors, and suffer physical diseases related to increased morbidity (Anda, Brown, Felitti, Bremner, Dube, & Giles, 2007; Bellis, Lowey, Leckenby, Hughes & Harrison, 2013; Dube, Anda, Felitti, Croft, Edwards &

Giles, 2001; Dube, Anda, Felitti, Chapman, Williamson, & Giles, 2001; Hillis, Anda, Felitti & Marchbanks, 2001; Williamson, Thompson, Anda, Dietz & Felitti, 2002). Moreover, these adults tend to experience lower educational, employment, and economic successes (Currie & Wisdom, 2010; Lanier, Kohl, Raghavan, & Auslander, 2015). Dramatically higher delinquency rates and criminal conduct levels have also been well documented in adults with ACE scores greater than zero (Reavis, Looman, Franco, & Rojas, 2013; Gwinn, 2015).

**Table 1.** Prevalence of Adverse Childhood Experiences

ACE SCORE	ORIGINAL CDC STUDY (N=17,337)	19 <sup>TH</sup> IFJCC CONFERENCE PARTICIPANTS (N=268)	CAMP HOPE 2018 (N=112)
0	36.1%	20.9%	5.4%
1	26.0%	19.0%	13.4%
2	15.9%	17.5%	17.0%
3	9.5%	10.8%	10.7%
<b>4+</b>	<b>12.5%</b>	<b>31.7%</b>	<b>53.5%</b>
Average	1.61	2.64	3.71

**Table 1** above provides the prevalence of ACE for conference participants. For comparative purposes, prevalence is also provided for the CDC national sample and recently released Camp HOPE evaluation for 2018. The average ACE score for the conference participants was a 2.64 (SD = 2.41).

Comparatively, Ford, Merrick, Parks, Breiding, Gilbert, Edwards, et al. (2014) found an average ACE score of 1.61 from a CDC national sample. Results of a one sample t-test [ $t(267) = 7.02$ ;  $p < .01$ ] demonstrate that the average ACE score for our sample of FJC conference participants was significantly higher than the national rate.

## ADVERSE CHILDHOOD EXPERIENCES

**Table 2** below presents the percent of conference participants reporting an experience with each ACE item. The top ACEs for the conference attendees

included parental mental illness (42.2%), divorce (38.4%), substance use/abuse (34.7%), and sexual abuse (34.7%).

**Table 2.** Prevalence of ACE by Type of Adversity

	PERCENT
<b>ABUSE:</b>	
Verbal	<b>34.3%</b>
Physical	<b>22.8%</b>
Sexual	<b>34.7%</b>
<b>SEXUAL NEGLECT:</b>	
Emotional	<b>25.0%</b>
Physical	<b>10.1%</b>
<b>DYSFUNCTIONAL FAMILY:</b>	
Witness Domestic Violence	<b>16.0%</b>
Parent Divorce	<b>38.4%</b>
Substance Abuse	<b>34.7%</b>
Mental Illness	<b>42.2%</b>
Parent Incarceration	<b>6.0%</b>

## ANALYSES

Descriptive statistics (e.g., means, standard deviation, percentages) are used to summarize the responses for the pre and post assessments. Cronbach's alpha was computed to assess the score reliability estimates. Where pretest and posttest matches were sufficient, a repeated measures Analysis of Variance was computed. When

comparisons were made for a given test, a between group analysis of variance was computed (e.g., post assessment comparing conference attendees to the control group). Finally, correlational and regression analyses were employed to assess the strength and direction of relationship between hope and the other well-being indicators.

# MEASUREMENT

## HOPE

**Individual Hope.** The Adult Hope Scale is an 8-item scale that measures the extent to which the respondent feels motivated to obtain goals and whether they can construct pathways to attain those goals (Snyder, et al., 1991). The Hope Scale is divided into two subscales, the agency subscale, which measures the former, and the pathways subscale, which measures the latter. A total Hope score can be derived by adding the scores obtained from the two subscales. A 6-point Likert scale, ranging from 1 = definitely false to 6 = definitely true, is used to measure the responses. Previous meta-analytic results show this measure to have good reliability estimates across samples (Hellman, Pittman, & Munoz, 2013). Reliability estimates for the total Hope Scale was Pre  $\alpha = .86$ ; and Post  $\alpha = .89$ .

**Collective Hope.** Survey participants who identified as Family Justice Center (FJC) employees were asked six additional questions concerning the goals, pathways, and agency of their FJC. The questions utilized the same 6-point Likert scale (ranging from 1 = definitely false to 6 = definitely true). Reliability estimates for collective hope were Pre  $\alpha = .94$ ; and Post  $\alpha = .94$ .

## WELL-BEING INDICATORS

**Resilience.** The Brief Resilience Scale (BRS) measures a respondent's ability to bounce back and/or recover from stress (Smith et al., 2008). The BRS is a 6-item scale that utilizes a 4-point Likert scale that ranges from 1= strongly disagree to 4= strongly agree. Questions 2, 4, and 6 are reversed scored. The responses are added together for a total score then divided by the number of questions answered to provide an item average. Reliability estimates for the BRS was Pre  $\alpha = .82$ ; and Post  $\alpha = .83$ .

