

Barriers to hope and adolescent resilience over time

by

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Declaration

I declare that the dissertation/thesis, which I hereby submit for the degree Magister Educationis in Educational Psychology at the University of Pretoria, is my own work and has not previously been submitted by me for a degree at this or any other tertiary institution.

.....

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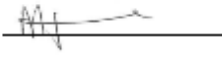
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Ethics statement

The author, whose name appears on the title page of this thesis, has obtained the applicable research ethics approval for the research described in this work. The author declares that she has observed the ethical standards required in terms of the University of Pretoria's *Code of ethics for researchers and the policy guidelines for responsible research*.

Dedication

I dedicate this research to my parents who have been and continue to be my biggest support system.

Acknowledgements

To have achieved this milestone in my life, I would like to express my sincere gratitude to the following people:

- My Heavenly Father, who provided me the strength, knowledge and perseverance to complete this study;
- My parents, thank you for always supporting my dreams and for all the contributions you have made to make them possible. You have always had faith in me even in the times when I doubted myself and have instilled values in me which allowed me to complete this journey, for all of this I am thankful;
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Abstract

Barriers, over time, to hope and adolescent resilience

My study is a sub-study of the Resilient Youth in Stressed Environments (RYSE) Project (ethics clearance, UP17/05/01). RYSE aims to better understand the resilience of youth who live in environments that are stressed by the petrochemical industry and its associated risks. Hope is a pathway of resilience. In particular, the purpose of my study was to explore over time which barriers to the experience of hope are identified by youths who live in a resource-constrained community. My qualitative study followed a phenomenological research design that used a Draw-and-Tell activity to generate data. In 2017, the RYSE participants generated data that explored barriers to hope. I repeated this process in my study in 2018 to investigate changes over time. I used inductive thematic analysis to analyse the 2018 data and deductive thematic analysis to make sense of the 2017 data. The following themes emerged from this analysis: *negative social experiences*, *lack of resources to pursue dreams* and *gender norms limiting future selves*. These themes, which were consistent over time, allowed for a rich understanding of the barriers to hope as identified by adolescents in a resource constrained context. The understanding of these barriers to hope has implications for educational psychologists who aim to develop preventative interventions to foster adolescent hope and resilience.

Key terms:

Hope, barriers, resilience, adolescents, over time.

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DECLARATION

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List of abbreviations

RYSE	Resilient Youth in Stressed Environments
SERT	Social Ecology of Resilience Theory
CAP	Community Advisory Panel

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1. CHAPTER ONE: INTRODUCTION

1.1 INTRODUCTION AND RATIONALE OF THE STUDY

People in the sub-Saharan context, as well as in South Africa, face many challenges that stem from economic, political, and unstable climatic conditions (Ebersöhn & Ferreira, 2012; Falconer et al., 2020; Mokitimi et al., 2018). These challenges often have a negative impact on the subjective well-being and psychological health of adolescents, and are typically associated with hopelessness (Gibbs et al., 2016; Harrison et al., 2019). Research has emphasised that fostering hope is a vital component in supporting healthy adolescent adaption to such challenges (Isaacs & Savahl, 2014; Teodorczuk et al., 2019).

In recent literature, hope has been associated with resilience as a potential resilience-promoting factor (Guse & Shaw, 2018; Hellman et al., 2018; Kuo et al., 2019; Mullin, 2019; Satici, 2016). Resilience may be understood as a process of positive adaption in response to adversity (Masten, 2014; Ungar, 2018), while hope may be viewed as an interaction between external components within an individual's frame of reference that expects positive outcomes to be achieved in the future (Scioli et al., 2011). In my study of limited scope I engage with a sample of adolescents from the eMbalenhle community who are challenged by risk factors associated with the petrochemical industry and township environments. Through my study, I sought to understand what factors may be seen as barriers to hope by these adolescents and how consistent these barriers are over time. As the researcher, I tried to gain a better understanding of the factors that may constrain adolescent hope, in order for the hope-related pathways of resilience of adolescents in stressed communities to be better supported.

My focus on a sample of adolescents from eMbalenhle resulted from the fact that my study formed part of a larger research project called Resilient Youth in Stressed Environments (RYSE). RYSE aims to investigate patterns of resilience among adolescents in disadvantaged communities. In South Africa, one of the RYSE-affiliated communities is eMbalenhle in the Mpumalanga province (RYSE, 2020). In the eMbalenhle community, adolescents have shown a vulnerability to the risks that characterise their environment (Matali, 2018; Pretorius, 2018; Theron & Ungar, 2019). In other disadvantaged communities, when adolescents are vulnerable, there appears to be a need for hope and other similar pathways of resilience (Kim et al., 2015; Solonenko et al., 2017).

Researchers have identified the need for contextually sensitive studies to understand hope and resilience across contexts, specifically beyond the Western context (Buyana et al., 2020; Ebersöhn & Bouwer, 2013; Isaacs & Savahl, 2014; Singh & Naicker, 2019; Theron, 2018; Ungar, 2010; Van Rensburg et al., 2018). During the initial stages of my gathering literature on hope and resilience, there seemed to be limited availability of studies on the views of adolescents from stressed environments (such as eMbalenhle) regarding factors constraining their hope and the consistency of these factors over time. According to Masten (1999; 2001; 2014), there is a need for risk-focused models of resilience to devise preventative interventions. Understanding the risks to hope (i.e., what obstructs hope) is an important step to developing such interventions.

Both my personal and professional experiences have alerted me to the importance of maintaining hope during times of adversity. These experiences have sharpened my interest in understanding the complexities of hope, and in exploring strategies through which to act preventatively against factors that may hinder hope. Through my study, I would like to add to the body of literature on hope-related pathways for resilience. I hope to provide empirical knowledge on barriers to hope over time, so that educational psychologists, like myself, may be better informed to develop preventative strategies (Owen et al., 2016).

1.2 PROBLEM STATEMENT

South Africa is a country with an adolescent population group that is growing at an exponential rate (in comparison to overall population in the country), with nearly half of the current South African population under the age of 25 (Adams et al., 2019; Donenberg et al., 2020; Toska et al., 2019). In addition, South Africans – particularly adolescents living in townships such as eMbalenhle – experience a multitude of adversities, with recent statistics reporting that at least 78% of children and adolescents are being affected by poverty and related adversity (Hall, 2019). Other adversities that affect adolescents' lives include experiences of violence, substance abuse, inadequate educational and employment opportunities, poor infrastructure and inadequate service delivery (De Neve et al., 2020; Donenberg et al., 2020; Toska et al., 2019). Experiences of adversity may impact negatively on the well-being, hopes and future outcomes of adolescents (Wilson & Somhlaba, 2016).

According to Saphiang et al. (2019) up to 20% of adolescents globally experience some form of mental health concern at some point in their lives, and in sub-Saharan Africa, this is the case for almost 14% of adolescents. Studies have reported on exposure to adversity

being a significant risk factor for the development of mental health-related challenges (Cluver et al., 2015; Hall & Olf, 2016; Kessler et al., 2010). Mental health concerns found to be prevalent in South Africa as a result of exposure to adversity (like resource constraints and violence) and associated hopelessness, include depression, suicide, anxiety and post-traumatic stress disorder (Toska et al., 2019). Adolescents in resource constrained environments often report experiences of hopelessness (Kapp et al., 2014; Theron, 2020; Wilson & Somhlaba, 2016; Mosavel et al., 2015). Therefore, following Masten (1999, 2001, 2014), it is important to determine what factors contribute to these experiences of hopelessness in order to manage these risk factors and prevent mental health challenges.

A number of studies describe the resilience of South African adolescents, as well as hope-related pathways of resilience in South African adolescents (DeSilva et al.; 2012, Collishaw et al., 2016; Dass-Brailsford, 2005; Govender et al., 2019; Guse & Shaw, 2018; Guse & Vermaak, 2011; Haffejee & Theron, 2019; Kuo et al., 2019; Mampane & Boucher, 2006; Mosavel et al., 2015; Mhongera & Lombard, 2020; Savahl et al., 2013; Theron, 2018; Theron & Van Rensburg, 2018; Van Breda, 2018; Van Breda & Dickens, 2017; Van Breda & Theron, 2018; Van Schalkwyk & Wissing, 2014). Of these studies, only a small number reported on resilience-enablers (like hope) over time (DeSilva et al., 2012; Theron & Van Rensburg, 2018; Van Breda & Dickens, 2017). As adolescence is a period of change, it could be assumed that factors perceived as challenges to hope may change. However, I could find no studies that confirm this possibility. In contrast, literature has suggested that risk factors remain stable over time (Meinch et al., 2015), and so it is possible that risks to hope are consistent. Therefore, in order to act preventatively and to be responsive to the needs of adolescents, it is important to establish which factors appear to be consistent barriers to hope so as to develop appropriate preventative interventions (Adams et al., 2019; Masten, 2001).

1.3 PURPOSE OF THE STUDY

The purpose of this phenomenological study was to explore the factors which constrain experiences of hope for adolescents living in eMbalenhle and how consistent these factors are over time.

1.4 RESEARCH QUESTION

My study of limited scope was guided by a single research question: Which factors do adolescents living in eMbalenhle report as barriers to their experience of hope and how consistent are these factors over time?

1.5 THEORETICAL FRAMEWORK: SOCIAL ECOLOGY OF RESILIENCE THEORY AND HOPE MODEL

The theoretical frameworks that I used to guide my study and through which I interpreted my results were Michael Ungar's Social Ecology of Resilience Theory (SERT) (Ungar, 2011) and the Hope Model of DuFault and Martochio (1985). My choice of theoretical framework's was motivated by the following factors:

(i) SERT aligns with the purpose of the broader RYSE study, and subsequently with my study of limited scope as part of the RYSE study.

(ii) Several earlier South African studies of resilience employed a systemic approach to resilience (Mampane, 2014; Mampane & Bouwer, 2011; Mosavel et al., 2015; Van Breda, 2018); SERT is a systemic approach to resilience.

(iii) The Hope Model (DuFault & Martochio, 1985) details a dynamic understanding of hope and aligns well with SERT, which describes the dynamic nature of resilience.

Since my study of limited scope was to explore adolescents' experiences of barriers to hope over time and as hope is considered a pathway of resilience, I considered both frameworks as necessary. As a result, (i), (ii) and (iii) above guided me to use SERT and the Hope Model to frame my study. Each of the frameworks will be described in more detail below.

1.5.1 SERT

SERT posits that resilience is not only influenced by individual capacities but rather (and possibly to a larger extent) by the social and physical ecologies surrounding the individual (Ungar, 2012). This interaction explains the dynamism of resilience. Within SERT, there are four key tenants, namely decentrality, complexity, atypicality and cultural relativity (Ungar, 2011).

Decentrality implies that resilience is attributable to resources within an individual's environment (i.e., the individual is not central to resilience) and how those resources are employed (Ungar, 2015). An example of decentrality is found in the study by Mampane and Bouwer (2011) who focused on how schools and the resources within the school were potential resilience-enabling factors for adolescents.

Complexity refers to resilience as shaped by various factors such the individual's age, context, level of risk and type of risk (Ungar, 2011). Complexity may also refer to how these

factors or interactions may differ over time or across different life phases and contexts (Ungar et al., 2013). An example of complexity is seen in the study by Van Breda and Dickens (2017) who explored resilience of adolescents disengaging from residential care. In the study it was found that outcomes associated with the various resilience processes differed from the time of leaving the care facility to a year later. As my study seeks to explore the degree of consistency of barriers to hope are over time, the principle of complexity allowed me to frame my understanding of what the adolescents in my study may report.

Atypicality may be understood as the processes of adaption that are not inherently positive but necessary within a context; hence, resilience is seen from the perspective of the individual (Ungar, 2011). For example, in their study, Hills et al. (2016), found that street youth demonstrated resilience-enabling factors not commonly associated with resilience, such as substance abuse to aid with coping.

Cultural relativity implies that positive adaption is dependent on the specific cultural context (Ungar, 2011). Cultural relativity typically includes the norms, values and traditions practised within a specific system that shapes adolescents (Ungar, 2011). According to Van Breda (2019), African values such as ubuntu in community support networks are important sources of resilience for South African adolescents.

1.5.2 Hope

Numerous descriptions of the concept of hope have been proposed (Clarke, 2003; Dowling & Rickwood, 2016; Scioli et al., 2011; Snyder, 2002). However, DuFault and Martocchio's (1985) understanding of hope encompasses many of the core principles found in other theories, and it provides a broader, more dynamic description. They described hope through various spheres and dimensions. Firstly, the two spheres of hope – which may interact and occur simultaneously – are *generalised hope*, i.e. envisioning a general positive future outcome, and *particularised hope*, i.e. envisioning a specific outcome for the future (DuFault & Martocchio, 1985). Hope is further understood in terms of six dimensions: cognitive; contextual; behavioural; affiliative; affective and temporal (DuFault & Martocchio, 1985). Each dimension may function independently and contributes to the dynamic process and experience of hope.

The *cognitive dimension* describes an individual's evaluation of their reality in relation to hope, and in terms of the internal and external factors that may inhibit or enhance hope. Furthermore, this dimension involves the identification of hope goals (DuFault &

Martocchio, 1985). The *contextual dimension* encompasses the context of the individual and the impact this may have on their experience of hope (DuFault & Martocchio, 1985). The *affiliative dimension* involves the relationships and/or attachments an individual draws from their friends and family to the wider community and environment (DuFault & Martocchio, 1985). The *behavioural dimension* refers to the strategies and actions an individual may employ to achieve a hoped-for outcome or goal (DuFault & Martocchio, 1985). These strategies or actions may occur across either a variety of domains, namely physical, social, spiritual and psychological or only in one. The *affective dimension* refers to the emotion associated with the process of hope and the emotions experienced through hope (DuFault & Martocchio, 1985). The final dimension referred to is the *temporal dimension*, which describes an individual's understanding of a time component attached to hope as a future-orientated concept (DuFault & Martocchio, 1985).

This multi-dimensional explanation of hope by DuFault and Martocchio (1985) appears to fit well with the principles of SERT due to numerous similarities in the description of the dimensions and principles. For example, the SERT principle of atypicality refers to adaption within an individual's context and considers the perspective of the individual (Ungar, 2011). Likewise, the cognitive dimension of hope considers the individual's perspective through acknowledging how an individual will evaluate themselves and their context (DuFault & Martocchio, 1985). In both theoretical frameworks, an individual's context and interactions with their context are noted. This led me to understand that both theoretical frameworks value these dynamic and complex factors, which is important for my study in considering how barriers to hope may affect and be viewed by adolescents in a specific context over time.

1.6 CONCEPT CLARIFICATION

For the purpose of this study, the concepts of adolescence, resilience, hope, and barriers to hope are central, and they are therefore explained in more detail below.

1.6.1 Adolescence

Adolescence is the developmental phase in an individual's life that spans the period between childhood and adulthood (Adams et al., 2019; Louw & Louw, 2007; Kim et al., 2015). Many different viewpoints exist as to when adolescence begins and ends (Louw & Louw, 2007; Sawyer et al., 2018). According to Statistics South Africa and the World Health Organisation, adolescence refers to the period between 10 and 19 years of age (Toska et al.,

2019; World Health Organisation (WHO), 2018). However, Sawyer et al. (2018) extend this period, suggesting that the period between the ages of 10 and 24 years are more in line with an adolescent developmental period (Sawyer et al., 2018). Following this suggestion, both the broader RYSE and my own study considered participants as adolescents up to the age of 24 (RYSE, 2020).

1.6.2 Resilience

Resilience can be understood as a process that supports positive outcomes or adaption in the face or aftermath of risk exposure (Masten, 2014; Masten & Cicchetti, 2016; Panter-Brick & Leckman, 2014; Rutter, 2012, 2013; Ungar, 2018). Risk is generally considered to predispose adolescents to adverse outcomes (Aven, 2010; Loewenstein et al., 2001). For example, risk factors such as stigmatisation, poverty and/or violence increase the likelihood of psychological distress such as depression and hopelessness in adolescents (Meinch et al., 2015; Boyes et al., 2020). The process of resilience is dynamic, in that the factors that may support or inhibit positive outcomes are likely to change over time (Masten, 2014; Rutter, 2012). Hope and resilience have often been associated concepts in literature, since hope may well be a resilience-enabling factor or pathway of resilience (Masten & Barnes, 2018).

1.6.3 Hope

Defining and conceptualising ‘hope’ has become a rather complex task due to differing views on how hope should be understood. Hope can be seen as the ability and capacity to perceive pathways to achieve one’s goal and be optimistic about future prospects (Dowling & Rickwood, 2016; Seligman & Csikszentmihalyi, 2000). However, hope can also be understood as a network associated with four clear needs or life domains, namely survival, mastery, attachment, and spirituality (Scioli et al., 2011). For the purpose of my study of limited scope, hope is defined as a future-orientated concept, as well as a process of interaction between the individual’s internal aspects and the external factors of the individual’s context – all of which influence the experience of and ability to hope. Hope as defined by Dufault and Martocchio (1985), describes hope as envisioning a positive future and that hope can be understood in terms of different dimensions (see Section 1.5.2). This definition of hope has been chosen for my study, as it encompasses aspects from the above-mentioned definitions and is guided by the theoretical frameworks of my study (see Section 1.5).

