HOPE AND WELLBEING AMONG BELIZEANS

TAUNA GULLEY, PHD, RN, FNP
ALLIE BLEVINS HURST, BSN
Learning Objectives

- The learner will be able to describe the clinical implications of hope and wellbeing on health promotion teaching among adults.
- The learner will be able to describe strategies to enhance hope and wellbeing among adults.
BACKGROUND

• Hope is rooted in spirituality.
• Hope is common but unique among cultures.
• Hope enhances subjective wellbeing.
• Hope enhances physical health.
• Nurses are in a unique position to instill hope.
PURPOSE

• To establish a profile of the community being served in order to accurately plan for and implement services.
• To describe the level of hope and subjective wellbeing among adults residing in a remote village of Belize, Central America.
BELIZE UVA WISE

- Since the Spring of 2009
- Mobile clinics, churches, and an established clinic
- Students perform health histories and physical assessments, obtain vital signs and dispense medications under direction of MD and NP
- Serve as interpreters
THE COMMUNITY

- Multicultural
- Scarce Resources
- Food
- Water
- Electricity
- Minimal Access to Health Care
THE COMMUNITY

[Images of a hut and a body of water with stones]
HYPOTHESIS

• Rural Belizeans will have decreased levels of hope and will report low levels of subjective wellbeing.
• There will be a positive relationship between hopelessness and low levels of subjective wellbeing among Belizeans.
SAMPLE AND SETTING

• Sample
  • Adult males and females seeking health care at a clinic in Central America were invited to participate, N = 66.

• Setting
  • Remote village in Belize, Central America

• Data Collection Procedures
  • Data were collected while patients waited to see the provider. Both surveys were available in Spanish and English. Interpreters were available to translate to other native languages.

• Ethical Considerations
  • The Institutional Review Board at The Institution and the Medical Director of the Clinic reviewed and approved the study prior to data collection.
### INSTRUMENTATION

- **The Trait Hope Scale**
  - 12 item self report
  - Likert scale
  - Scoring
    - 8 to 40
    - 8 (lowest levels of hope)
    - 40 (highest levels of hope)

- **The Satisfaction with Life Scale**
  - 5 item self report
  - Likert scale
  - Scoring
    - 5 to 25
    - 5 (minimal satisfaction with life)
    - 25 (high satisfaction with life)
INSTRUMENTATION

- **Satisfaction with Life Scale**
  - In most ways my life is close to ideal.
  - The conditions of my life are excellent.
  - I am satisfied with my life.
  - So far I have gotten the important things I want in life.
  - If I could live my life over, I would change almost nothing.

- **Trait Hope Scale**
  - I can think of ways to get out of a jam.
  - I energetically pursue my goals.
  - There are lots of ways around any problem.
  - I can think of many ways to get the things that are important to me.
  - Even when others get discouraged, I know I can find a way to solve a problem.
  - My past experiences have prepared me well for my future.
  - I have been pretty successful in life.
  - I meet the goals that I set for myself.
RESULTS

• N= 66

• Satisfaction with Life Scale: M = 15.95
  • Average self report of Life Satisfaction
  • Cronbach’s alpha coefficient was .69

• Hope Trait Scale: M = 32.48
  • Above average levels of hope
  • Cronbach’s alpha coefficient was .78
DISCUSSION

- Average levels of satisfaction with life may indicate dissatisfaction in one or more life domains.
- Higher levels of hope can provide motivation to improve areas of dissatisfaction.
- Health care providers must nurture a positive, hopeful outlook. Improving some areas of life domains, such as health, would likely move the patient to a higher level of life satisfaction.
- Encourage better connections with family or friends.
- Goal Setting and Subjective Well Being
- Challenges of Short Term Missions
LIMITATIONS/FUTURE RESEARCH

• This study did not look at the differences between gender or age groups. Future research is needed to determine differences between these groups.
• Hope is an abstract concept. Qualitative research is needed to gain a better understanding of the meaning of hope.
• How does the definition of hope differ across cultures?
THANK YOU