**Flourishing.** Flourishing is based upon an 8-item scale (Diener et al., 2009) that

measures the respondent's success in positive relationships, meaning and purpose in life, optimism, and self-worth. The total score provides an indicator of the psychological well-being for the participants and is consistent with the framework of what makes a life good. A 6-point Likert scale, ranging from 1 = strongly disagree to 6 = strongly agree, is provided for each item. Scores on the 8 items are summed to provide a total score. Reliability estimates for this study were appropriate (Pre  $\alpha = .88$ ; Post  $\alpha = .91$ ).

## TRAUMA INDICATORS

**The Adverse Childhood Experiences (ACE) Scale.** The ACE is a 10-item measure on traumatic experiences during childhood. This 10-item measure is comprised of three Abuse items, two Neglect items, and five Dysfunctional family items. Scores range from a zero to 10 with higher numbers reflecting the number of adverse childhood events experienced. The ACE was presented on the pre-conference assessment only.

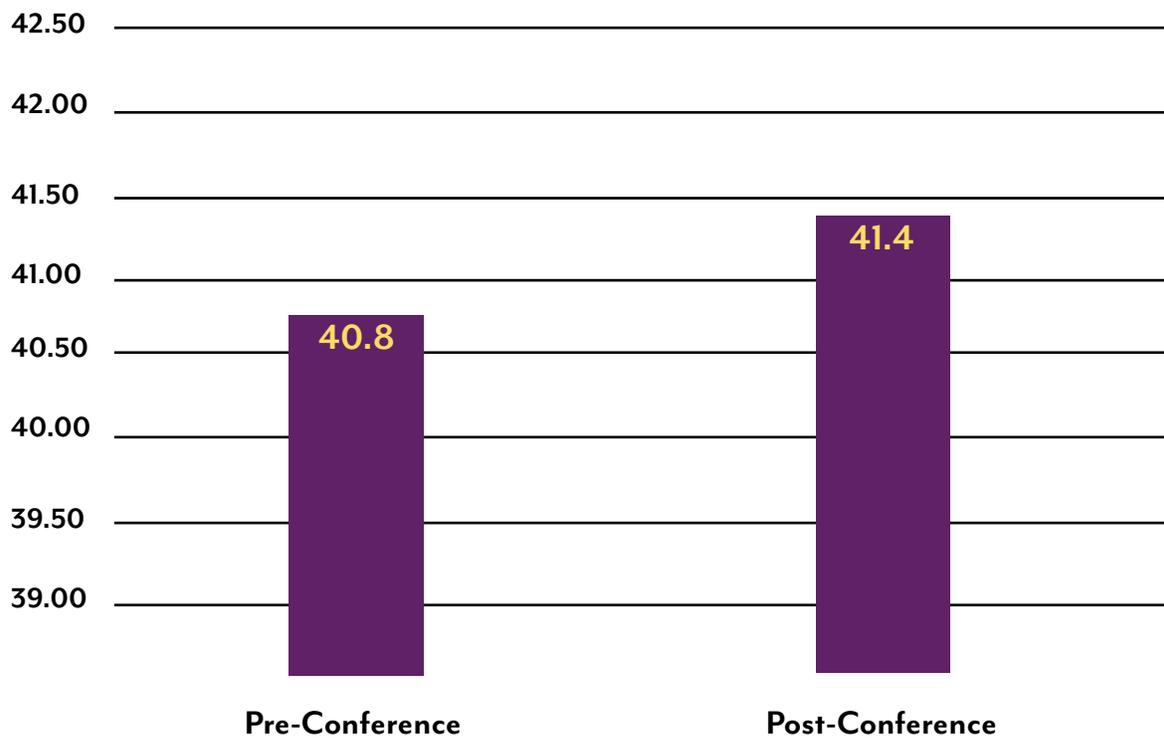
**Rumination.** Rumination was assessed using the rehearsal subscale of the Emotional Control Questionnaire (Roger & Najarian, 1989). The 9-item measure uses a 5-point Likert response format ranging from 1 (not like me at all) to 5 (very much like me). Reliability estimates for this study were appropriate (Pre  $\alpha = .88$ ; Post  $\alpha = .92$ ).

**Attachment.** Attachment was assessed using the Revised Adult Attachment Scale-Close Relationship Version (Collins, 1996). The 18-item measure (which was only administered during the pre-conference survey) uses a 5-point Likert response format ranging from 1 (Not at all characteristic of me) to 5 (Very characteristic). The Revised Adult Attachment Scale is divided into three subscales: Close, Depend, and Anxiety. A total Attachment score can be derived by adding the scores obtained from the three subscales. Questions 2, 7, 8, 13, 16, 17, and 18 are reverse scored.