1.6.4 Barriers to hope

Barriers to hope may be viewed as risk factors, in that these are aspects that may increase the likelihood of an adverse outcome and associated hopelessness (Satici, 2016). Barriers to hope may involve internal aspects such as thought patterns, low self-esteem, and mental health conditions (Demetropoulos Valencia et al., 2020). External factors that may act as a barrier to hope are for example a lack of financial resources to achieve goals, which may hinder the ability to hope for a positive future outcome (Kimera et al., 2020; Munoz et al., 2019). The factors that are perceived as barriers may differ between individuals and contexts (Grund & Brock, 2019). For the purpose of my study, barriers to hope (which may be internal and/or external) will be defined as a risk factors inherent to individuals or their social ecologies.

1.7 ASSUMPTIONS

In this study, I assumed that a lack of resources, such as financial and structural resources, would be a barrier to the experience of hope. While I was working at schools as an educator and in my experiences on a more informal level, I had several conversations with adolescents in which I noted how having access to resources played a critical role in their planning for a hoped-for future. When resources were not readily available to them, I noticed how despondent they would become in discussing their hoped-for future. The adolescents with whom I had these discussions came from mixed backgrounds, and some were more and others less privileged. Despondence due to a lack of access to resources seemed to be a universal experience for adolescents. Several studies on hope suggest similar findings (Ebersöhn, 2017; Savahl et al., 2017; Walker & Mkwanazi, 2015).

Furthermore, I assumed that when adolescents did not have positive relationships with those within their social ecology, this would be a hope-disabling factor. My personal experience has been that those in my social network are my greatest resource and that they have enabled me to overcome challenges in my pursuit of specific goals. However, I have also felt that when supportive relationships are either not accessible or non-existent, then the effect may be negative and hinder my ability to overcome challenges. In fact, research also indicates that while positive relationships are a hope- and resilience-enabling factor, a lack thereof may have a negative impact on wellbeing (Lethale & Pillay, 2013; Ungar, 2011).

Lastly, I assumed that external barriers reported by the adolescents in my study, were likely to remain unchanged over time. Although adolescence is viewed as a period of change,

literature suggests that risk factors (e.g., a resource-constrained community) remain stable over time (Meinch et al., 2015). In my personal experience, I have seldomly seen change in the beliefs and behaviours of individuals or organisations without there having been some catalyst for that change – such as an intervention, new experiences or new knowledge.

1.8 METHODOLOGY

The methodology used in my research is detailed in Chapter 3. What follows below is a brief summary of the methodology applied in my study.

1.8.1 Epistemological paradigm

An interpretivist paradigm was the epistemological paradigm adopted in my study. The interpretivist paradigm describes human behaviour and phenomena by exploring the meaning that individuals assign to them (De Vos et al., 2011; Reeves & Hedberg, 2003; Willis et al., 2007). My reasons for choosing interpretivism as the epistemological paradigm, as well as the advantages and disadvantages of this approach are reported in Chapter 3 (Section 3.4.1).

1.8.2 Methodological paradigm

A qualitative methodological paradigm was used in my study. The qualitative research paradigm emphasises an understanding of meaning and processes, and also allows for in-depth analysis of and insight into the intricacies of complex situations (De Vos et al., 2011; Denscombe, 2010; Denzin & Lincoln, 2011). My reasons for choosing a qualitative methodological paradigm, and the advantages and disadvantages of this approach, are reported in Chapter 3 (Section 3.4.2).

1.8.3 Research design

In this study, I employed a phenomenological research design. This type of design aims to deeply understand the ‘lived experiences’ of research participants, as well as explore any potential commonality in these experiences (Creswell, 2014; Lichtman, 2010; Marshall & Rossman, 2016; Merriam & Greiner, 2019). My reasons for choosing the aforementioned design, as well as its advantages and disadvantages, are reported in Chapter 3 (Section 3.5.1).

1.8.4 Participants

As noted, my study forms part of the larger RYSE study. As such, the participants included in my study were part of the RYSE study. Participants were from the eMbalenhle

community in the Mpumalanga province. I used purposive sampling to select specific participants who demonstrated, illustrated or possessed particular features within the area of interest, as they would be able to provide rich information regarding the specific research phenomenon (De Vos et al., 2011; Merriam & Greiner, 2019). My reasons for choosing purposive sampling, the advantages and disadvantages of this sampling method, as well as inclusion criteria, are discussed in Chapter 3 (Section 3.5.2). In total, seven participants (with an average age of 18.4) constituted the sample for my study. These seven generated primary data. I also had access to secondary data (generated by 30 participants in 2017). Participant details are tabulated in Chapter 3 (Section 3.5.2).

1.8.5 Data generation

I used an arts-based approach to generate the primary data for my study, and employed the ‘draw-and-tell’ method along with conversational interviews (Marshall & Rossman, 2016; Seidman, 2013; Yin, 2016). The draw-and-tell method is a creative research method that has been used in numerous studies relating to social and health topics involving children (Angell et al., 2014; Angell & Angell, 2013; Sage & Jegatheesan, 2010; Woolford et al., 2015). My reasons for choosing the draw-and-tell method for data generation and documentation, and its advantages and disadvantages, are discussed in Chapter 3 (Section 3.5.3). I also accessed secondary data that had earlier been generated by the RYSE study. How this data was generated is explained in Chapter 3 (Section 3.5.3).

1.8.6 Data analysis and interpretation

I made use of inductive thematic analysis, which entails the identification of patterns and themes through a process of coding the primary data (Braun & Clarke, 2006; Nowell et al., 2017). I made use of Braun and Clarke’s (2006) six-step guide to inductive thematic analysis to analyse the primary data in my study. My reasons for choosing inductive thematic analysis, and the advantages and disadvantages of this analytic approach are discussed in Chapter 3 (Section 3.5.4.1). To analyse the secondary data, I used the six steps of Nieuwenhuis’s (2016) deductive thematic analysis. An explanation of this process, along with reasons for choosing this type of analysis can be found in Chapter 3 (Section 3.5.4.2).

1.9 QUALITY CRITERIA

Lincoln and Guba (1994) noted that to establish trustworthiness in research, a variety of quality criteria have to be adhered to. These criteria, which include credibility,

dependability, transferability, confirmability and authenticity, are discussed in detail in Chapter 3 (Section 3.6), and are therefore not included in this chapter.

1.10 ETHICAL CONSIDERATIONS

As mentioned, my study of limited scope formed part of the larger RYSE study. Since RYSE received ethical clearance from the Ethics Committee, Faculty of Education (UP 17/05/01), my sub-study received an aligned clearance (UP 17/05/01 Theron 18-006). A copy of the ethics clearance certificate can be found in Addendum A. Furthermore, whenever I interacted with the participants, I was careful to work ethically, as explained in Chapter 3 (Section 3.7).

1.11 SUMMARY

Hope has been found to be an associated pathway of resilience, in that experiences of hope may enhance resilience. Unfortunately, studies conducted in the South African context and dealing with what is known about the factors that hinder hope over time, appear limited (Isaacs & Savahl, 2014). There is a need for context-specific studies in relation to hope and resilience (Owen et al., 2016), also over time (Van Breda & Theron, 2018). I believe that my study of limited scope, which followed the design as summarised in Chapter 1, responds to this need.

In Chapter 2, I will discuss relevant literature with regards to factors that may hinder the experience of hope as an associated pathway of resilience among adolescents in resource-constrained communities within the Sub-Saharan context.

2. CHAPTER 2: LITERATURE REVIEW

2.1 INTRODUCTION

In my review of the literature on hope and resilience among African youth who face resource-constrained living conditions and other types of adversity, certain pathways of hope appeared to be prominent. These were social support, structural resources and personal skills. In this chapter the literature on these pathways to hope will be reviewed with a specific focus on the obstacles and enablers of these pathways. It would appear that the enablers and obstacles of the various pathways of hope are intrinsically linked, in that an absence of the enabler may obstruct hope. For this reason they are both reviewed in this chapter.

There is an abundance of literature on resilience in both international and African contexts (Masten, 2016; 2019). There is also an increasing awareness that resilience, and its related constructs such as hope, should be understood from the cultural and situational perspective that is relevant to a particular context (Panter-Brick & Leckman, 2013; Ungar, 2015). Therefore, much of the literature referenced in this chapter draws on South African studies, as my study focuses on adolescents from a South African township community.

2.2 SOCIAL SUPPORT AS A PATHWAY OF HOPE

Social support has been found to be an important protective factor when an individual is faced with adversity, and it is closely associated with positive psychological development (Bruwer et al., 2008; Lethale & Pillay, 2013). *Instrumental support* is when individuals perceive that they are helped or given assistance by others when necessary, and *informational support* is when individuals perceive that others provide them with information and guidance (Betancourt & Khan, 2008). Social support may also foster and maintain hope by encouraging optimism, because individuals are more likely to feel hopeful when they perceive that they are being supported by others (D'Amico Guthrie & Friiht, 2018). This refers to the *emotional support* dimension of social support as described by Betancourt and Khan (2008). In this dimension, individuals perceive that others care for them and can provide them with emotional comfort. In the sections that follow I review the factors that may act as enablers or may hinder the experience of instrumental, informational and emotional support as part of social support.

2.2.1 Enablers of social support

First of all, informational support may enable hope through a process in which an individual acts as a role model or provides guidance and information, thereby encouraging hope. Having an example to follow – or guidance or information to act on – can support the adolescent’s belief in a positive outcome. These hope-enabling sources of information can encourage adolescents to anticipate a better future and can also support their perseverance towards achieving that future. For example, Lundgren and Scheckle (2019) conducted a qualitative ethnographic and interpretative study with 13 South African adolescents who were in Grade 11 at a resource-constrained high school. They found that family relationships, in this case with the grandmother specifically, provided informational support that fostered hope in the adolescents. The adolescents reported that seeing the struggles that their grandmothers overcame and encouragement from their grandmothers to persevere allowed them to imagine a positive future (Lundgren & Scheckle, 2019). In one example a participant noted how the grandmother had a phrase that could be repeated each day to inspire hope, and in another example a participant reported how she learnt to be more hopeful through observing her grandmother’s decision-making processes.

Emotional support, such as being cared for and comforted, may contribute to hope by providing adolescents with a sense that their situation is understood and with the knowledge that there are resources (in the form of other people) available for challenging times. For example, a study by Cherrington and De Lange (2016) researched an intervention that aimed at strengthening hope among 12 adolescents (aged 9 to 13) living in the Free State province of South Africa. These adolescents, who were challenged by orphanhood and related forms of vulnerability, reported that community members made them feel hopeful by providing them with support and allowing them to feel heard. Furthermore, the adolescents reported that sharing their experiences and knowledge about hope with others in their community enabled them to become even more hopeful. Petersen et al. (2010) conducted a similar qualitative investigation about the challenges and protective factors that were influencing the socio-emotional coping of 25 HIV-positive adolescents (aged 14 to 16) who lived in the KwaZulu-Natal province of South Africa. The data generated from this study indicated that participants felt more hopeful when they could speak to caregivers and peers about their challenges and be comforted by them, as well as when they could provide this comforting support to others. Lastly, a study by Van Breda (2015), which explored the experiences of nine young men (aged 19 to 23) after they left a care facility in South Africa,

indicated the importance of emotional support. One participant specifically noted that emotional support from his family was integral to his well-being and his vision for moving forward in life.

Instrumental support is provided by social connections that facilitate access to resources such as material, financial or other basic resources. This form of social support has been linked to fostering adolescent hope in adverse circumstances. Often this is the case because adolescents believe that regardless of how difficult their life may be, they can rely on their social connections to take care of everyday needs like food, clothing or schooling. In this way, the present and the future become less bleak (Theron, 2016; Smit et al., 2015). For example, Hill et al. (2018) conducted a study with 2533 adolescent girls (aged 13 to 20) who lived in a rural area in South Africa where there was a high prevalence of HIV infection. They found that the girls who lived in households with a higher socio-economic status (SES) appeared to have greater hope. In part, this related to such households also having greater food security. A qualitative study by Bond and Van Breda (2018) investigated how four adolescents (aged 17 to 18) who were ageing out of a welfare residential care system in the Eastern Cape viewed their future selves. Their study highlighted the role of instrumental support in fostering hope for a future self, particularly in hoping for a future in which they are successful. Material resources, particularly bursaries and other forms of financial support, were instrumental to their visions of a better future and the goals they set for themselves. These participants noted how having role models aided them in respect of gaining information on how to access bursaries.

2.2.2 Obstacles to social support

As discussed in the previous section social support acts as an important pathway to hope through providing modelling on hope, facilitating access to other pathways of hope and by encouraging hope. It is for this reason that I contend that if supportive relationships are not available to adolescents, this may act as a hindrance to developing hope (Bojuwoye & Sylvester, 2014; Hendricks et al., 2015; Koen et al., 2011; Mosavel et al., 2015; Phasha, 2010; Seligman, 2006). Various studies support this view. For example, Teodorczuk et al. (2019) conducted a study that examined the effect of positive psychological interventions on the experience of hope and well-being in 29 adolescents (aged 14 to 18) who lived in a care facility in South Africa. The authors postulated that the intervention was less effective in enhancing hope with these participants, due to a possible lack of social support experienced

by the participants. The need for social support is reiterated in a study by Mampane and Ross (2017) who investigated the experiences of 15 South African adolescents (aged 13 to 18) in a foster care environment. In this study, some of the participants noted that they had a desire for someone in their lives to acknowledge their dreams and to motivate them to cultivate a positive vision for their future. For them emotional support was key to fostering hope.

In instances where role models provide unhelpful or demotivating information (verbal or modelled) hope is either broken down or discouraged. For example, some adolescents reported that individuals living in Orange Farm, a township outside Johannesburg, did not provide informational or instrumental support and instead actively discouraged them from having dreams for the future (Walker & Mkwanzani, 2015). The adolescents thought that this was probably due to these individuals not having any dreams themselves. Likewise, a study by Hendricks et al. (2015) investigated the influences of gangsterism, crime, poverty and unemployment on the life aspirations of 309 adolescents (aged 14 to 19) who lived on the Cape Flats (Western Cape, South Africa). The adolescents in this study reported that they experienced alienation from their peers and the community when they shared their hopeful views of the future. In their community hope-inspiring role models and related guidance and information appeared to be generally lacking. When Bojuwoye and Sylvester (2014) explored the well-being of South African adolescent males (mean age 15) who lived in single-parent households, specifically without their father, they found that these adolescents reported inadequate social support, which in turn negatively affected their overall well-being. Research shows that low levels of well-being are frequently associated with hopelessness (Bojuwoye & Sylvester, 2014; Yalçın & Malkoç, 2015; Yeung et al., 2015).

A study with young women whose fathers were absent reported that they had learnt to compensate for this lack of social support by drawing on their personal strength (e.g. motivating themselves to achieve their dreams of the future) (Zulu, 2019; Zulu & Munro, 2017). There was some inclination to believe that, had their fathers been present, their support would most likely have been negative. Koen et al. (2011) also conducted a study that examined the experiences of 62 South African female adolescents (aged 13 to 18). Although some participants reported that negative family relationships motivated them to work harder and to envision becoming better people than those around them, others noted how inadequate social support within the family context hampered their overall well-being, academic achievement and more specifically their ability to aspire (Koen et al., 2011). Poor

academic achievement is often associated with pessimism and hopelessness (Abler et al., 2017; Chen et al., 2019; Cortina et al., 2019; Datu & Park, 2019; Desai et al., 2019; Herrero Romero et al., 2019; Wallin et al., 2019).

In South Africa, the high prevalence of communicable diseases (such as HIV and AIDS) may also affect the availability of social support. For adolescents, the diagnosis of HIV or AIDS often acts as a barrier to accessing social support, mostly because of stigma related to the disease (Toska et al., 2019). Stigmatisation is prevalent in communities affected by the HIV and AIDS epidemic (Bhana et al., 2016; Bond & Van Breda, 2018; Campbell et al., 2007; Campbell et al., 2005; Casale et al., 2019; Mampane & Ross, 2017; Peterson et al., 2010; Smith & Morrison, 2006; Woollett et al., 2016; Yassin et al., 2020). Stigmatisation, which may be understood as a form of discrimination, is a process in which individuals are classified according to certain perceivable characteristics (e.g. race, gender and health status). They are then either looked down upon or devalued as a result thereof (Smith & Morrison, 2016).

For many individuals, the stigma attached to HIV and AIDS, and the associated lack of social support, compound the challenges of living with a chronic and life-threatening illness. All of these have a negative effect on the well-being of youth and obstruct their hope (Casale et al., 2019). For example, a study conducted by Yassin et al. (2020), which qualitatively explored the psychosocial well-being of 13 AIDS-orphaned adolescents (aged 8 to 17) living in the Western Cape in South Africa, reports that stigmatisation has led to the adolescents' experiences of isolation from all social support – both in the community and within their families. The study theorises that due to the lack of opportunities to access social support, these adolescents may have had insufficient exposure to models of hope, few to no experiences of hope, and inadequate opportunity to develop hope. Similarly, Casale et al. (2019) investigated how social support may buffer the impact of stigma over a period of time. They worked with 1053 South African adolescents (mean age 13) who lived in a resourced-constrained community with a high prevalence of HIV. At least half of the individuals in the adolescent sample were HIV positive. Findings from this study showed that adolescents who had experienced stigmatisation reported higher ratings of suicidal thoughts and behaviours (i.e., extreme hopelessness). In the previously mentioned study by Yassin et al. (2020), the adolescents who reported experiences of stigmatisation also reported low self-worth and depression (both of which are associated with hopelessness; Yeung et al., 2015).