# RESULTS

## HOPE SCORES

Graph 1

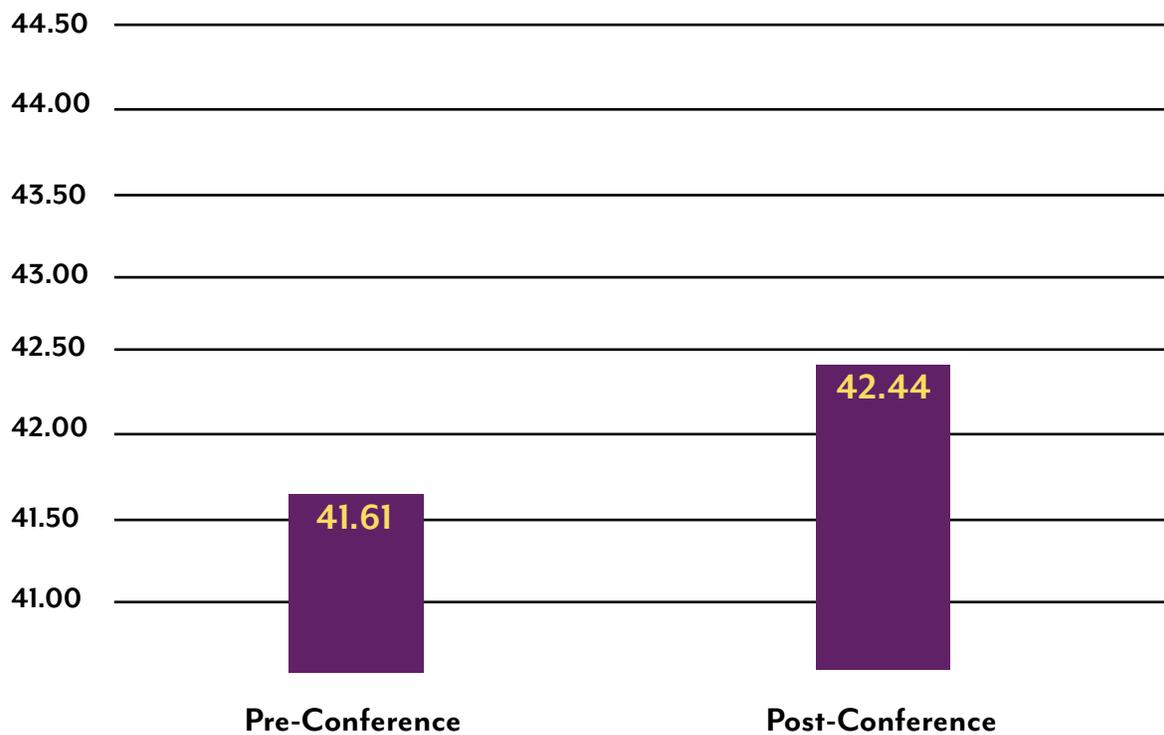


*Hope reflects the individual's ability to develop pathways and dedicate mental energy (agency) toward desirable goals.*

**Graph 1** above illustrates the change in scores for the Hope Scale. A paired samples t-test was computed to examine the differences in pre- and post-test mean scores. Results of this analysis demonstrate a statistically significant increase from pre- to post-hope scores for the conference participants [ $t(99) = -2.38, p < .05; d = .14$ ].

## FLOURISHING SCORES

Graph 2

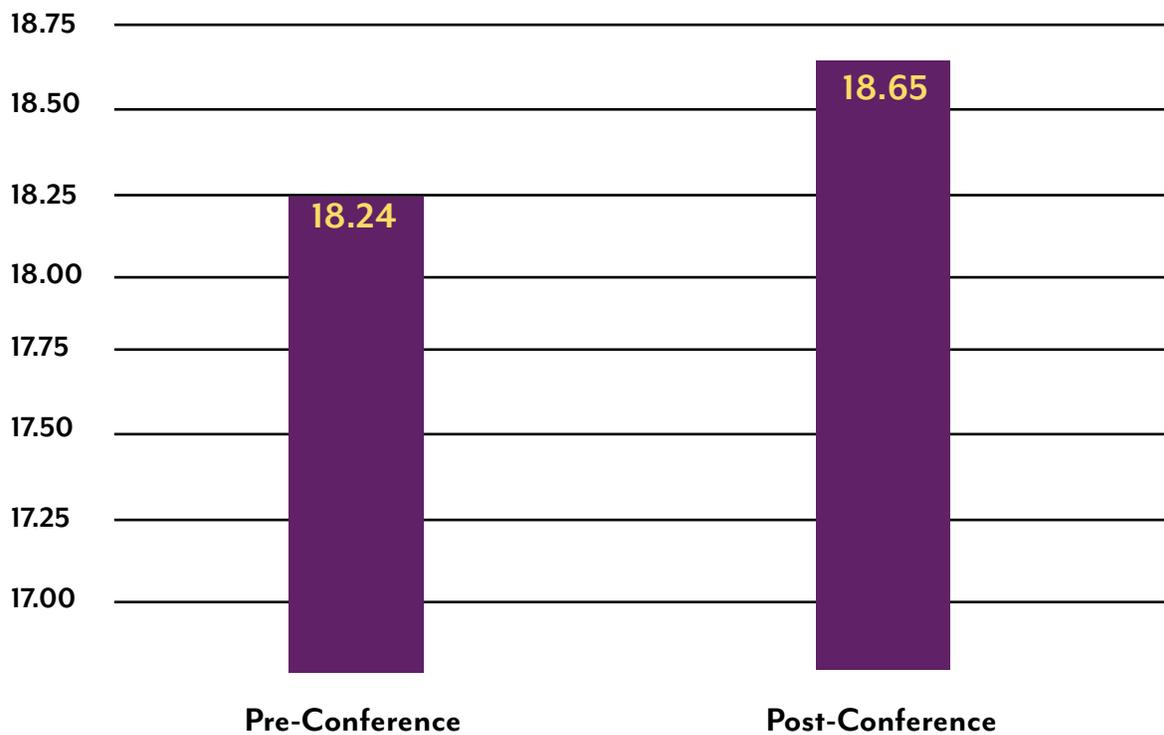


*Flourishing represents believing that life has meaning and purpose, being engaged in activities, feeling competent, and having positive relationships.*

**Graph 2** above illustrates the change in scores for Flourishing. A paired samples t-test was computed to examine the differences in pre- and post-test mean scores. Results of this analysis demonstrate a statistically significant increase from pre- to post-flourishing scores for the conference participants [ $t(98) = -2.80, p < .05; d = .19$ ].

## RESILIENCE SCORES

Graph 3

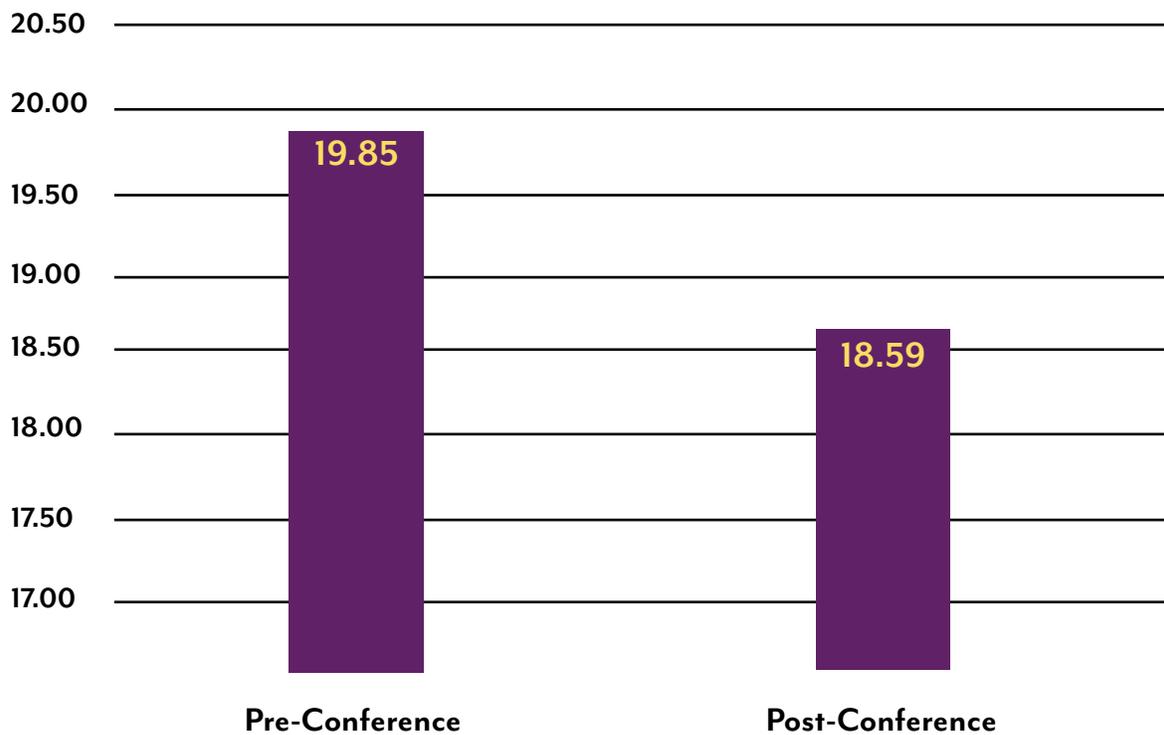


*Resilience represents the ability to bounce back and/or recover from stress and adversity.*

**Graph 3** above illustrates the change in scores for Resilience. A paired samples t-test was computed to examine the differences in pre- and post-test mean scores. Results of this analysis demonstrate a statistically significant increase from pre- to post-resilience scores for the conference participants [ $t(95) = -2.11, p < .05; d = .16$ ].