In addition to stigmatisation, AIDS can result in the loss of loved ones and related hopelessness. The loss of a significant other may affect the well-being of that person and in turn reduce their ability to hope (Cluver et al., 2007; Rask et al., 2002; McLean et al., 2017; Thurman et al., 2017). Furthermore, in childhood and adolescence the capability to cope with the loss of a loved one is usually not developed, especially if it is the first experience of loss (Andriessen et al., 2018; Rask et al., 2002; Taylor et al., 2016). For example, the study by Cluver et al. (2007), which explored the psychological experiences of 1025 AIDS-orphaned adolescents (aged 10 to 19) living in urban settlements in South Africa, found that the AIDS-orphaned adolescents reported higher rates of depression and suicidal ideation. The loss of a loved one probably also obstructed these adolescents' access to emotional and other forms of social support.

2.3 STRUCTURAL RESOURCES AS A PATHWAY OF HOPE

2.3.1 Structural resources as enablers of hope

Education is a structural resource that is associated with fostering hope in adolescents (Bush & Glover, 2016; Msimanga, & Sekhampu, 2020; Spaul, 2013; Swartz et al., 2012). This is often because schools and other educational institutions constitute a space where other resources – such as supportive teachers or principals – may be accessed, or where skills may be learnt. For example, Jefferis and Theron (2017) conducted a phenomenological study with 28 adolescent girls (aged 13 to 19) who lived in rural contexts in South Africa. The adolescents reported that teachers both taught them to contemplate a positive future for themselves and motivated them to achieve their goals. Likewise, a study by Malindi and Machenjedge (2012) explored the relationship between school engagement and resilience. Their study focused on the experiences of 17 African male adolescents (aged 11 to 17) who had lived on the streets and were at the time of the study living in a shelter in South Africa. The participants reported that school allowed them to think more positively about their future and that teachers could provide advice on how to maintain hope in their lives.

Education also offers opportunities for adolescents to acquire knowledge and values that could aid in furthering their development and the ways in which they can contribute to society (Jefferis & Theron, 2017; Spaul, 2015). It is in the school environment that adolescents may have the opportunity to learn about career options, goal setting and problem solving. They may also be empowered to think critically. All these life skills would contribute to an adolescent's ability to envision hopeful future possibilities, including career

possibilities and opportunities to further develop their self-efficacy (Harris & Little, 2019; Jefferis & Theron, 2017; Snyder et al., 2000; Snyder, 2005; Stander et al., 2015).

For example, Theron (2017) conducted a phenomenological study that investigated enablers of resilience despite structural disadvantage with 385 black adolescents (aged 11 to 18) living in the Vaal Triangle, South Africa. The adolescents reported that they were hopeful that education would be a pathway to achieve their dreams and that being in educational contexts allowed them to visualise a better future. Additionally, a quantitative study by Maree et al. (2008), which explored the relationship between academic performance and hope in 474 undergraduate human sciences students at a university in South Africa, reported a relationship between hope and academic performance. The authors found that two dimensions of hope, namely agency and future orientation (as measured and described by the Hope Orientation Measure), were predictors of improved academic performance. This finding was attributed to the students' performing well when feeling motivated and/or energised by having a clear idea of their goals (Maree et al., 2008). Likewise, the study by Phasha (2010) among adolescent survivors of sexual abuse reported that education and educational opportunities were instrumental in adolescents achieving their dreams and creating a hoped-for future for themselves, despite the trauma of being abused. These findings further correspond with the study by Walker and Mkwanzani (2015), wherein eight adolescents (aged 13 to 27) who lived, or who had lived, in an orphanage in an informal settlement in South Africa were interviewed about access to higher education. The authors found that for these adolescents going to a higher education institution was important to achieve their future aspirations and to have a better future.

Furthermore, hopeful thinking may also play a role in enhancing the educational experience for individuals (Snyder et al., 2000). Put differently, hopeful thinking may contribute to an individual's ability to achieve academically. For example, Pillay (2017) conducted a quantitative study with 160 adolescents (aged 12 to 14) living in Soweto, South Africa, who were challenged by poverty and poor-quality education (they all attended a resource-constrained school). Pillay (2017) found that there may be an association between adolescents' positive beliefs about the future and positive educational achievement. These hopeful beliefs acted as a motivator that supported adolescents' attempts to overcome their circumstances (Pillay, 2017). Lethale and Pillay (2013) also conducted a study that explored the resilience of four South African adolescents (aged 14 to 18) who had been orphaned and who lived in adolescent-headed households. The adolescents in this study reported that their

vision for the future and their positive, hopeful thinking encouraged them to work harder in school to ensure that they achieved a better future. This sentiment was further supported by the educators of the adolescents in the study who reiterated that a clear vision for the future fostered motivation in their schoolwork.

A lack of access to structural resources has (unexpectedly) also been seen to act as a motivator of hope, as was observed in individuals who acknowledge these barriers. Individuals who acknowledge adversity are motivated to improve their circumstances in the future. For example, a study by Isaacs and Savahl (2014) reported on the experiences of 14 adolescents (aged 14 to 15) who were exposed to adversity on the Cape Flats, South Africa. The study reported that their resource-constrained living conditions motivated them to envision and plan for futures living elsewhere and under improved conditions. Similarly, a study by Smit et al. (2015) reported on adolescents who had identified resource barriers in their community. These adolescents were able to use this adversity as a motivator of hope to achieve a better future than their resource-constrained reality.

2.3.2 Lack of structural resources as an obstacle to hope

Many communities in South Africa are poorly resourced (Gibbs et al., 2010; Myers et al., 2016; Smit et al., 2015; Statistics South Africa, 2016, 2017). Resource constraints – such as inadequate educational opportunities, poor service delivery or financial limitations, which are experienced by communities and the adolescents within those communities – are often a result of structural disadvantage or economic inequality and may contribute to the development of hopelessness among adolescents (Coetzee et al., 2017; Ebersöhn, 2017; Savahl et al., 2017; Walker & Mkwanazi, 2015). For example, the study by Wilson-Strydom (2017) explored the pathways to university taken by 40 South African undergraduate students (aged 18 to 29) who had previously attended resource-poor township schools. It found that for the students who lived in a context of poverty, their limited access to financial resources, food and/or electricity and educational support acted as a significant barrier to their hopes and life aspirations (Wilson-Strydom, 2017). Likewise, Mosavel et al. (2015) studied the resilience narratives of 183 adolescents in Grade 8 through to Grade 10 from schools in Masidaal, an urban community in the Western Cape that is known to be challenged by poverty and crime. In this study, several adolescents reported the resource constraints they experienced daily – namely poor education, housing challenges and financial

constraints – and how they perceived these constraints to be direct barriers to their hopeful future aspirations.

A further factor that contributes to these constraints is the geographical location of townships. Having originated in the apartheid era as racially segregated areas, townships are often situated on the peripheries of cities. This results in a lack of employment opportunities, poor access to basic services, safety concerns, and limited or no access to green spaces, recreational areas and environmentally clean spaces (Comrie, 2016; Du Toit et al., 2018; Jürgens et al., 2013; Msimanga, & Sekhampu, 2020; Oosthuizen, 2019; Turok & Borel-Saladin, 2016). For example, the Hodes et al. (2018) study with HIV-positive adolescents (aged 10 to 19) living in rural and peri-urban areas in the Eastern Cape province of South Africa, found that access to basic services (such as sanitation, clean water, health facilities and green spaces such as vegetable gardens) were valuable to the participants. In particular, the participants felt that having access to these type of resources in their community would give them more agency over their own lives. Having agency is important in fostering hope, as it helps individuals to believe that they have the capability to achieve goals and to carry out future plans (Harris & Little, 2019; Marsay et al., 2018). Additionally, a study by Tarantino et al. (2018) investigated South African adolescents' perceptions of their neighbourhood. They found that when a neighbourhood was perceived as safe, adolescents felt they were able to envision a better future and have hope. They were not restricted by concerns about their daily surroundings. This contrasts with the findings of Adams and colleagues (Adams & Savahl, 2015; Adams et al., 2016) in a study conducted with South African children from low-income communities on their perceptions of their physical environment and the influence it has on their well-being. They found that natural spaces were of low priority to the participants. The authors theorised a possible reason for this finding and suggested that other structural resources were of greater importance to participants since natural spaces were often associated with a lack of safety (e.g. being used as hideouts by criminals).

2.4 PERSONAL SKILLS AS A PATHWAY OF HOPE

Personal skills may be understood as the intrinsic factors that influence how adolescents interact with their environment (Tudge et al., 2009). These factors may include aspects such as optimism, spirituality and coping mechanisms (Ebersöhn et al., 2015; Kumpfer & Alvarado, 2003; Masten, 2014; Van Breda & Dickens, 2017). Personal skills

will be discussed in the sections that follow in terms of how they influence adolescents' experiences of hope.

2.4.1 Enablers of personal skills

Resilience studies report that optimism is an important enabler of adolescent hope (Cortina et al., 2016; Lau & Van Niekerk, 2011, Ogina, 2012). Optimism may be defined as a personal characteristic that supports a positive attitude or mood (Kelberer, et al., 2018). Optimism further includes having a future-orientated perspective, an opinion and outlook that is positive in nature, positive meaning making as well as an expectation that positive events will occur in the future (Bryant & Cvengros, 2004; Tetzner & Becker, 2019).

For example, Cortina et al. (2016) conducted a study with 1025 adolescents (aged 10 to 12), of which some were challenged by refugee status and all were challenged by socio-economic disadvantage. The adolescents in this study were from Agincourt, a rural town in the Mpumalanga province of South Africa. The adolescents who reported positive interpretations of adverse experiences or of events that had occurred in their lives, appeared to have better psychological functioning. This helped them buffer the effects of adverse circumstances and supported their ability to hope. Similarly, Lau and Van Niekerk (2011) researched the meaning-making processes of six black adolescent burn survivors (aged 14 to 24) from three provinces in South Africa, namely Gauteng, KwaZulu-Natal and the Eastern Cape. Their study's results showed that participants who were able to reframe their burn experiences in positive terms experienced further positive transformations in their lives. These transformations were noticeable in their attitudes as well as in their perspectives on their lives. The authors noted they believed these positive transformations were likely to foster opportunities for the adolescents to hope. Ogina (2012) also conducted a study with 57 adolescents (aged 10 to 17) from the Mpumalanga province in South Africa who were challenged by orphanhood. These adolescents appeared to have an optimistic attitude associated with hope, which acted as a buffer against adverse experiences.

As noted, future orientation is a component of optimism that specifically refers to the perspectives that individuals hold for their future and that includes their ideas and feelings about the future (Stoddard et al., 2011). The ability to create an optimistic future narrative is an important aspect of goal setting, planning and decision making (Santilli et al., 2017). Having a future orientation has been reported to be a factor that influences adolescent hope (Ebersöhn et al., 2015; Isaacs & Savahl, 2014; Ogina, 2012). For example, Isaacs and Savahl

(2014) conducted a study with 14 adolescents (aged 14 to 15) who lived in a township on the periphery of Cape Town, South Africa. They were challenged by low socio-economic issues such as violence, poverty and a lack of resources. The adolescents reported that their ability to envision a future different from their present circumstances nurtured their ability to hope. Likewise, Lundgren and Scheckle (2019) researched the fundamental elements of identity development as reported by 13 isiXhosa and English-speaking adolescents from a township in Port Elizabeth, South Africa. These adolescents reported that their confidence in and thoughts of a better future were a common feature of their ability to hope. Similar results were also reported in the study by Machenjedge et al. (2019), which qualitatively explored the resilience of 23 adolescents (aged 13 to 17) challenged by AIDS orphanhood in South Africa. The participants in this study reported that their dreams and wishes for a better future both fostered hope and acted as a motivator in times of difficulty.

In addition to optimism, South African studies report spirituality as an enabling factor for hope (George & Moolman, 2017; Isaacs & Savahl, 2014; Marsay et al., 2018; Phasha, 2010; Pienaar et al., 2011; Smit et al., 2015; Theron, 2016; Woollett et al., 2016). Spirituality, faith and religion are often used interchangeably (Lepherd, 2015). Spirituality may be understood as a belief, relationship or connectedness with God or a higher power (Lepherd, 2015; Marsay et al., 2018). For example, Phasha (2010) conducted a study with 22 adolescents (aged 16 to 23) who lived in South Africa and were victims of childhood sexual abuse. In this study one of the participants noted how her belief in God allowed her to make better sense of her experiences and to adopt a hopeful attitude through which she was able to overcome her adversity.

In a study by Pienaar et al. (2011) with eight AIDS-orphaned adolescents (aged 9 to 13) who lived in a residential care facility in South Africa, religion was found to be a source of inner strength that made the adolescents hopeful about their future lives. It was further noted that their church provided a supportive community. A similar study was conducted by Smit et al. (2015) with 13 South African adolescents (aged 18 to 22). The participants were challenged by poverty and socio-economic factors but they reported that their belief in God was a source of motivation and strength that gave them the ability to hope.

In South Africa, some cultural groups practise their spirituality through ancestral worship and rituals (Cumes, 2013). Such practices are usually linked to an underlying belief that ancestors play an important role in the lives of the living and they often occur alongside religious practices (Bogopa, 2010). These traditional belief systems have significance in

terms of how individuals view their lives, and thus contribute to their experience of hope (Bogopa, 2010). For instance, in a narrative enquiry conducted by Theron (2013), two black South African students (aged 24 and 43) generated life stories that were analysed as part of a resilience study. One reported that her belief in her ancestors was instrumental in teaching her to appraise her life positively. Positive appraisal is a characteristic of hope.

2.4.2 Obstacles to personal skills

Coping can be understood as the strategies/skills that an individual utilises to respond to or to manage stressors. These strategies may include behaviours, thoughts, beliefs or combinations of these (Frydenberg & Lewis, 2009; Schneider et al., 2018; Ungar et al., 2015) and they are not necessarily always constructive or positive. Negative or maladaptive forms of coping could include substance abuse, self-harm and avoidant strategies such as social disengagement (Cenkseven-Önder, 2018; Cherewick & Glass, 2018; Harrison et al., 2019; Van Der Wal & George, 2018). Hope and coping strategies often have a reciprocal relationship, in that constructive coping strategies may foster hope and vice versa (Folkman, 2010; Frydenberg et al., 2009). Therefore, should an individual's coping strategies be harmful (i.e. maladaptive) they are likely to obstruct hope (Schneider et al., 2018; Wadsworth, 2015).

A study by George and Moolman (2017) explored the relationship between coping behaviours and suicidal ideation in 495 South African adolescents (aged 12 to 18). They found that adolescents with maladaptive coping behaviours, in particular poor emotional regulation, were more likely to engage in suicidal ideation. The contemplation of suicide generally reflects hopelessness (Molock et al., 2006; Stewart et al., 2005). In contrast, adolescents who specifically utilised religious coping had a decreased likelihood of suicidal ideation and increased experiences of optimism (George & Moolman, 2017).

In another example, Ebersöhn et al. (2015) conducted a study that explored the resilience of 19 HIV-negative children (aged 5 to 6) and their HIV-positive mothers who were living in informal settlements in South Africa. As part of this study, the researchers identified risk factors that elevated despair (as manifested in internalising and externalising behaviours) and that included maladaptive coping and negative emotions. Berg et al. (2016) examined the relationship between substance use as a form of coping with depression in 269 South African adolescents and adults (mean age 28.4). Although the specific substances

were used to cope with severe adversity (e.g. by numbing awareness), their use increased the likelihood of experiencing hopelessness and other symptoms of depression.

2.5 SUMMARY

As documented in this chapter, three predominant pathways to hope were prominent in my review of the literature: social support, structural resources and personal skills. When these pathways are absent – or obstructed – then hope is unlikely. This finding aligns with the hope theory that informed my study, which suggests that hope is a multi-dimensional and dynamic phenomenon that draws on personal and social-ecological resources (DuFault & Martocchio, 1985).

From my review of the relevant literature, I also concluded that a number of studies have reported obstacles to hope for children and adolescents living in resource-constrained communities in sub-Saharan Africa (examples are Berg et al., 2016; George & Moolman, 2017; Hendricks et al., 2015; Mampane & Ross, 2017; Mosavel et al., 2015; Teodorczuk et al., 2019; Wilson-Strydom, 2017). However, these studies do not explain how consistent the identified obstacles to hope are over time. As explained in Chapter 1, it is important to gauge the consistency of obstacles to hope, because an understanding of such consistency should better support those working with adolescents (such as educational psychologists) to be responsive to the risks to adolescents' hopes and devise preventative interventions (Adams et al., 2019; Masten, 2001). I proceeded to address this under-explored phenomenon by conducting the qualitative study that is explained in detail in the next chapter.

3. CHAPTER 3: RESEARCH METHODOLOGY

3.1 INTRODUCTION

In this chapter I describe the research methodology used in my study. I begin by situating my study within the larger RYSE project and state the purpose of my research. Next, I discuss the paradigmatic perspectives (meta-theoretical paradigm and methodological paradigm), methodology (research design; participants; data generation and analysis), as well as the quality criteria and ethical considerations relevant to the study.