## RUMINATION SCORES

Graph 4

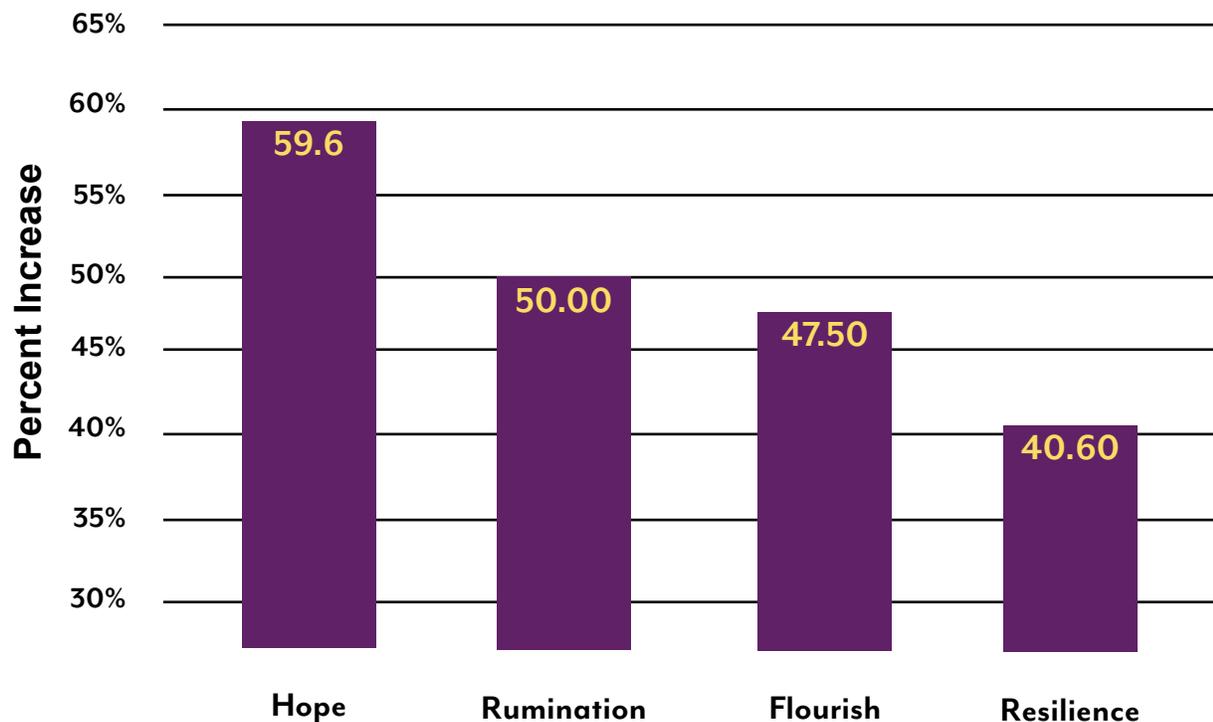


*Rumination is the focused attention on the symptoms of one's distress and its possible causes as opposed to solutions.*

**Graph 4** above illustrates the change in scores for Rumination. A paired samples t-test was computed to examine the differences in pre- and post-test mean scores. Results of this analysis demonstrate a statistically significant decrease from pre- to post-rumination scores for the conference participants [ $t(98) = 3.33, p < .05; d = .19$ ].

## PERCENTAGE OF CONFERENCE PARTICIPANTS WHO DEMONSTRATED IMPROVEMENT

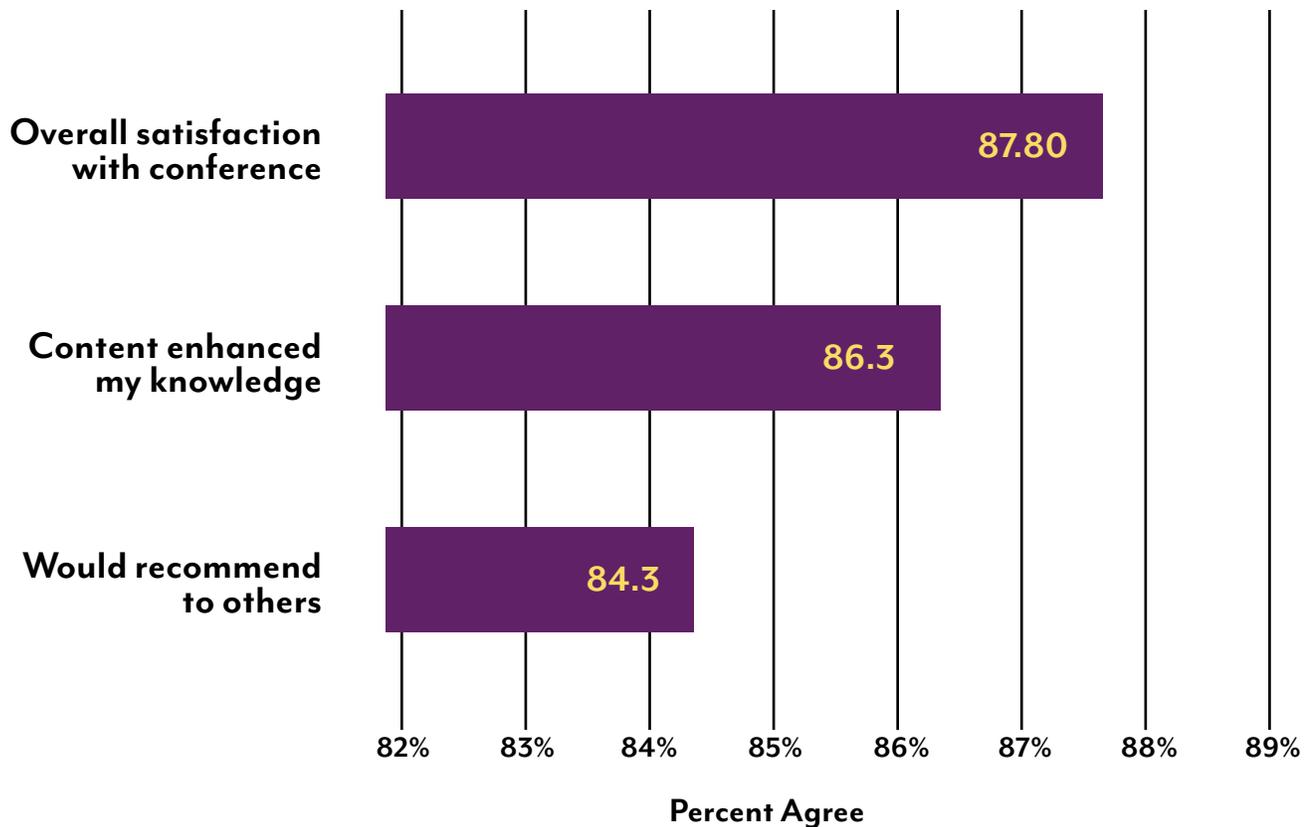
Graph 5



**Graph 5** above illustrates the percent of conference attendees who showed an improvement in scores from pre- to post- conference assessment. The greatest gain was in rumination where 59.6 of participating conference attendees demonstrated in improvement in their rumination scores (decreased attention focused on distress). Similarly, 50% of participants improved their hope scores (increased ability to develop pathways and dedicate mental energy toward desirable goals). Resilience showed the lowest gain in that just over 40% of the conference attendees showed improvement.