3.2 SITUATING MY STUDY OF LIMITED SCOPE WITHIN THE RYSE STUDY

As stated in Chapter 1, my study of limited scope is part of the broader RYSE study. The RYSE study is a collaboration between a team of researchers in Canada and South Africa (RYSE, 2020) that seeks to explore patterns of risk and resilience among young people in both South African and Canadian communities (RYSE, 2020). A component of the study was capacity building of new researchers and as such, interested Master's level students were invited to join the research team. In the first year (i.e. 2017) of the RYSE study, a Master's student conducted a study exploring the pathways to hope (Morkel, 2019). I replicated the study and focused on the consistency of barriers to hope over time. I therefore interrogated the methods and concluded that they were worthwhile repeating (as explained further in Section 3.4.2).

I did not personally recruit participants for the replication, as the RYSE study had established a Community Advisory Panel (CAP) in the eMbalenhle community that facilitated recruitment. Seeing that my study utilised purposive sampling, I guided the recruitment of participants for the replication study by providing criteria to the CAP (see Section 3.5.2). The recruited participants were divided into two groups, with a colleague (a fellow Educational Psychology Master's student) and I facilitating a group each. As such, I conducted the empirical work with the participants in my group and recorded and transcribed their data verbatim. My colleague transcribed verbatim the group conversations and followed the same data generation procedures. We combined the data from both groups into a single data set. Following this, I analysed the data through a process of primary analysis (see Section 3.5.4.1) that was directed by my research question. Facilitator consistency was supported by both of us being trained by the RYSE project manager. In that training we agreed on the wording that we would both use to ask participants to generate data.

In view of the fact that my study explored the consistency of barriers to hope over time, two time periods were used in my study. Time 1 is the hope-related data generated in 2017 and written up by Morkel (2019) for her Master’s dissertation. In my study, this data constituted the secondary data and I performed a secondary analysis of it (see Section 3.5.4.2). Time 2 is the primary data, which was co-generated by me and a colleague in 2018 and which I analysed for the first time. Figure 1 illustrates the time periods used in my study.

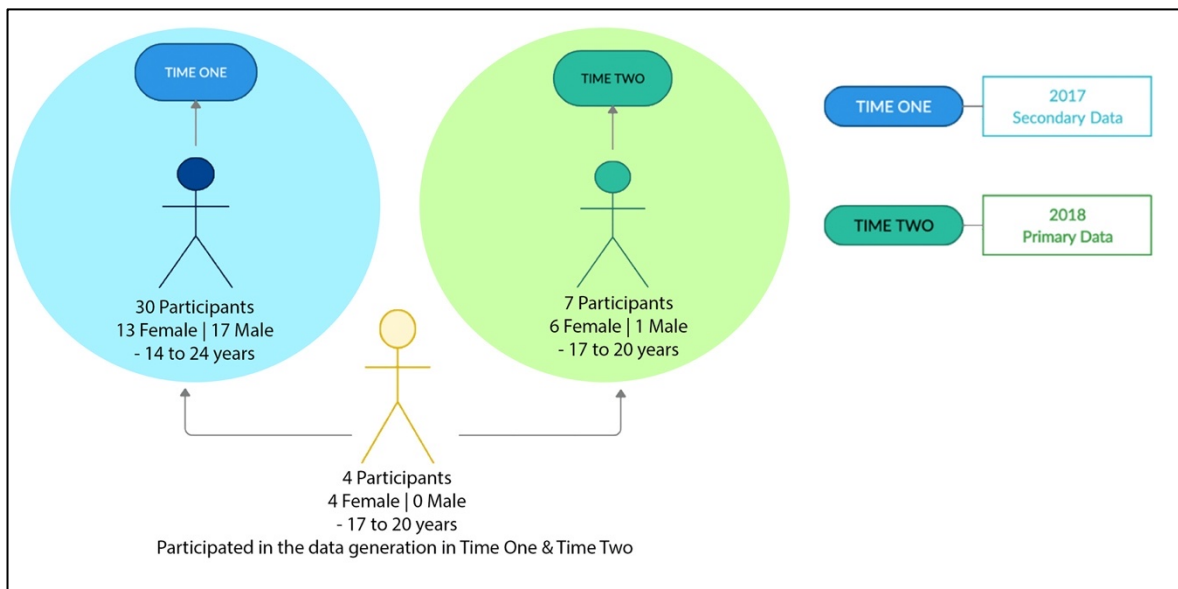


Figure 3.1: Data sets for Time and Time 2

3.3 PURPOSE OF STUDY

The purpose of my study was to explore the factors which constrain experiences of hope for adolescents living in eMbalenhle and how consistent these factors are over time. An exploratory study is a form of qualitative research in which the researcher aims to explore as yet un-investigated patterns or conditions (Hesse-Biber & Leavy, 2011). Little is known about what obstructs hope over time for adolescents in resource-constrained communities, hence my exploratory study. The primary goal of an exploratory research study such as this is to gain rich and detailed information about phenomena that have as yet been underexplored (Kumar, 2019).

An exploratory research study has several advantages. It offers the possibility of obtaining rich information on a topic about which little is known, and allows participants to contribute to the development of new knowledge on underexplored topics. It is furthermore cost effective and creates opportunities for further research (Davies et al., 2011; Kumar, 2019; Singh, 2007). A potential disadvantage of this form of research study is that the

findings gathered may be inconclusive and subject to the interpretation and ability of the researcher – which could lead to bias and prejudice (Kumar, 2019; Swedberg, 2018). In order to avoid potential bias, I took great care to apply the quality principles detailed in Section 3.6.

3.4 PARADIGMATIC PERSPECTIVE

3.4.1 Epistemological paradigm used

In my study, I made use of an interpretivist paradigm as the epistemological paradigm as it seeks to understand phenomena through the subjective experiences of individuals (Reeves & Hedberg, 2003; Willis et al., 2007). In essence, interpretivism suggests that reality is created by individuals and, in order to gain a subjective understanding of such reality, particular methodologies are required to conduct this form of social research (De Vos et al., 2011). It further seeks to understand human behaviour and phenomena through the meaning that individuals ascribe to them (Willis et al., 2007). The interpretivist researcher will attempt to place themselves in the position of the individuals they are researching through interpreting the viewpoints of their participants, as well as considering their participants' context (De Vos et al., 2011; Willis et al., 2007). My study explored which factors adolescents living in eMbalenhle conceptualise as barriers to their experience of hope and how consistent these factors are over time; therefore the interpretivist paradigm afforded me a better understanding of this phenomenon by gathering rich descriptions from the participants.

The advantage in adopting an interpretivist paradigm is that the data gathered generally contains high levels of detail and allows for authentic descriptions of an individual's subjective experiences (Nieuwenhuis, 2016). The subjective nature of the interpretivist paradigm is particularly beneficial to my study, as limited descriptions exist of factors that have been conceptualised by adolescents as barriers to hope. Through my research, I was able to construct knowledge from the data generated based on the participants' views, feelings and lived experiences (Carminati, 2018; Pretorius & Theron, 2019). The subjective nature of the interpretivist paradigm furthermore allowed me to consider the context of the participants, which has an impact on how they interpret their experiences (Thanh & Thanh, 2015). This is beneficial to my study, as descriptions of barriers to hope in contexts of disadvantage (like in eMbalenhle) are limited.

Despite this advantage, the interpretivist approach does have a shortfall due to its subjective nature, which may leave room for researcher bias (Denscombe, 2010). In keeping with this approach, it may be assumed that the researcher's context and positioning will influence their experiences, thoughts and feelings (Thanh & Thanh, 2015). A researcher can overcome this issue by declaring any potential bias at the onset of the study. I consequently stated my assumptions in Chapter 1 (Section 1.7) and addressed the potential for bias through self-reflection and debriefings with my colleague.

Findings of interpretivist research may also not be generalisable due to its subjective nature (Denscombe, 2010). While perhaps not generalisable, I believe my findings may be transferable, as others might be able to compare findings and investigate potential similarities when research is conducted in a similar context (see Section 3.5.2.1) (Connelly, 2016).

3.4.2 Methodological paradigm used

The methodological paradigm that guided my study was a qualitative research paradigm. Qualitative research places an emphasis on the understanding of meaning or processes as opposed to seeking to measure or examine (De Vos et al., 2011; Denzin & Lincoln, 2011). A qualitative approach has been noted as well suited when an interpretivist approach is followed, as in my study where I explored the factors that adolescents living in eMbalenhle conceptualise as barriers to their experience of hope and how consistent these factors are over time (De Vos et al., 2011; Denscombe, 2010). Qualitative research also follows a naturalistic approach, which allows for an environment in which participants may feel comfortable and able to share insights in an unobtrusive manner (Denzin & Lincoln, 2018; Du Plooy-Cilliers et al., 2014). This was advantageous for my study as different methods (e.g. drawings and talking) could be employed to allow for a medium that would best enable participants to share their experience.

The value in utilising a qualitative research is that it allows for in-depth exploration of particular social situations or phenomena. It is often through adopting this approach that a researcher is able to gain insight into the intricacies of complex phenomena which may otherwise be easily overlooked (De Vos et al., 2011; Denscombe, 2010). As this approach deals directly with an individual's perceptions and experiences, there is more room for elaboration by the individual involved. A qualitative research approach also offers possibilities of delving into any complexities that may arise (De Vos et al., 2011). Through

identifying these intricacies in experiences and the detail of data collected, the possibility to interpret data and develop contextually relevant explanations is far greater (Denzin & Lincoln, 2011). This is of particular value to my study in which I explored a phenomenon of which not much was known.

The application of a qualitative approach has several limitations, many of which are due to the fact that the quality of the data collected and the interpretation of such data primarily depend on the researcher (Du Plooy-Cilliers et al., 2014). There may also be differences in positioning between the researcher and participants, which may result in bias (De Vos et al., 2011; Du Plooy-Cilliers et al., 2014). In order to address this in my study, I ensured that I entered the meeting with the participants from a perspective of learning and that I treated them with respect. I was aware that for many participants English was not their first language and communication in English might be difficult. I therefore requested participants to converse in a language they felt most comfortable with. The project coordinator was also on hand on the day of data generation to aid with translation if it was needed.

Another potential disadvantage may be that within the qualitative approach the data collection procedures tend to be rather time consuming and expensive (Anderson, 2006; De Vos et al., 2011). In order to address this challenge, the data collection phase of my study took place at a time (a single meeting date) and place (local venue) that were most convenient for the participants, thus ensuring they would not need to dedicate extensive time to the data collection process or incur travel costs.

Qualitative research has furthermore been criticised for potentially lacking the necessary scientific rigour compared to quantitative research (Flick, 2018; Maree, 2016). However, I employed the quality criteria detailed in Section 3.6 to add to the scientific rigour of the study. I also adhered to the standards proposed by the American Psychological Association (APA) for qualitative reporting (Levitt et al., 2018), which include presenting findings thematically, presenting in a first-person style, and describing in detail the methods, questions and considerations employed in the process of conducting a study.

3.5 METHODOLOGY

3.5.1 Research design

As mentioned in Chapter 1, I made use of a phenomenological research design. A phenomenological research design aims to gain deeper understanding of the lived experiences of research participants (Creswell, 2014; Lichtman, 2010; Merriam & Greiner, 2019). As my study explored which factors adolescents living in eMbalenhle report as barriers to their experience of hope and how consistent these barriers are over time, a phenomenological research design was thus most suited. In a phenomenological research design, the researcher will attempt to understand each participant's perspective, perceptions and the meanings they ascribe to their experiences of a phenomenon or phenomena (Lichtman, 2010; Merriam & Greiner, 2019). The researcher will analyse interactions, conversations and/or observations with the participants and from this analysis, attempt to gain insight into the essence of the phenomenon/phenomena (Groenewald, 2004; Lichtman, 2010; Merriam & Greiner, 2019). Furthermore, the researcher will also seek to uncover commonalities in the descriptions given by participants of the phenomena (Bloomberg & Volpe, 2018; Marshall & Rossman, 2016).

The value in utilising a phenomenological research design in my study, lies in the fact that it facilitates a deep and detailed understanding of the lived experiences of individuals, which is ideal for investigating phenomena that effect individuals and of which little is known, as is the case in my study (Finlay, 2009; Merriam & Greiner, 2019). This design enabled me to gather unique and original perspectives of what participants considered to be barriers to hope and how consistent these are over time (Creswell & Poth, 2018; Groenewald, 2004). However, a criticism of the phenomenological research design, is the potential for misinterpretation and inaccuracy in the descriptions (Patton, 2002; Seabi, 2012). In order to minimise the potential for misinterpretation, my study included both verbal descriptions in the form of the explanations given by the participants, as well as visual descriptions in the form of drawings completed by the participants. Thus, providing two sources through which participants could describe their experiences and allowing for opportunity to verify understanding of these descriptions by the researcher.

3.5.2 Participants

My study made use of purposive sampling, which requires critical consideration of the parameters of a particular population and the selection of participants according to clear

criteria (De Vos et al., 2011). It also allows for maximising the potential of collecting specific data for the study (De Vos et al., 2011; Merriam & Greiner, 2019). As my study explored the factors that adolescents living in eMbalenhle conceptualise as barriers to their experience of hope and the stability of these barriers over time, purposive sampling was the most suitable choice (De Vos et al., 2011; Merriam & Greiner, 2019).

Given my research focus, I requested the Community Advisory Panel (CAP) to recruit the Time 1 participants again for Time 2. The CAP assisted in facilitating the research process and recruiting participants from the community (Lynn et al., 2000; Theron, 2013). A common phenomenon in longitudinal studies is that of attrition, which refers to the loss of study participants due to various reasons such as withdrawal, death and/or illness, and failure to recontact participants (Delfabbro et al., 2017). It would appear that attrition also occurred in the RYSE study, as at Time 2 many of the participants from Time 1 could not be contacted. Their contact details had changed, or they had relocated or died. To compensate for this, the CAP agreed to recruit new participants. I was aware that this is acceptable research practice as long as the newly recruited participants are similar to the previous ones (Cockcroft et al., 2019). The criteria used for participant inclusion at Time 1 were that participants had to be adolescents (between the ages of 10 and 24) living in the eMbalenhle community, affected (negatively/positively) by the petrochemical industry, and be comfortable participating through medium of English. I reviewed the criteria that had been used to select participants for Time 1 and determined that they were still applicable for selecting participants in my study at Time 2. Therefore, I requested the CAP to use the same criteria to recruit participants for my study.

An advantage of recruiting participants through purposive sampling is that it may provide rich and detailed data from which to do analysis. All participants who are purposefully selected already meet the specified criteria and thus it is more likely that the data obtained from them will be specific to the topic of interest (Flick, 2018). However, the findings obtained from these participants may not always be generalisable to the broader population, precisely because participants had to meet a specified set of criteria and selection bias might have occurred (Flick, 2018). In my study, there was potential for selection bias as the CAP and participants were from the same community. However, I believe this limitation was managed through the provision of criteria for inclusion in my study.

In phenomenological studies, sample sizes tend to be smaller, typically from one to ten persons, but sometimes up to 25 persons (Creswell & Poth, 2018; Moser & Korstjens,

2018; Starks & Trinidad, 2007). During Time 1, altogether 30 participants took part, with an average age of 18.7 years. For Time 2 there were seven participants with an average age of 18.3 years. Hence, the sample sizes for Time 1 and Time 2 were well in line with the reported standard sample size for a phenomenological study (Creswell & Poth, 2018; Moser & Korstjens, 2018).

I summarised the demographic details of participants during Time 1 in Table 3.1 and for Time 2 in Table 3.2. In view of the fact that not all of the previous participants were available during Time 2, my study does not report on the barriers to hope for the same adolescents over time. Instead, it reports on the consistency of barriers for adolescents from the same community. Since the adolescents shared similar demographics (e.g. similar average age [18.7 and 18.4]; same community) (see Cockcroft et al., 2019), it was feasible to compare their accounts of what constrained hope and to use this comparison to deduce how constant such constraints have been over time. In order to ensure the confidentiality of the participants (Time 1 and Time 2), they were given the option to choose their own name or a self-assigned pseudonym that was used as the participant's identifier when reporting on themes from the data.

Table 3.1: Details of participants for Time 1

Name of participant	Sex of participant	Age of participant
Minky	Female	20
Happy	Female	18
Kezner	Male	17
Precious	Female	18
Andy	Female	20
Khutso	Female	17
Nomalanga	Female	22
Tokollo	Male	17
Ayanda	Male	21
Thoko	Female	17

Danny	Male	23
Blessed	Female	19
Zenande	Male	17
Brute	Male	16
Thuso	Male	17
Sammy	Male	18
Lwande	Female	22
Philasande	Female	17
Lelo	Female	17
Nkosinathi	Male	21
Perseverance	Male	20
MJ	Male	20
Luyanda	Male	17
Sibusiso	Male	23
Tshepo	Male	19
Carol	Female	18
Lunga	Female	19
Quphza	Male	15
Siyabonga	Male	18
Thulani	Male	20

Note: Most participants chose to use their own name. An asterisk (*) indicates a self-chosen pseudonym.

Table 3.2: Details of participants for Time 2

Name of participant	Sex of participant	Age of participant	of Participation in the 2017 RYSE study
Minky	Female	20	Yes
Happy	Female	18	Yes
Kezner	Male	17	Yes
Precious	Female	18	Yes
Busi	Female	19	No
Rainbow*	Female	18	No
Khomostso	Female	18	No

Note: Most participants chose to use their own name. An asterisk (*) indicates a self-chosen pseudonym.

3.5.2.1 Study context

All the participants from both the Time 1 and Time 2 data sets came from eMbalenhle, a township in the Govan Mbeki Local Municipality, neighbouring Secunda in the Mpumalanga province. eMbalenhle has an approximate population size of 340 091 (Statistics South Africa, 2018). A series of local challenges are faced by the residents of eMbalenhle, including poor service delivery, protests, violence, and climate challenges such as drought (Bega, 2019; Comrie, 2016; Daniel, 2018; Mathebula, 2018a; 2018b; 2019). All these challenges are likely to have an impact on the daily lives of those within the community, and as described in Chapter 2, factors such as violence may affect experiences of hope (Adams et al., 2016; Botha & Van Den Berg; 2016; Hendricks et al., 2015; Johnson & Lazarus, 2008; Wilson-Strydom, 2017).

In phenomenological research, data saturation occurs when no new information emerges or when repetition occurs, implying the maximum amount of information has been generated from a particular sample (Moser & Korstjens, 2018). Data saturation is an important element in phenomenological studies, as its main focus is to ensure that enough detailed and rich descriptions of a phenomenon have been gathered in the data (Moser & Korstjens, 2018). As will be reported in Chapter 4, participants from Time 1 had similar

explanations as those in Time 2 in respect of the themes identified. They were able to give detailed explanations and rich themes could be generated from the data; thus I am satisfied that data saturation was reached (Groenewald, 2004).



Figure 3.2: Community sports grounds in eMbalenhle

Photo credit: Michelle Gerber

3.5.3 Data generation and documentation

3.5.3.1 Primary data

As mentioned in Chapter 1, I used an arts-based approach, the ‘draw-and-tell’ method, which includes conversational interviews to generate data (Marshall & Rossman, 2016; Seidman, 2013; Yin, 2016). Participants are given a prompt, a brief or a question to which they respond by means of a drawing and writing about the drawing, along with a discussion on the meaning of the drawing (Angell et al., 2014). In the ‘draw-and-tell’ activity, the participants were asked: *What makes it hard or difficult to hope?* Once participants had completed their drawings, they were given an opportunity to describe and explain the drawing. I subsequently followed up with questions to gain a deeper understanding of what the picture meant for them (Seidman, 2013; Yin, 2016). For example, in response to a participant who mentioned that the opinions of others are a barrier, I asked: *‘What type of things do they say?’*

The ‘draw-and-tell’ method allows for face-to-face communication with participants by providing an opportunity for rapport building and gathering information from participants who may experience language limitations (Angell et al., 2014; Punch, 2002). In my study, the fact that English was not the first language of the participants may have been a limitation; however, the opportunity to draw allowed participants to express themselves without limitations. Furthermore, the ‘draw-and-tell’ method and conversational interviews have been praised for the rich and detailed data that they are able to generate, which is further enhanced by using a combination of mediums (Angell et al., 2014; Woolford et al., 2015). For example, participants were able to express themselves in both an abstract (drawing) and concrete manner (writing). My study required a high level of detail to better my understanding of the participants’ reports regarding their experiences of barriers to hope and how consistent the barriers are over time. Therefore, a combination of drawing and writing methods was considered appropriate.

Despite their value, the ‘draw-and-tell’ method and a conversational interview structure also pose potential challenges. Variations have been found in the interpretation of data generated by this method, as well as a general failure to describe a universal approach to data analysis (Angell et al., 2014). Furthermore, while the ‘draw-and-tell’ method holds value in allowing participants to express themselves, participants may well be concerned about judgement regarding their drawing skill (Angell et al., 2014; Bryman, 2012; Gilbert, 2008). To overcome this challenge, I took care during the data generation process to reassure participants that drawing ability was not the area of focus. I stressed the fact that their drawings allowed them to express their unique perspective. I took time to understand all the elements of the participants’ drawings to lessen any potential for misinterpretation. I also asked questions about any unclear elements in the drawing and discussed these once they had completed their drawings.

The conversations between myself and the participants were recorded, with the participants’ consent, on a recording device provided by the RYSE team. All photos taken during the day of data collection were taken with the consent of the participants. The recordings were saved on my personal computer in a password-protected folder, after which the recordings were transcribed. The recording device was returned to the RYSE team after the recording data on the device had been erased. Photos taken on the day were also stored on my personal computer in a password-protected folder for potential inclusion in my study. I scanned the drawings completed by the participants and saved them on my personal

computer in a password-protected folder. The data generation procedure resulted in two sets of transcripts and seven drawings from the participants – which made up the Time 2 data set.



Figure 3.3: Meeting with participants to generate data through the ‘draw-and-tell’ method

Photo credit: RYSE study research team



Figure 3.4: Example of the data generated by a participant using the ‘draw-and-tell’ method

Photo credit: Michelle Gerber



Figure 3.5: The SASOL Community Hall (data generation site)

Photo credit: Michelle Gerber

3.5.3.2 Secondary data

To conduct a secondary data analysis, the SA RYSE principal investigator and the supervisor of the 2017 students who wrote up hope-focused dissertations (Morkel, 2019; Pretorius, 2018) allowed me access to the Time 1 data set. They provided the data to me in the form of password-protected documents that were sent via email. The data set for Time 1 consisted of four group transcriptions and 30 drawings that depicted what makes it hard or difficult to hope. As mentioned in Section 3.2, the hope-related data for the 2017 study was generated using the same methods as I did in 2018.

3.5.4 Data analysis

As explained in the *data generation* section (see Section 3.5.3), my colleague and I transcribed the audio recordings from the participant groups, and scanned the drawings made by the participants. This visual and narrative data made up the 2018 primary data set that would be analysed inductively, using Braun and Clarke's (2006) six steps inductive thematic analysis. Along with this, we analysed the visual (30 drawings) and narrative data (four transcripts) which constituted the 2017 secondary data set. The secondary data was analysed deductively using Nieuwenhuis's (2016) six-step process of deductive thematic analysis. Each step is separately explained in further detail in the ensuing sections.

3.5.4.1 Primary data analysis

I made use of Braun and Clarke's (2006) six-step guide to inductive thematic analysis, which entails the identification of patterns and themes through a process of coding across a data set in order to analyse the primary data from Time 2 (Braun & Clarke, 2006; Nowell et al., 2017). Thematic data analysis was selected for my study as it allows me to provide a detailed description of the data collected in the form of themes (Braun & Clarke, 2006; Nowell et al., 2017). This form of analysis is also applicable to my study as I explored an underresearched phenomenon for which detailed, rich descriptions will be advantageous.

Inductive thematic analysis has been praised for its flexible nature, in that it can be widely used and can be applied to a variety of epistemologies and research questions (Braun & Clarke, 2006; Nowell et al., 2017). This type of analysis is easy to use and does not require a high level of technical knowledge, which was ideal in the context of my study (Nowell et al., 2017). However, inductive thematic analysis has also received criticism as it may lead to inconsistency, lack of coherence and the potential for themes to be overlooked (Holloway & Todres, 2003; Nowell et al., 2017; Vaismoradi et al., 2013). In order to address this potential shortcoming in my study, I reviewed identified themes during team meetings with my colleague and supervisors, and followed the data analysis phases exactly.

Braun and Clarke (2006) propose the following six-phase step-by-step guide on the inductive thematic analysis method, which was applied in my study:

Phase One – Familiarising yourself with your data: My study yielded both narrative data (transcripts) and visual data (scans of the drawings). According to Braun and Clarke (2006), this phase should involve the active and repeated readings of the data collected and the taking of notes on potential coding that the researcher may want to do in later phases. I read and reread through the narrative data from Time 2 and made notes of any factors that appeared to hinder the participants' experience while reading. Additionally, I reviewed the visual data and made notes to allow for familiarisation. I repeated this process several times in order to familiarise myself with the data.

Phase Two – Generating initial codes: Codes can be understood as the label given to parts of the data that would enable the researcher to answer the research question (Braun & Clarke, 2006; Creswell, 2014). The label is a summary or paraphrase of how that data answers the question. Initial coding (also called open coding) is useful because it involves reducing large sets of data into smaller, more manageable sets of data (Creswell, 2014). In

my study, which yielded both narrative data and visual data, I followed the processes of open coding. An example of this step is provided in Addendum B.

Phase Three – Searching for themes: Once all the data has been coded, the researcher can begin to identify themes in Phase Three (Braun & Clarke, 2006). In order to achieve this, I worked through the codes identified in Phase Two and determined whether certain codes shared similarities and thus could be grouped together. It is from this point that a theme would begin to emerge from the data.

Phase Four – Reviewing themes: Once themes have been identified, the researcher is required to refine and review the identified themes to determine whether clear distinctions exist between them (Braun & Clarke, 2006). Furthermore, in Phase Four the researcher needs to determine whether or not enough evidence exists in the data to support a specific theme (Braun & Clarke, 2006). Once I had identified themes, I firstly reviewed them with my colleague to safeguard against any potential misinterpretation. Next, I compiled a presentation of the themes to my supervisors and colleague, which provided a further opportunity to reflect on and refine the themes, as well as to ensure that there had been no misinterpretation. To aid with the review of themes, inclusion and exclusion criteria are decided upon and used to determine if the data fits within the theme (Nieuwenhuis, 2016). The inclusion and exclusion criteria that I developed can be seen in Addendum B.

Phase Five – Defining and naming themes: In this phase, themes are clearly defined, and the essence of each theme is identified, along with the themes being named (Braun & Clarke, 2006). During the previous phase, preliminary names for themes had been suggested and these were finalised and further refined during this phase (Nowell et al., 2017). For example, the theme given the preliminary name of *negative social ecological experiences* was eventually titled *negative social experiences*, as it was determined through the inclusion criteria that reports given referred rather to social experiences alone and not to role of the participant's ecology.

Phase Six – Producing the report: The final phase of the thematic analysis process can occur once all themes have been named, defined and a report can be produced in which the analysis and interpretations have been discussed (Braun & Clarke, 2006). In Chapter 4, I report the findings and make meaning of them through linking them to the pre-existing, relevant literature.

3.5.4.2 Secondary data analysis

In order to analyse the data from Time 1 (secondary data), I employed the six-step process of deductive thematic analysis as suggested by Nieuwenhuis (2016). A deductive approach, which uses predetermined codes (e.g., from literature or coded datasets), allowed me to determine the fit of the themes found in the primary data analysis (Bezuidenhout & Cronje, 2018; Zhang & Wildemuth, 2016). An advantage of using this approach is that multiple insights can be drawn regarding a set of data (Nieuwenhuis, 2016). However, a disadvantage exists in that this approach may result in so-called blind spots for the researcher who was not involved directly in the process of data collection (Nieuwenhuis, 2016). This potential problem was managed in my study by applying the steps as outlined below.

Step One – Immersing yourself in your data: This step involves becoming familiar with the data (Nieuwenhuis, 2016). As with the primary analysis, I had both narrative data (transcripts) and visual data (scanned drawings which I reviewed several times and on which I had made notes). Furthermore, I took care to remind myself of the themes I had identified during my inductive analysis of the Time 2 data, as these would form the *a priori* codes.

Step Two – Searching for data that matched theme codes: In this step, the secondary data would be analysed to identify data that matched the *a priori* codes (Nieuwenhuis, 2016). I searched for data segments in the Time 1 data that aligned with the three themes that emerged in the Time 2 data analysis (see Addendum B).

Step Three – Verifying codes: This step was performed to verify that the data and codes identified from the prior steps had not been the result of misinterpretation (Nieuwenhuis, 2016). For example, in Time 1 I labelled the narrative data ‘*there are family members who do not want to see you succeed*’ (Andy) as ‘negative experience with family.’ To verify that I had in fact labelled this remark correctly, I compared it to the inclusion/exclusion criteria (see Addendum B). As during the primary data analysis, my colleague and I met to review data that had been coded to ensure that there was no misinterpretation. Following this, I again reviewed un-coded data from 2017 based on the inclusion/exclusion criteria to ensure that nothing had been overlooked. The un-coded data appeared to relate to data on enablers of hope and factors that obstructed hope that had not been reported in 2018 (e.g. pollution and illness related to pollution) and thus did not align with the inclusion criteria for the themes I had identified.

Step Four – Structuring thematic categories and developing visual representations of categories: According to Nieuwenhuis (2016), connections between themes should be identified and clarified through the use of visual representations such as diagrams. As the themes identified in the Time 2 data were also apparent in the Time 1 data, I did not develop a new visual representation as the one created from the Time 2 data sufficiently described the relationship between themes (see Chapter 4 - Figure 4.1).

Step Five – Data interpretation: Nieuwenhuis (2016) suggests that in order to make meaning of the data that has been generated, it is necessary to place this data within the context of the existing theory and literature. Therefore, once all prior steps had been completed, I compared the themes from both Time 1 and Time 2 data to the existing literature and reported on the relationship between them (see Chapter 4).

Step Six – Conclusion and findings: In this final step, the researcher should report on the findings from the data and draw conclusions from these findings (Nieuwenhuis, 2016). I reported on the findings that emerged from both the primary and secondary data in Chapter 4, along with potential interpretations based on these findings. Chapter 5 was subsequently devoted to the conclusions made, and these were discussed as guided by my theoretical framework and the existing literature.

3.6 QUALITY CRITERIA

Lincoln and Guba (1985) noted that to establish trustworthiness in research, a variety of quality criteria should be adhered to, namely credibility, dependability, transferability, confirmability and authenticity. These criteria are discussed in the sections that follow.

3.6.1 Credibility

Credibility is concerned with how truthful or believable findings are (Creswell & Poth, 2018; Nieuwenhuis, 2016; Yin, 2016). Various techniques can be used to enhance credibility in a study, such as member checking, peer debriefing, persistent observation of participants, and prolonged engagement with participants (Lincoln & Guba, 1985; Nieuwenhuis, 2016). To enhance the credibility of my study, I undertook a process of peer debriefing, which involved a peer evaluating the data analysis and interpretation process (Morse, 2015). Together with my colleague in the RYSE study, I reviewed the themes and associated evidence from our individual data analysis procedures as a form of member checking (Morse, 2015). This process allowed us the opportunity to confirm with one

another that what we had found, actually aligned with the themes, and whether this was clear in the evidence we were providing for the theme. This process was followed for both the Time 1 and Time 2 data analysis. Furthermore, I applied not only a well-established research design and set of methodologies, but also stated my assumptions at the onset of data generation and analysis as an additional means to enhance credibility.

3.6.2 Dependability

Dependability may be understood as the ability of research findings to be repeated (Denzin & Lincoln, 2018; Gray, 2009). Dependability may be enhanced through triangulation, splitting data, duplicating analysis, and by providing an audit trail (Denzin & Lincoln, 2018; Lincoln & Guba, 1985). To ensure that my study would be in line with the quality criteria of dependability, I documented the research process throughout this chapter, specifically in the data generation, documentation and analysis sections (Nieuwenhuis, 2016). I believe triangulation was also evident in my study, as the data generation involved different mediums, namely visual and narrative (Nieuwenhuis, 2016). To further enhance dependability in my study, I kept an audit trail as evidence of the data generation and analysis procedures (see Addendum B). In this audit trail, I documented the coding process followed in my study as well as the inclusion and exclusion criteria used for each theme (Merriam & Greiner, 2019).

3.6.3 Transferability

Transferability is concerned with how applicable findings would prove to be in differing contexts (Cope, 2014; Nieuwenhuis, 2016). In order for a study to uphold the criteria of transferability, it should provide clear descriptions of the participants (see Table 3.1 and Table 3.2) and their context (see Section 3.5.2.1) so as to allow other researchers to make meaningful decisions regarding their own potential use of the study's findings (Cope, 2014; Pandey & Patnaik, 2014).

3.6.4 Confirmability

Confirmability refers to the ability of the researcher to remain neutral and to show that findings have resulted from the data generated by participants (Morse, 2015; Nieuwenhuis, 2016). As the researcher should use rich evidence to enhance confirmability (Nieuwenhuis, 2016), I included quotes from participants to provide a truthful report of the findings. These steps would allow other researchers to determine whether I as the researcher

was able to remain neutral in the process of data gathering (Nieuwenhuis, 2016; Polit & Beck, 2012).

3.6.5 Authenticity

Authenticity refers to the extent to which the findings provide an authentic account of participants' experiences (Creswell & Poth, 2018; Nieuwenhuis, 2016; Yin, 2016). I therefore took care during the reporting of my findings to include quotes from all seven study participants, and to include multiple quotes from as many different participants from the Time 1 study. This was done to not marginalise any participants and to provide a more accurate representation of participants' viewpoints (Creswell & Poth, 2018).

3.7 ETHICAL CONSIDERATIONS

Since the RYSE received ethical clearance from the Ethics Committee, Faculty of Education (UP 17/05/01), my sub-study received an aligned clearance (UP 17/05/01 Theron 18-006). A copy of the ethics clearance certificates can be found in Addendum A and Addendum C. As was mentioned earlier, recruitment of participants in the RYSE study was negotiated by the CAP and as such the CAP also handled the process of obtaining consent from the participants of my study. A blank copy of the consent form can be found in Addendum D.

Although the consent process was handled by the CAP, it remained my responsibility as the researcher to conduct the research in an ethical manner and adhere to ethical principles (Creswell, 2014; Hammersley & Traianou, 2012). Therefore, at the start of data generation, I verbally reminded participants of what they had consented to and checked whether all of them had signed the consent form (Flick, 2018). As the participants in my study were to take part in activities as a group, harm could result due to the lack of anonymity and the fact that I could not assure confidentiality (Louw, 2014). It was important for me to remind the participants of this factor and to check that they were comfortable to proceed with the activities (Louw, 2014). I discussed with the participants that respecting one another's confidentiality would be a mutual responsibility and it was agreed within the group that information shared during the session would be kept within the session (Louw, 2014).