# PERCEPTIONS OF THE 19TH INTERNATIONAL FAMILY JUSTICE CENTER CONFERENCE

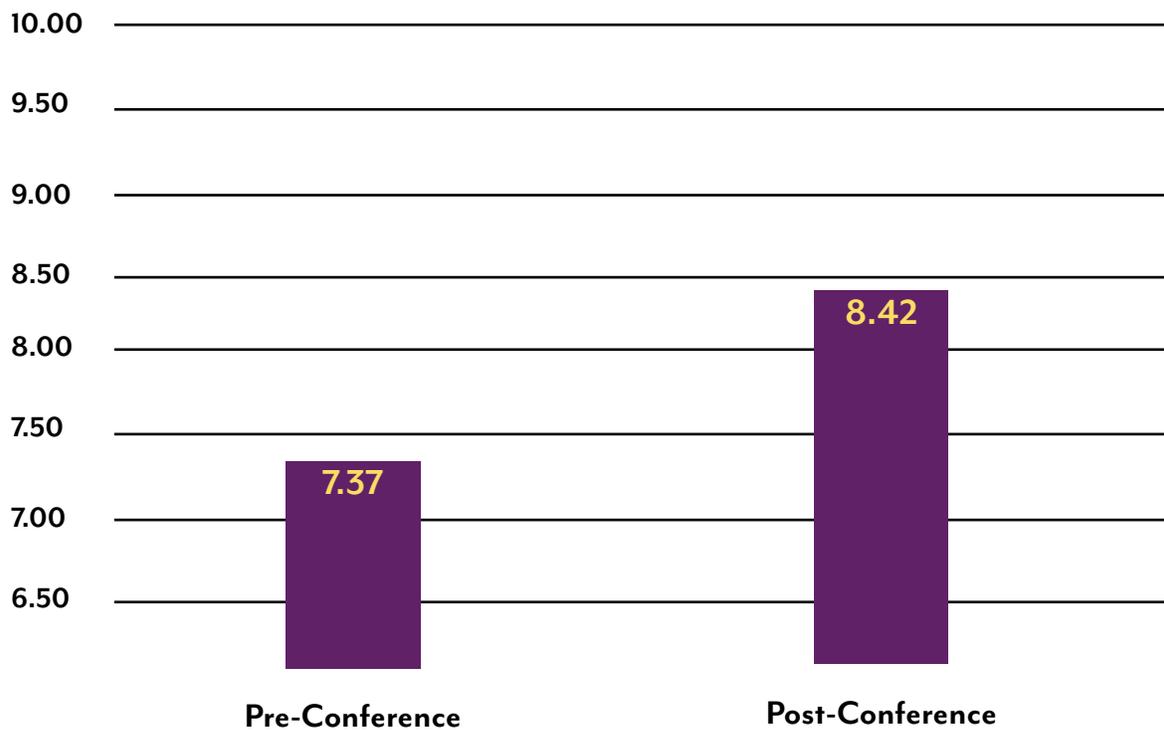
Graph 6



**Graph 6** above illustrates participating conference attendees report positive experiences with the Family Justice Center Conference. Almost 9 out of 10 attendees had an overall satisfaction with their conference experience. Similarly, participants agree the content presented enhanced their knowledge and would recommend the conference to others in their community.