Participants were given the opportunity to decide whether they wanted their real names or pseudonym to be used in the research process, and the name chosen by each was used on their consent forms and indicated verbally. This was the name used to identify the

participant's narrative and/or visual data if and when referenced. Research has shown that participants should be given the opportunity to choose how they wish to be identified in a study (Allen & Wiles, 2016; Thomas & Hodges, 2010). To simply anonymise participants could be seen as a form of silencing them. On the other hand, they may wish to be identified as having contributed to the research for the sake of pride (Berkhout, 2013; Thomas & Hodges, 2010). Therefore, before any photographs were taken of the day's proceedings, I asked the consent of the participants to take photos. I also assured them that their faces would be blurred so as to protect their anonymity (Louw, 2014).

3.8 SUMMARY

Chapter 3 was devoted to a description of my attempts to answer my research question: *Which factors do adolescents living in eMbalenhle report as barriers to their experience of hope and how consistent are these factors over time?* This chapter further indicated how I achieved the quality criteria and discussed the ethical considerations relevant to my study. The findings that emerged from the thematic analysis are next reported in Chapter 4.

4. CHAPTER 4: RESULTS

4.1 INTRODUCTION

The three themes that emerged in answer to the following question, ‘Which factors do adolescents living in eMbalenhle report as barriers to their experience of hope and how consistent are these factors over time?’ are summarised in Figure 4.1.

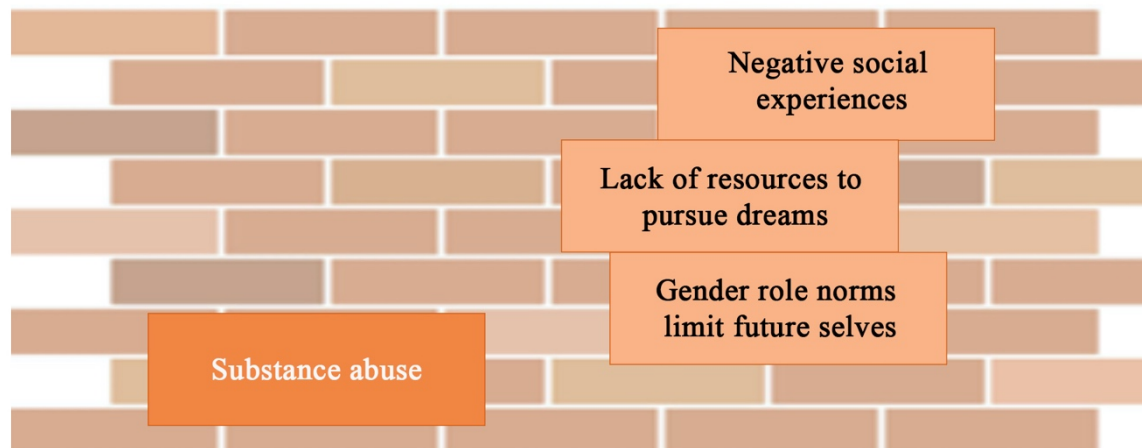


Figure 4.1: Visual summary of study's findings

The three themes were *negative social experiences*, *lack of resources to pursue dreams* and *gender role norms limiting future selves*. There did not appear to be a hierarchical relationship between the themes, suggesting that each theme acted more or less equally as an obstruction to the participants being able to perceive or experience hope. Many of the participants reported that they experienced one or more of the themes and for this reason I represented these themes as building bricks. Facing these themes in combination may build upon each other and create a greater obstruction towards experiencing hope.

Substance abuse was included in Figure 4.1 as an interesting outlier. As reported in 4.5, only one participant reported specific experiences where peers influenced him to use substances that could lead to school dropout. He reported having had this specific experience in both 2017 and 2018. I had actually anticipated substance abuse to play a more significant role within the participant group, as the available literature suggests that substance abuse may affect the psychosocial wellbeing of adolescents (James et al., 2017; Johnson & Lazarus, 2008; Van Schalkwyk & Wissing, 2014).

In the sections that follow, I report on each theme individually by providing the findings from the 2018 data, followed by the findings from the 2017 data. The findings are

subsequently discussed, participants' comments are quoted verbatim and relevant literature is referred to for further meaning and understanding.

4.2 THEME 1: NEGATIVE SOCIAL EXPERIENCES

The theme *Negative social experiences* refers to the participants' social experiences and interactions with others in their social ecology – their family, friends, peers and members of their community – that negatively affect their experience of hope. These negative experiences may influence how the adolescents think about their dreams and future aspirations. Most of the participants in 2018 (i.e. four of the seven adolescents) reported negative social experiences of which negative comments, disappointment, judgement by others, and discrimination are but a few.

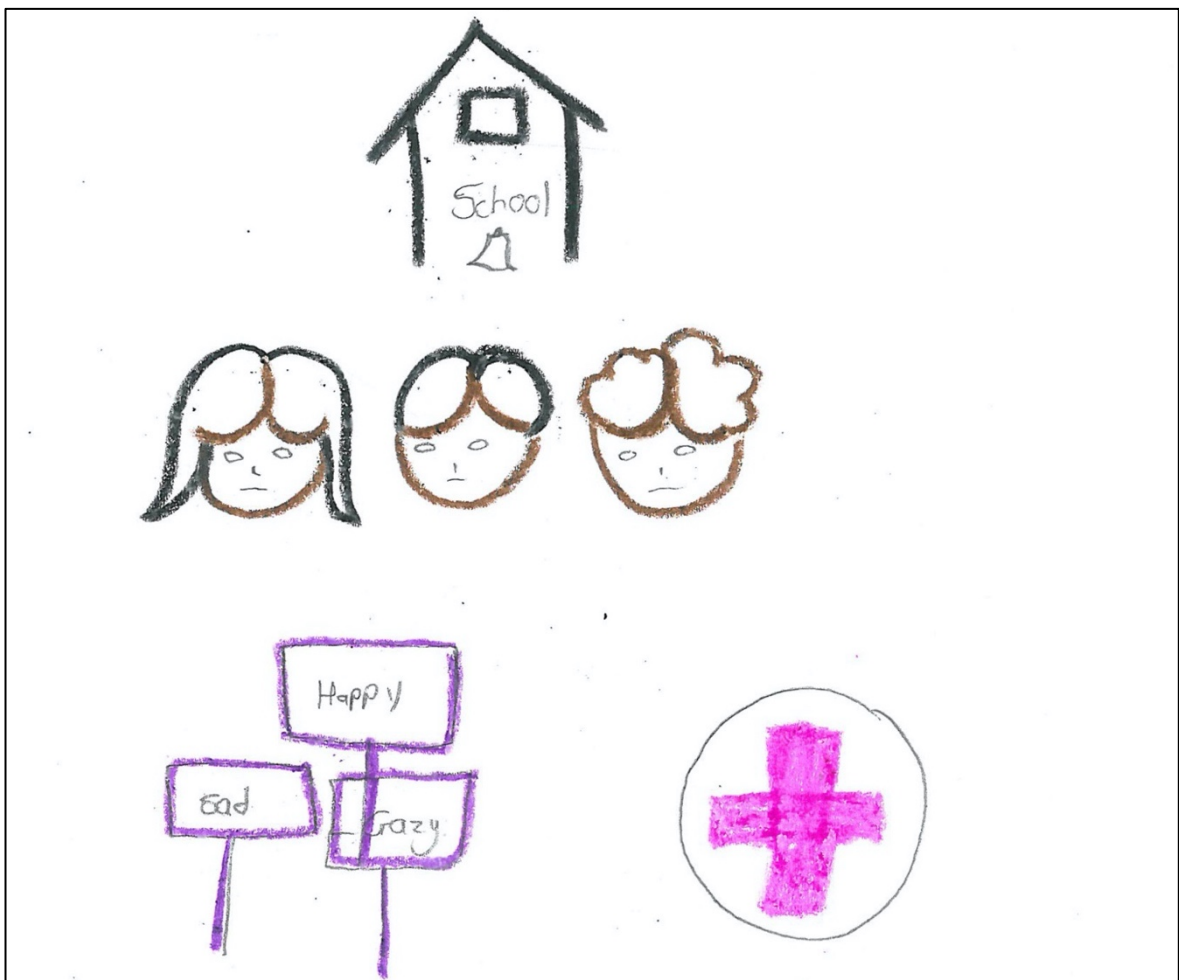


Figure 4.2: Precious's drawing depicting people as a barrier to hope

In both her drawing and explanation, Precious described various scenarios where interactions with others affected her ability to hope. She said, '*humans make it hard for us to hope*'. She explains her drawing (see Figure 4.2 above) by saying that at school and in

general, she interacts with different people and not all these interactions have been positive. Precious further elaborated on these interactions by explaining, *'at school you get to see you know other people who have lost hope...if you can associate yourself with those type of people, in a way you lose hope you know...that makes it hard for you to hope'*.

Rainbow made similar comments: *'friends are kinda like a bad influence...we kinda like discourage one another...most cases it's that, jealousy...I'm looking for positive answers but they will just like...turn you down because jealousy'*. She also highlighted how negative feedback and judgement from support figures such as family members affected her experience of hope. She said, *'they [parents] expect us [siblings] to be the same, but it's not possible, so they kinda make it hard for us to hope that we can be better people or a better person, or a better child to them...they [parents] just keep on judging, comparing and that makes it very hard to hope'*.

Negative social experiences also included the absence of hopeful and inspiring adults and/or peers, as well as positive role models that may support experiences of hope. Minky explained how she felt that there were few to no examples in her community of people who had gained success. Therefore, she felt a belief had accumulated within the community that it was impossible to achieve certain dreams. She said, *'what makes it difficult to hope is coming from...a place that lacks ambitious or successful people because that will make you think it is not possible to do certain things in life...what kills the hope is living amongst people who are negative or people who haven't achieved what they plan to achieve in their life so they'll make you feel like whatever you are dreaming it's impossible'*. The comment from Minky further suggests that there were individuals within the community who had become despondent and had themselves lost hope, thus they could not be an example of how to develop hope.

Likewise, Minky described instances where interactions with people had discouraged her from believing in or having future aspirations for herself. She said, *'not like my close family, my [extended] relatives they are like that...when you talk about businesses and stuff they feel like you are dreaming way too big...when I'm like sharing my ideas with them, they make me feel like it's something big, something that's for someone else not me'*.

4.2.1 Theme 1: Negative social experiences reported in 2017

In 2017, the theme *negative social experiences* was also reported. Almost half of the 2017 participants (i.e. 13 of the 30 adolescents) described similar instances where they

viewed others as an obstacle or as discouraging of them and their dreams. For example, in describing how other people had affected their experience of hope, Zenande said, *‘it’s people who accepted failure and now they try to influence the future to also fail and not achieve their goals in a certain way’*. Thuso agreed and said, *‘it’s the people who are around you that basically affect you...people who are around you or next to you or actually on the same journey as you don’t actually have the same vision. They actually believe there are others who are on the same journey you are on that have not made it, so what makes you different. So that’s what makes it difficult to hope.’*

Similarly, instances were described where peers, family and/or those sharing their living space, actively discouraged others from achieving their dreams. They used coming from eMbalenhle as the reason for why they would not be able to do so. For example, Nomalanga said, *‘what makes it difficult to hope are the people that we live with. Other people that we live with have given up. And if we have a big vision...then people will say what do you have that’s special and we are from here at eMbalenhle so the dreams we have, ja, impossible to happen here.’* Thoko described a similar experience, *‘what also makes it difficult to hope is your family and your peers...they will tell you that the family is not successful so now what about you, you won’t succeed because you are like us’*.

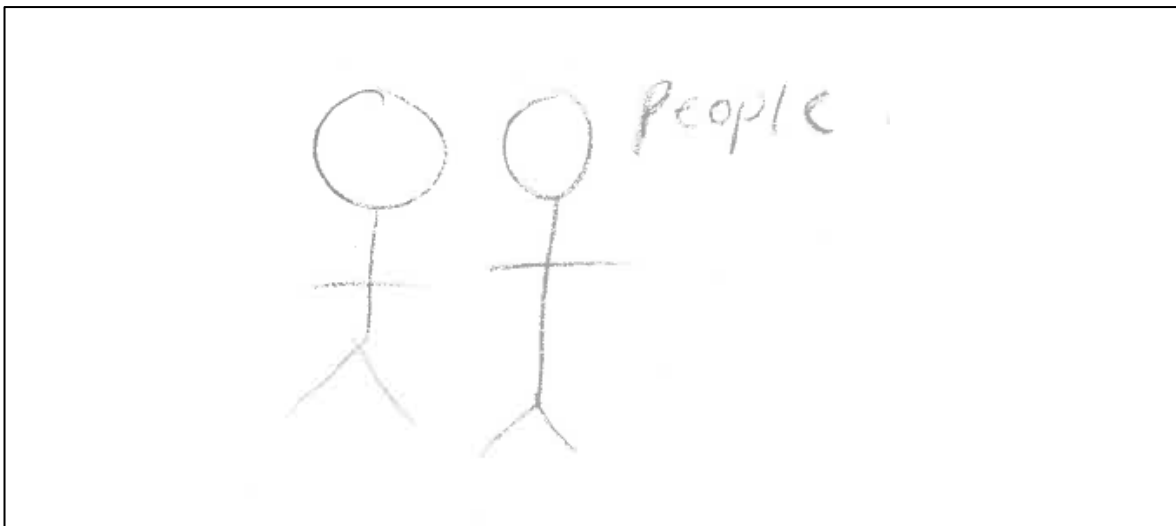


Figure 4.3: Thoko’s drawing depicting people as a barrier to hope

Andy perceived that the discouragement from others and the limitations placed on her by the context stemmed from envy, jealousy or competition for resources. Andy explained, *‘they always have something bad to say. Like even if you are trying...even if you have the certain qualifications you won’t get the job, it drains, it’s discouraging because they [others in the community] don’t want you to succeed. And once they see that you don’t*

pay attention on what they are saying about you they start to say that you think you are better. The judgement come that you are trying to be better, you are no different from us because we all live here.’ Lwande also noted, *‘people tend when they see you go forth [be successful], they tend to come with those negative energy, telling you things just so you can quit – and all of that is what makes it difficult for it me’.*

Of the 13 participants who had reported the theme *negative social experiences*, two had been involved in the data generation both in 2017 and in 2018 and they reported this theme in both years. In the 2017 study these participants specifically referred to experiences of being discouraged by others. This was similar to the references made by other participants in the 2017 study, for example, Precious who said, *‘the people that discourage you, it can be family members, friends and peers...they discourage you by your self-image, they kill you inside’.* Happy agreed and said, *‘how people think and not trying to break the cycle or discourage people for a better future’.*

4.2.2 Making meaning of Theme 1: Negative social experiences

The theme *negative social experiences* is well represented in the sub-Saharan literature on hope and resilience, which indicates that a lack of social support can hinder hope (Betancourt & Khan, 2008; Bojuwoye & Sylvester, 2014; Hendricks et al., 2015; Koen et al., 2011; Mampane & Ross, 2017; Teodorczuk et al., 2019; Walker & Mkwanzani, 2015). Social support can be understood in terms of three dimensions: instrumental support, informational support, and emotional support. It has typically been found to be associated with positive psychological development (Betancourt & Khan, 2008; Bruwer et al., 2008; Lethale & Pillay, 2013).

Numerous studies have indicated that when any of the above-mentioned dimensions of social support are not experienced or when they are not available, the experience of hope or related constructs (e.g. optimism) may be hindered (Bojuwoye & Sylvester, 2014; Hendricks et al., 2015; Mampane & Ross, 2017; Teodorczuk et al., 2019). This is in line with what many participants reported in my study as well as in the 2017 study. While there were individuals in the community that could act as supportive figures, they did not do so and were instead unsupportive. Participants reported that interactions with others were negative and included discouraging their vision for the future or not acknowledging their aspirations for a better future. This relates to literature that reported on how a lack of informational and social support may hinder the development of hope because of the absence

of appropriate models of hope or hopeful behaviours (Betancourt & Khan, 2008; Bojuwoye & Sylvester, 2014; Hendricks et al., 2015; Koen et al., 2011; Walker & Mkwanzani, 2015; Zulu & Munro, 2017). Similarly, the participants in both my study and in the 2017 study reported negative experiences with individuals within their community, which adversely influenced their development of hope. The participants reported how they were actively discouraged from being optimistic and how the behaviours of those within their community had a direct impact on the way they viewed their ability to hope.

Negative social experiences were fairly consistent over time (i.e. reported by almost half of the 2017 sample and just more than half of the 2018 sample). While there appears to be limited literature about obstacles to hope over time, the longitudinal studies on resilience found that supportive relationships enabled hope and/or resilience over time (DeSilva et al., 2012; Theron & Van Rensburg, 2018; Van Breda & Dickens, 2017). I could find no comparable studies of obstacles to hope over time. However, because research shows that a lack of supportive relationships may hinder the experience of hope and/or resilience (Bojuwoye & Sylvester, 2014; Hendricks et al., 2015; Walker & Mkwanzani, 2015), and because resource-constrained contexts have the potential to undermine people's connections to one another (Hendricks et al., 2015; Walker & Mkwanzani, 2015), I was not surprised that negative social experiences were reported as a barrier to hope in 2017 and again in 2018.

4.3 THEME 2: LACK OF RESOURCES TO PURSUE DREAMS

The theme *lack of resources to pursue dreams* refers to the participants' perceptions and other members of the community's opinions that due to a lack of available resources, predominantly financial, they are unable to pursue or achieve their dreams. This was reported by almost half of the participants in my 2018 study (i.e. three of the seven adolescents). For example, Happy described how money could be such an obstacle. She said, '*maybe you want to go to university, and you don't have money; that can be an obstacle*'. This can further be seen from the responses drawn by Minky and Busi about what was an obstacle to hope for them. Both their drawings depicted money (see Figure 4.4 and Figure 4.5).

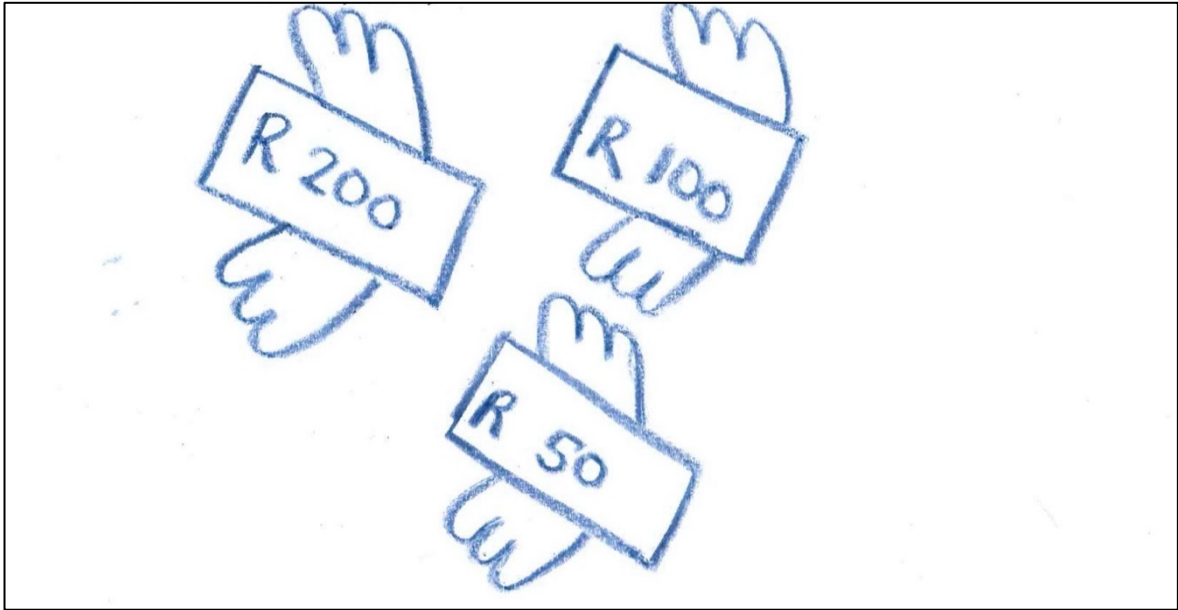


Figure 4.4: Minky's drawing depicting money

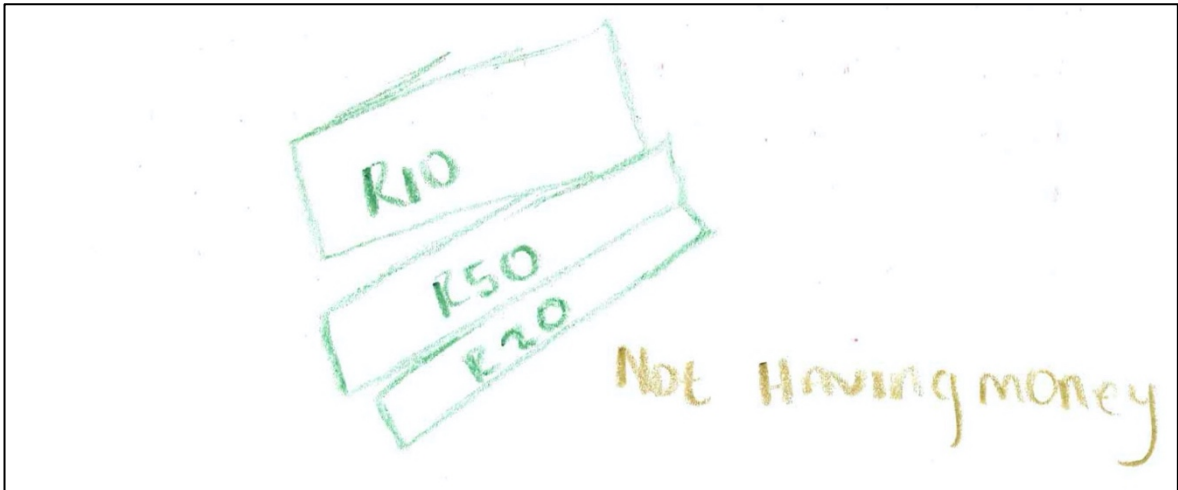


Figure 4.5: Busi's drawing depicting money

In some instances, the participants described how they themselves perceived the lack of resources and how this affected their ability to experience hope. Minky explained, *'what makes it difficult to hope for me, or for most of us, I think it's coming from...poor backgrounds and not having money. So, I think it limits our ideas, you know, that certain things are not...you are not going to be able to do...I think money plays a big role in hope so when you have money I think you hope for bigger things and you plan for bigger things.'*

Minky further described how the limitations associated with tertiary education funding schemes, which are not easily accessible, acted as a barrier and negatively affected her hope to complete a tertiary education qualification. She said: *'I really do want to go to university but knowing the situation at home it's impossible, but I can apply...for NSFAS [National Student Financial Aid Scheme] funds...we know that some bursaries they can fund*

you but they want you to study what they want you to...study and for NSFAS you know it's not a walk in the park, it's very difficult and you don't get the funding immediately'. Busi reiterated this sentiment. She said, 'having to go to university is a hope for many people, but it becomes difficult for them to keep on hoping to go there because they do not have money'.

In other instances the participants described how the lack of hope they saw in those around them appeared to stem from financial challenges. Busi explained, *'some people, it's difficult for them to have their hope because they don't have money and they are living in poverty...they always think that everything that they want to do, it must be done using money'*. A similar experience was described by Minky, where she was made to understand by others in her community that having access to money is crucial for creating a better life. She explained, *'it's more about money, cos they see that maybe you come from a family that doesn't have money, so they [people living in eMbalenhle] feel everything that needs to be achieved it needs money'*. Happy had a similar experience, however, she also referred to a general lack of resources in the community of eMbalenhle. In so doing, she mentioned the structural and systemic inequalities in South African society that have a negative impact on hope: *'there's a very huge gap between us [people living in eMbalenhle versus people living in the town Secunda], they [people in Secunda] are taken to ballet classes and gymnastics whilst I was...you just come here to the club [i.e. the Sasol club that has basic sports facilities]...we're being limited [by] the resources but if we grow up there [Secunda] we would have been exposed, what if I'm a possible gymnastic person but because of where I am it limited me'*.

4.3.1 Theme 2: Lack of resources to pursue dreams reported in 2017

In 2017 the theme *lack of resources to pursue dreams* also emerged as a pertinent problem, but it was reported only by a third of the participants (i.e. 10 of the 30 adolescents). In the 2017 study, the participants reported that a lack of financial resources affected their ability to hope for a better future because money is required to access educational opportunities that could lead to opportunities for personal betterment. For example, Nkosinathi explained, *'there is not enough money... to invest in education. That's why it's [hope] hard.'* A similar sentiment was shared by Carol, *'having no money to fund my studies may give me a lack of confidence, lack of faith, lack of hope'*. Likewise, Philasande also shared these thoughts, as depicted in her drawing in Figure 4.6 and the explanation of her drawing that can be seen in Figure 4.7.

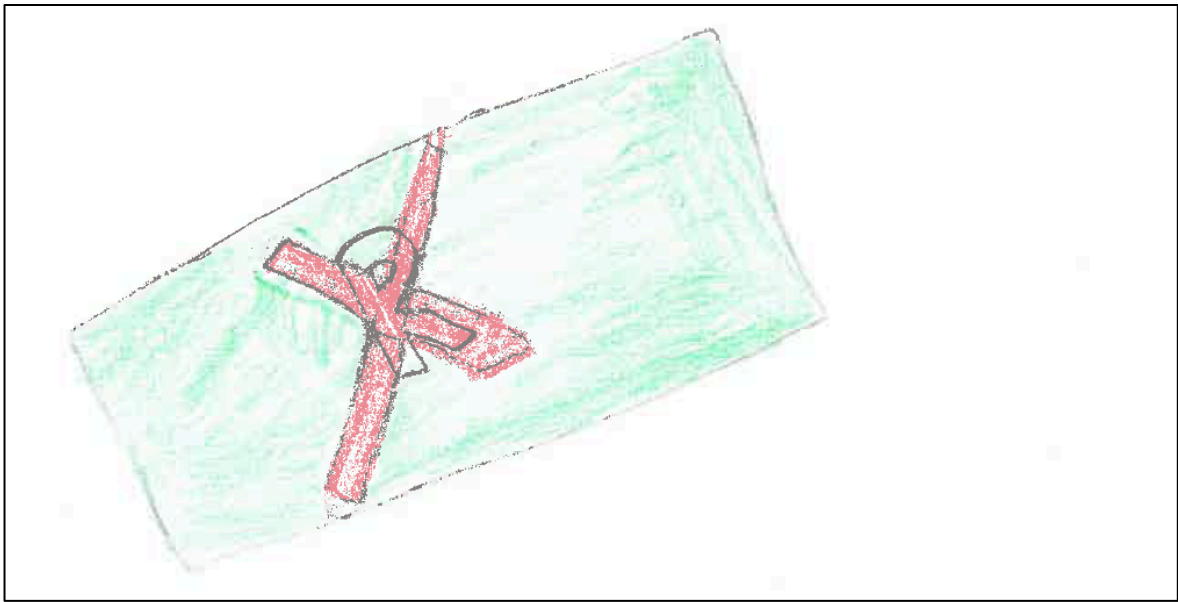


Figure 4.6: Philasande's drawing depicting a lack of money

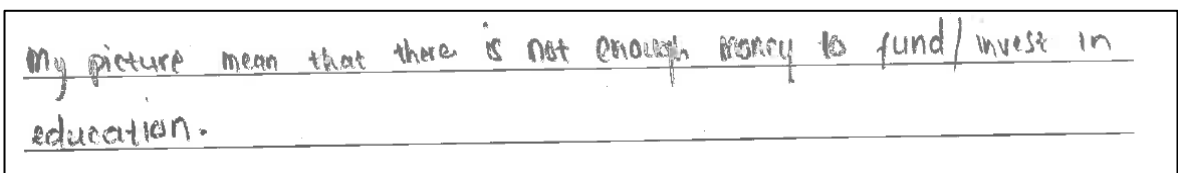


Figure 4.7: Philasande's written explanation of her drawing

Precious agreed, *'they say money makes the world go round. Sometimes when you don't have money you can't do certain things, so it makes it hard for you to cope'*. This sentiment is confirmed in Precious's drawing in which she chose to write only two words (see Figure 4.8).

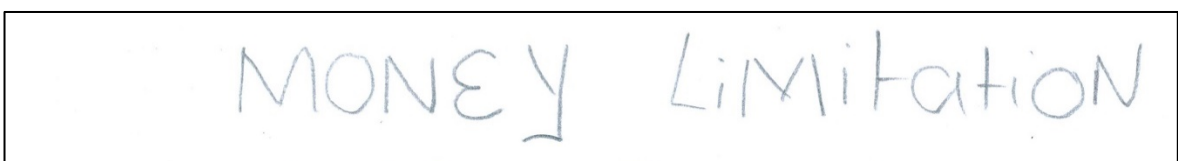


Figure 4.8: Precious's 2017 drawing depicting the words 'money limitation'

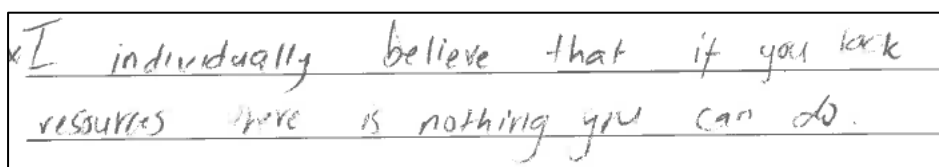
Other participants referred more generally to how poor-paying jobs or unemployment was associated with inadequate financial resources. For example, Minky (who reported a lack of finances in 2017 and 2018) said, *'people have been underpaid, so that makes it hard for me to have hope...they [parents] risk their lives for us [suggesting their parents get sick from pollution due to working at Sasol] and Sasol does not give them enough money'*. For Danny, high levels of unemployment were tied both to the inability to access financial resources and to how witnessing unemployment discourages hope. Danny

explained, ‘another thing that makes it difficult to hope is when on a daily basis I keep seeing many people who are unemployed’.

Khutso did not refer specifically to financial resources. For her, hope was obstructed by not having the necessary resources, ‘it’s when I do not have enough resources, that makes me lose hope...people to learn from and gain more knowledge’. Although her explanation referred to resources in general, her drawing was more specific about the type of resources (i.e. books). This perhaps suggested that education or the opportunity to gain knowledge was an important resource in fostering her hope (see Figure 4.9 and Figure 4.10).



Figure 4.9: Khutso’s drawing depicting a lack of resources



I individually believe that if you lack resources there is nothing you can do.

Figure 4.10: Khutso’s explanation of her drawing

4.3.2 Making meaning of Theme 2: Lack of resources to pursue dreams

The theme *lack of resources to pursue dreams* corresponds with what has been found in sub-Saharan literature on the hope experiences of those who live in resource-constrained environments. It specifically emphasises how a lack of structural resources can directly

affect the ability to develop a vision and goals for the future (Coetzee et al., 2017; Ebersöhn, 2017; Savahl et al., 2017; Walker & Mkwanazi, 2015). A study by Wilson-Strydom (2017) among students living in communities challenged by poverty found that a lack of financial resources may have a negative impact on these students' vision for their future and their aspirations. This finding is echoed in the statements made by participants in my study, as well as in the 2017 study. Similarly, a study by Mosavel et al. (2015) found that financial resources were important to the development of future aspirations. When financial resources were present they created opportunities. However, when resources were not present, this absence could become a barrier. My participants viewed financial resources as a means through which their dreams could be achieved and they felt that not having access to such resources limited their life aspirations.

The lack of several other structural resources (other than financial) was noted as barriers in much of the literature on resource constraints and individuals' experiences of hope and resilience. Such other resources were educational opportunities, physical environments and access to basic services and infrastructure (Botha & Van Den Berg, 2016; Hodes et al., 2018; Mosavel et al., 2015; Wilson-Strydom, 2017). The 2017 and 2018 participants mostly noted how they experienced a lack of financial resources and how this negatively affected their hope. A few participants did indicate a lack of other structural resources such as books and community-based opportunities for extra-mural activity. However, when compared to the frequent mentioning of limited financial resources, these barriers were not prominent. I theorised that this may be due to financial resources being a pervasive barrier to the participants in this particular community. eMbalenhle has significant challenges in terms of high unemployment rates and financial constraints are a daily reality (Mathebula, 2017; 2018a).

In one instance a participant implied that a lack of structural resources (such as employment) was also associated with a lack of informational support (i.e. the extent of local unemployment meant that there were unlikely to be adults whose employment trajectories could inspire him). This participant's observation aligns with studies that suggest that individuals may learn to be hopeful through observing others (e.g. Lundgren & Scheckle, 2019).

Lack of resources (particularly financial resources) appeared to be a fairly consistent factor over time (i.e. reported by a third of the 2017 sample and almost half of the 2018 sample). Together with Mathebula (2017; 2018a), I believe this consistency may be due to

the unchanged and negative nature of the economic climate of both eMbalenhle and South Africa in the 2017-2018 period. This conclusion agrees with findings in a global study by Moore et al. (2017), which indicated that, over time, financial uncertainty had a negative impact on mental health and could contribute to hopelessness.

4.4 THEME 3: GENDER ROLE NORMS LIMITING FUTURE SELVES

The theme *gender role norms limiting future selves* describes instances where the norms held by participants' families and communities relating to gender roles (predominately regarding careers), affected the participants' views of their future selves and their experience of hope. The future self refers to the expectations and dreams that individuals have for what they would want to become (Bond & Van Breda, 2018; Van Breda, 2010). Almost half of the participants in 2018 (i.e. three of the seven adolescents) described experiences where gender norms had an inhibitory effect on how they wanted to live out their dreams.

The inhibitory norms dictated how the participants were expected to dress and behave, and limited the career options that were available to them. For example, Rainbow explained, *'what makes it hard or difficult for me to hope [is that] a specific person can come to you and ask you "what do you wanna be after matric?" and I'll be like "I wanna be a mechanical engineer", they be "like that's for men"'*.

Khomostso described a similar instance. She said, *'they [family] expect me to behave a certain way. Because I'm a girl, [they] expect me to do chores, dress a certain way...it makes it difficult for me to hope...I'm a very big fan of cars and after matric I was hoping to do a career that is related...so I told my dad this one day, and you know he went ballistic. You know, made a fool out of me...said "you can't go into studying cars because it's not for girls" ...I can't live my own life, I'm constantly told what to do...I want to live a life whereby you know no one tells me what to do...just you know be happy.'* Khomostso's drawing (see Figure 4.11) further illustrates her experience.