## UNDERSTANDING OF TRAUMA-INFORMED PRACTICE

Graph 7

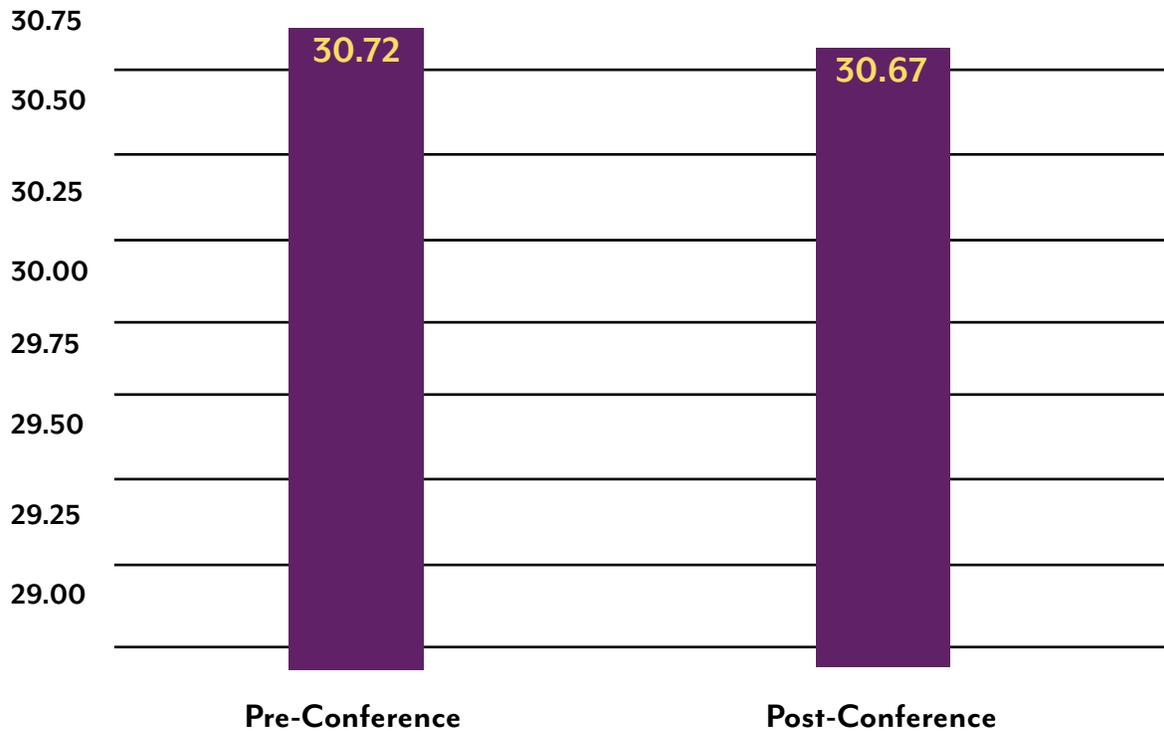


*The post-conference survey asked participants to rate their understanding of trauma-informed practice (on a scale between 0 and 10) both PRIOR to and AFTER the conference.*

**Graph 7** above illustrates paired samples t-test was computed to examine the differences in mean scores and is illustrated in the graph above. Results of this analyses demonstrate a statistically significant increase in understanding trauma-informed practice for the conference participants [ $t(204)=-10.53$ ,  $p<.05$ ;  $d=.67$ ]

## UNDERSTANDING OF HOPE

Graph 8

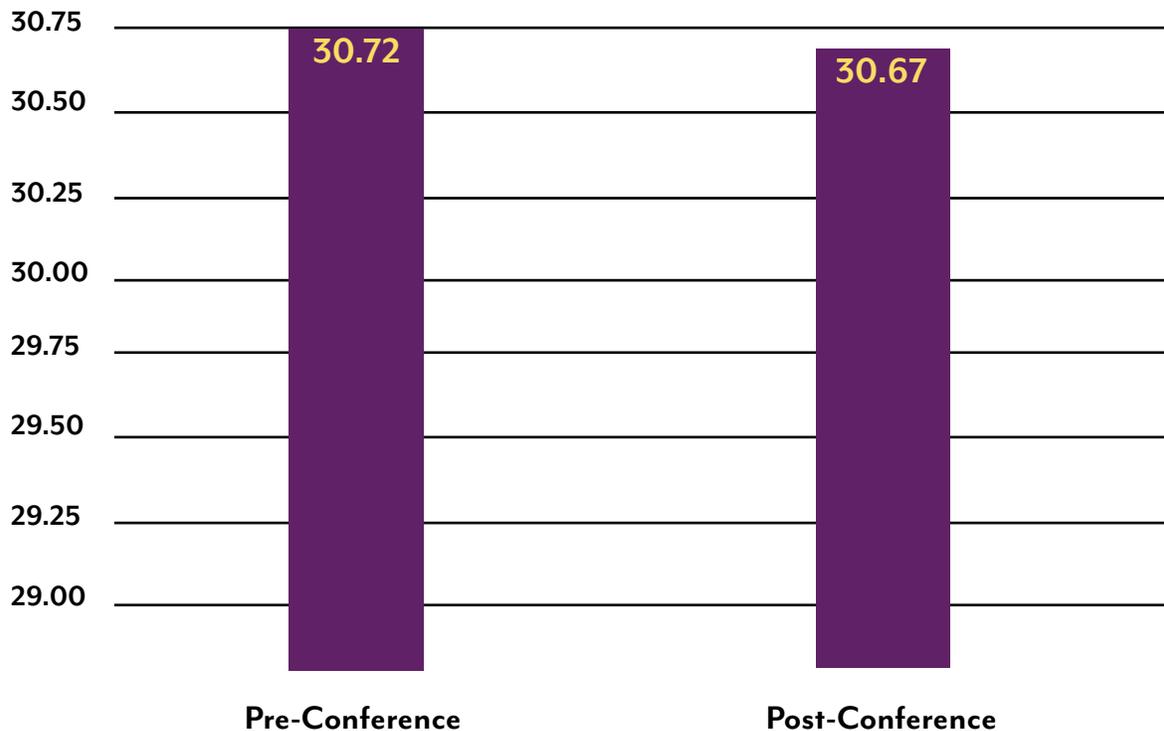


*The post-conference survey asked participants to rate their understanding of Hope (on a scale between 0 and 10) both PRIOR to and AFTER the conference.*

**Graph 8** above illustrates paired samples t-test was computed to examine the differences in mean scores and is illustrated in the graph above. Results of this analyses demonstrate a statistically significant increase in understanding Hope for the conference participants [ $t(193)=-12.71, p<.05; d=1.01$ ]

## COLLECTIVE HOPE SCORES

Graph 9



Collective hope refers to a community's capacity to have a shared vision for future positive outcomes. Collective hope requires a shared belief that pathways can be found to achieve the vision and that its members can direct and sustain willpower toward those pathways. Collective hope is associated with social connectedness and trust in leadership.

Collective hope was assessed for those conference attendees who indicated they work at a Family Justice Center. A total of 43 individuals were matched for the pre- and post-conference collective hope assessment.

The graph below shows the change in Collective Hope for the participating Family Justice Center employees. A paired samples t-test was computed to examine the differences in pre- and post-test mean scores. The results of this analysis demonstrated no significant change in collective hope scores [ $t(42) = 0.93$ ;  $p > .05$ ].

# CORRELATIONS AMONG HOPE AND WELL-BEING MEASURES

**Table 3** below provides the correlation matrix for all the scales described in this study. A correlation represents the level of relationship between two variables. The interpretation is based upon the strength of the relationship as well as the direction. Strength of a correlation is based upon Cohen’s (1992) effect size heuristic. More specifically, a correlation (+ or -) of .10 or higher is considered small; a correlation (+ or -) of .30 is considered

moderate, and a correlation (+ or -) of .50 is considered strong. With regards to direction, a positive correlation indicates that higher scores on one variable are associated with higher scores on the other variable. A negative correlation indicates that higher scores on one variable are associated with lower scores on the other variable. Identifying a specific correlation is based upon matching a row to a particular column.

## EXAMPLES FROM TABLE 3

On the left side of the table the column marked “item” identifies the order of the correlations. The first variable “hope” is also the column labeled 1. The first correlation ( $r = .90^*$ ) under column 1 represents the relationship between Hope (total) and Pathways (variable 2). We interpret this correlation as follows: “Conference attendees who scored higher on Hope had higher scores on Hope Pathways reflecting a strong positive correlation.” Notice the correlation ( $r = .90^*$ ) has an asterisk indicating the finding was statistically significant ( $p < .05$ ) meaning that the observed relationship between

these two variables was likely not due to chance. As another example shows a negative value, where higher scores on Hope (column 1) was associated with lower scores on the participants Rumination (row labeled 7;  $r = -.27^*$ ) and the strength was small. One more example will look at the correlation between Flourishing and Resilience. Here we look at column 5 (Flourishing) and row 6 (Resilience) and find the correlation ( $.48^*$ ). Thus, higher scores on Flourishing are associated with higher scores on Resilience and the strength is moderate.

**Table 3.** Correlations Between Hope, Well-Being, and Trauma

Item:	1	2	3	4	5	6	7	8	9	10	11	12
<b>1. Hope</b>	—											
<b>2. Pathways</b>	.90*	—										
<b>3. Agency</b>	.89*	.59*	—									
<b>4. Collective Hope</b>	.22*	.22*	.19*	—								
<b>5. Flourishing</b>	.61*	.46*	.63*	.34*	—							
<b>6. Resilience</b>	.52*	.47*	.47*	.18*	.48*	—						
<b>7. Rumination</b>	-.27*	-.21*	-.26*	-.07	-.29*	-.44*	—					
<b>8. Attachment</b>	.15*	.09	.18*	.04	.28*	.06	-.03	—				
<b>9. Close</b>	.28*	.19*	.32*	.09	.47*	.29*	-.22*	.69*	—			
<b>10. Depend</b>	.29*	.19*	.33*	.07	.41*	.25*	-.35*	.62*	.58*	—		
<b>11. Anxiety</b>	-.29*	-.20*	-.32*	-.07	-.40*	-.38*	.44*	.10	-.48*	-.58*	—	
<b>12. ACE</b>	-.04	-.01	-.06	-.14	-.09	-.06	.16*	-.13*	-.21*	-.28*	.27*	—

Note: All scores obtained at pre-test. \* $p < .05$  ( $n=132-281$ )

## CONCLUSION

The purpose of this evaluation was to examine the impact of the conference on attendee hope and well-being. The results of the analyses show a statistically significant increase in the hope scores for the conference attendees. This finding suggests that conference attendees gained in the capacity to identify strategies toward their desirable goals and ability to dedicate the willpower (agency) to pursue those strategies. The results also show significant increase in flourishing and resilience for participating conference attendees. Similarly, rumination scores significantly decreased for the participants.

Approximately 86% of the participants reported the content presented at the conference enhanced their knowledge. These participants were satisfied with the conference and would recommend to others in the future.

Another finding from this study demonstrated the prevalence of adverse childhood experiences (ACE) as reported by the conference attendee was higher than the CDC national sample. However, the conference participants ACE scores were significantly lower than children who are exposed to domestic violence.

Further analyses show that hope is positively associated with participant well-being. This finding was similar for resilience showing higher resilience scores were associated with participant well-being.

The findings from this evaluation are consistent with the ongoing research for the Alliance for HOPE International (e.g., Blue Shield Family Justice Center, Camp HOPE) demonstrating empirical support for the co-located service model as trauma informed and hope centered.



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The Hope Research Center is an interdisciplinary social science unit in the College of Arts & Sciences for the University of Oklahoma. Collaborating with nonprofit organizations, faculty and graduate students lead research projects with a particular focus on sustainable well-being among vulnerable and otherwise at-risk individuals and communities.

Guided by the principles of Positive Psychology, and the right of all members in the community to flourish; we use hope as the theory of change to assess the impact of nonprofit and human service organizations

Faculty and students who work in the center provide a full range of applied research activities including program evaluation and outcome assessment in support of program service delivery. Participating faculty members are nationally recognized for their area of research and are expert methodologist with the capacity to match research protocols to the needs of the nonprofit community.

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