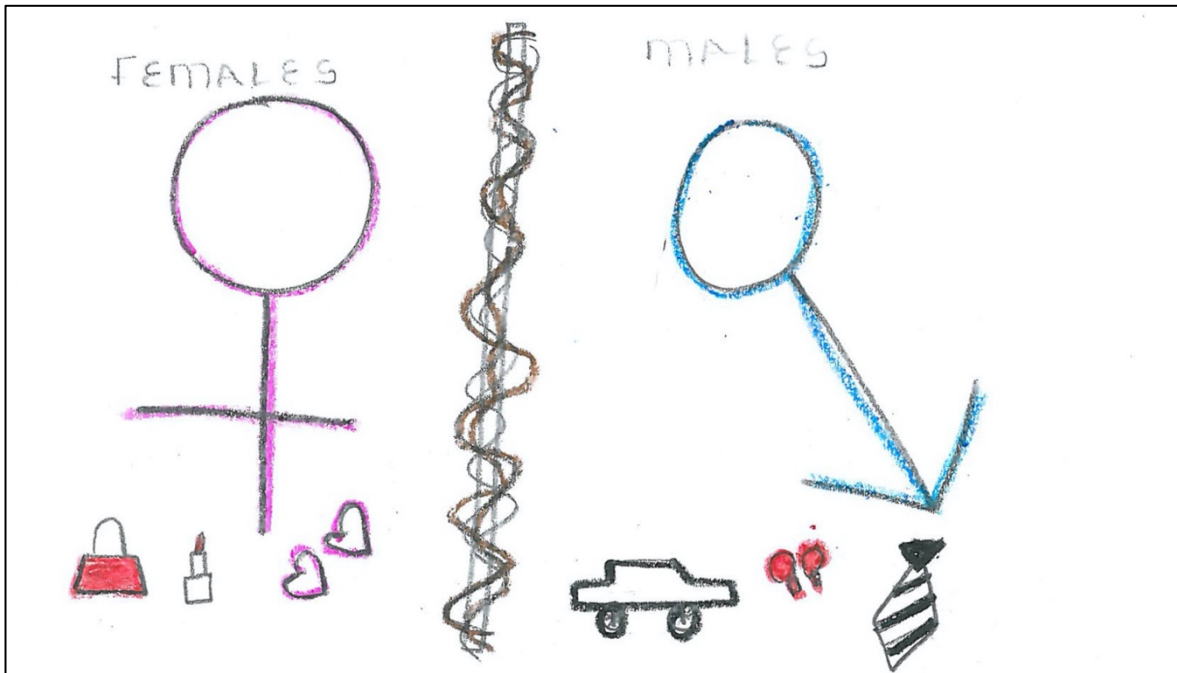


Figure 4.11: Khomostso's drawing depicting gender stereotypes

Precious agreed and described experiences where gendered expectations restricted her dreams for the future as well as her present actions. She said, '*She [mom] believes that we supposed to be wearing this way [gender-stereotyped clothing] which leads to like patriarchy stuff [gender-stereotyped roles]...since like I'm the first girl in the house, I'm expected to do certain things...they [parents] are trying to teach us to get married, how we gonna act when you older...our parents they taking us to go to school and everything, but they [parents] don't expect you to be successful in that way, you know. They [parents] just want you to learn to a specific point, you know, where you can find...a basic job and a house and a car and wait for the man of your dreams to arrive... you know. So, it's like limiting you as a girl.*'

4.4.1 Theme 3: Gender role norms limiting future selves reported in 2017

In 2017 the theme *gender role norms limiting future selves* was reported by a few participants only (i.e. three of the 30 adolescents). These participants also reported how the gender role norms that were observed in their community and families affected their dreams, particularly if these dreams were not in line with the gender role norms. The gender role norms suggested that females in the community were not suited to work in the more male-dominated industries, such as the petro-chemical industry. There also appeared to be an expectation that females should focus on being a suitable wife for their future husband. For example, Minky explained, '*the industry [petro-chemical industry] is mostly dominated by males and people say it's because they need physical strength so it's going [to be] hard for*

me as female to find a job in that industry as a woman... they don't consider women; actually they just consider only men in that industry and that really, really gives us less hope... we get less opportunities than males'.

Precious mimicked questions asked by her parents – ‘*what kind of a wife will you be doing like this?*’ – and said, ‘*you see... that also makes it harder for you to hope*’. Although both Minky and Precious had been involved in the data generation in 2017 and 2018, it is interesting to note that only Precious reported this theme in both years. This could possibly be because these participants had been exposed to different experiences over the course of the intervening year. Alternatively, it may be because this was a more detrimental barrier to Precious, whereas other barriers affected Minky more in terms of their experience of hope.

4.4.2 Making Meaning of Theme 3: Gender Role Norms Limiting Future Selves

In my review of the literature (see Chapter 2) I did not address gender norms. My exclusion of gender roles and gender role norms relates to their not being predominant in the literature regarding hope – specifically obstacles to hope – and resilience. This could be because gender and gender role norms are under-reported in studies of resilience and related pathways such as hope (Sanders et al., 2017). Even so, other literature suggests that gender norms do affect the health behaviours of adolescents (e.g. the type of activities adolescents believe they may engage in and the extent to which adolescents engage in activities not stereotypically associated with their gender) (Pulerwitz et al., 2019; Spencer et al., 2015). Furthermore, some evidence suggests that restrictive gender attitudes/norms may have a negative impact on the mental health of adolescents. This is particularly the case with regard to their self-esteem and psychological wellbeing (Baird et al., 2019). In sub-Saharan Africa, studies have found that adolescents do feel the pressure of gender norms in terms of the kind of choices they have the freedom to make. These norms are perpetuated through the curriculum or by their peers (Assarsson et al., 2018; Ngabaza et al., 2016).

The fact that gender norms obstructed participants’ dreams of what/who they could aspire to be in the future is concerning because of the value of the future self to adolescent hope and wellbeing (Bond & Van Breda, 2018; Petersen et al., 2017; Van Breda, 2010). For example, the study by Bond and Van Breda (2018) found that creating a clear vision of a possible self in the future was an important motivator and hope enabler among vulnerable adolescents. Furthermore, findings from this study indicated that family members or other role models could obstruct the development of a future self. Although the Bond and Van

Breda (2018) study did not make specific links to the obstruction of future selves by gender roles or norms, it seems that families and communities need to do more to facilitate adolescents' realisation of their future selves. My study suggests that this facilitation should include being careful not to rigidly enforce gender stereotypes.

The theme *gender role norms limiting future selves* does appear to have some consistency, as there were reports of this theme in both years (i.e. reported by a tenth of the 2017 sample and almost half of the 2018 sample). I believe this consistency may be due to the fact that stereotypes tend to be enduring (Haines et al., 2016) and thus they were likely to be unchanged in the time span of a year. Furthermore, although this theme was reported only by female participants in both studies, this could simply reflect the fact that there was only one male participant in 2018.

4.5 MAKING MEANING OF THE OUTLIER SUBSTANCE ABUSE

As noted in the introduction to this chapter, *substance abuse* was an outlier. Only one participant (i.e. MK) reported experiences of substance abuse in his community and viewed this as a potential obstacle in his development of hope – both in the 2017 and 2018 study. MK did not report any of the other themes. In the 2017 study, one other participant viewed substance abuse as an obstacle to the development of hope. Like MK, this participant was male. A possible reason for female participants not reporting this outlier could be because males are more likely to report substance use (Magidson et al., 2017; Otwombe et al., 2015). Literature does suggest that exposure to and experiences of substance abuse have a negative impact on the psychosocial wellbeing of adolescents (Aboussalam et al., 2016; James et al., 2017; Johnson & Lazarus, 2008; Van Schalkwyk & Wissing, 2014). Therefore, reports of this aspect could be expected from participants. The number of reports was, however, fewer than I had assumed I would see.

4.6 SUMMARY

Based on the insights of 2017 and 2018 RYSE participants, I reported three themes that appear to act as barriers to hope over time, namely negative social experiences, lack of resources – mostly financial – to pursue dreams, and gender role norms that limit future selves. As reported in Section 4.2 and Section 4.3, the first two themes (negative social experiences and lack of resources to pursue dreams) fit in with the current sub-Saharan literature on hope and resilience. However, the theme *gender role norms limiting future selves* appears to extend what was previously known about obstacles to adolescent hope.

This is because the sub-Saharan literature on hope and resilience that I reviewed excluded any mention of gender. Although my study was exploratory, I am suggesting that the obstructive role of gender role norms may be an avenue for further exploration in sub-Saharan hope research.

All three themes demonstrated consistency over time, as they were reported in both 2017 (Time 1) and 2018 (Time 2). There were fewer reports of each of the three themes in 2017. While there was some variation in the saturation of the themes at the two time points, their consistency over time implies that eradicating or managing these three obstacles could be a meaningful starting point in interventions that are designed to enable hope. The third theme *gender role norms limiting future selves* was the least saturated at both time points. I believe that to make meaning of these differences, it would be useful to consult the participants (i.e., a follow-up study is needed).

As explained in Chapter 2 (Section 2.2.2 and Section 2.4.2), stigmatisation (Bhana et al., 2016; Bond & Van Breda, 2018; Campbell et al., 2007; Campbell et al., 2005; Casale et al., 2019; Mampane & Ross, 2017; Peterson et al., 2010; Smith & Morrison, 2006; Woollett et al., 2016; Yassin et al., 2020) and maladaptive coping (Berg et al., 2016; Ebersöhn et al., 2015; George & Moolman, 2017) have been reported as obstacles to hope in adolescents. These obstacles to hope were however silent in my findings. I believe this silence may be due to the data collection method that was used. The group setting in which data collection took place potentially discouraged the sharing of personal experiences of stigma or maladaptive personal coping. This matter and other limitations are discussed further in the next chapter.

In the next chapter I will also discuss how the findings of my study relate to SERT and Hope Theory (i.e. the theoretical framework of my study). In addition, I will discuss my recommendations for those who work with adolescents, such as educational psychologists. Specific attention will be given to issues that act as obstacles to hope and how preventative steps may be taken to ensure that resilience is fostered in adolescents in resource-constrained environments.

5. CHAPTER 5: CONCLUSIONS AND RECOMMENDATIONS

5.1 INTRODUCTION

This final chapter is devoted to the conclusions reached in my study and an explanation of its findings within the context of the theoretical frameworks of SERT (Ungar, 2011) and the Hope Model (DuFault & Martocchio, 1985). I describe the limitations of my study and make recommendations for both future research in the field of resilience and hope, and for educational psychologists who work with adolescents in resource-constrained communities.

5.2 RESEARCH QUESTION REVISITED AND FINDINGS DISCUSSED

5.2.1 Research question revisited

The research question that directed my study of limited scope was: ‘Which factors do adolescents who live in eMbalenhle report as barriers to their experience of hope and how consistent are these factors over time?’ As discussed in earlier chapters, hope may be characterised by general and particular expectations of positive, future outcomes and it is influenced by the individual’s internal perceptions as well as by external realities (DuFault & Martocchio, 1985; Scioli et al., 2011; Snyder, 2002). As has also been explained in previous chapters, hope has often been associated with resilience – a process of positive adaptation in response to adversity (Masten, 2014; Ungar, 2018). The commonly accepted association is that hope may be a resilience-promoting pathway (Guse & Shaw, 2018; Hellman et al., 2018; Kuo et al., 2019; Mullin, 2019; Satici, 2016; Van Breda, 2018). However, various obstacles can obstruct this pathway. In my study, the adolescent participants who lived within the eMbalenhle community identified the following three barriers to their experience of hope: negative social experiences; a lack of resources to pursue dreams; and gender norms that limit future selves. In Chapter 4, I made meaning of these findings and considered how they align with existing literature. The first two themes fit well with hope and resilience studies conducted in sub-Saharan Africa (see Section 4.2.2 and Section 4.3.2). However, the third theme, *gender norms limiting future selves*, was not apparent in any of the sub-Saharan literature on hope and resilience that I reviewed (see Section 4.4.2).

Furthermore, it should be noted that none of the published hope and resilience studies (e.g. Betancourt & Khan, 2008; Bojuwoye & Sylvester, 2014; Bond & Van Breda, 2018; Coetzee et al., 2017; Ebersöhn, 2017; Hendricks et al., 2015; Koen et al., 2011; Mampane

& Ross, 2017; Petersen et al., 2017; Sanders et al., 2017; Savahl et al., 2017; Teodorczuk et al., 2019; Walker & Mkwanazi, 2015; Van Breda, 2010) reported on how negative social experiences, a lack of resources to pursue dreams, and gender norms that limit future selves hindered the experience of hope over time. In my study, I found that these factors consistently acted as barriers to hope over time. Although there was some variation in the saturation of the themes over time, they were all reported at both timepoints. While this finding is only informed by a small sample of adolescents from one community, it nevertheless suggests that barriers to hope are likely to be consistent.

5.2.2 Discussion of the findings

Figure 5.1 provides a visual summary of my study's findings as they relate to the research question and the theoretical frameworks that I used to guide my study. Overall, Figure 5.1 summarises the interactions between the identified obstacles, the adolescent (represented by the blue circle, as intrinsic factors are likely to stem from the adolescent) and the context of the adolescent (represented by the green circle, as extrinsic factors are likely to flow from the context of the adolescent). The obstacles to hope are representative of both extrinsic factors (e.g. lack of resources, negative social interactions and rigid gender norms) and intrinsic factors (e.g. the adolescent's personal meaning-making schemas and subsequent behavioural responses). These obstacles challenge the experience of hope (both generalised and particularised hope) for the adolescents. The Hope Model emphasises that individual as well as contextual factors play a role in the process of hope (DuFault & Martocchio, 1985), and it appears that both types of factors are also relevant to understanding what obstructs hope.

As the obstacles are partly contextual in nature, a likelihood exists that these may vary depending on the context of the individual. For the participants in my study, the context was that of the eMbalenhle community. eMbalenhle is a community that is chronically resource constrained and it faces a variety of challenges such as unemployment, community violence and gender-based violence (Mathebula, 2018a; 2018b; 2019; 2020a, 2020b, 2020c; Misselhorn, 2020). The obstacles reported clearly reflect these contextual dynamics. It is surmised that obstacles such as resource constraints and rigid gender norms may not be so applicable in a community that is more privileged and/or more progressive (i.e. one that promotes gender inclusivity/equality). The phenomenon of context playing into what obstructs hope fits with SERT's principles of complexity and cultural relativity (Ungar,

2011). These principles note the importance of understanding resilience and resilience-related pathways – such as hope – in ways that are relevant to the individual’s context and culture (Ungar et al., 2013; Van Breda, 2019; Van Breda & Dickens, 2017). The Hope Model’s contextual dimension similarly notes the importance of considering hope processes contextually (DuFault & Martocchio, 1985).

Although I reported each obstacle individually in Chapter 4, they intersected with one another and for this reason all obstacles are represented by the red overlapping circles within the overlap of the intrinsic and extrinsic factor circles. For instance, when financial resources are lacking, adolescents may not feel supported by others to pursue opportunities that they hope for (e.g., acquiring an education). Also, when there is lack of resources, adolescents may experience that others are not capable of providing support or functioning as role models (e.g., modelling success). Another example of adolescent participants feeling unsupported by others, is when these others make the adolescent aware of or implemented restrictive gender norms. This interaction reflects the various dimensions that DuFault and Martocchio (1985) associated with hope. Amongst others, in the example of adolescent participants feeling unsupported, the dimensions include the contextual dimension (living in a patriarchal society that endorses prescriptive gender roles); the cognitive dimension (how significant others think about gender; how adolescents think about the messages they receive about gender and what that means for their future plans); the affective dimension (feeling hopeless in the face of gendered expectations); and the temporal dimension (the anticipated longevity of the impact of gendered expectations). Given this lack of unidimensionality in what obstructs hope, it seems that the Hope Model’s understanding of hope as a multidimensional construct (DuFault & Martocchio, 1985) is also applicable to what obstructs hope. The SERT principles of decentrality and complexity likewise refer to this multidimensionality (Ungar, 2011). The above illustrates that obstacles to hope cannot merely be explained in simplistic terms and that the adolescent may not be the sole contributor to (or sole source of) obstacles to hope. This understanding of the findings demonstrates an important lesson for educational psychologists, as it emphasises the need for them to work with and on an adolescent’s social ecology. They need to look at more than just the adolescent client in the implementation of interventions that aim to prevent obstacles to hope. Furthermore, in order to facilitate an adolescent’s process of hope, educational psychologists will need to work with families, schools and communities to address structural and relational constraints (Masten, 2014; Masten & Motti-Stefanidi, 2020).

Importantly, the identified obstacles were consistent over time. This is represented in Figure 5.1 as the purple clock-like circle in the background. In some ways, the consistency of these obstacles contradicts SERT's understanding that the complexities of resilience processes are often evidenced simply as change over time (Ungar, 2011). This lack of change over time could perhaps reflect the nature of obstacles – economic conditions and related resource constraints are slow to change (Meinch et al., 2015; Moore et al., 2017). The same appears to be true of values and norms, including those that relate to gender (Heise et al., 2019). Likewise, exposure to chronic adversity has the potential over time to undermine social relationships and erode social capital (Hendricks et al., 2015; Walker & Mkwanzani, 2015). All of this implies that the context of the individual can play a significant role in the temporal dimension of what obstructs hope. When a context is characterised by apparently endless challenges, this endlessness translates into the same obstacles that obstruct hope over a period of time.

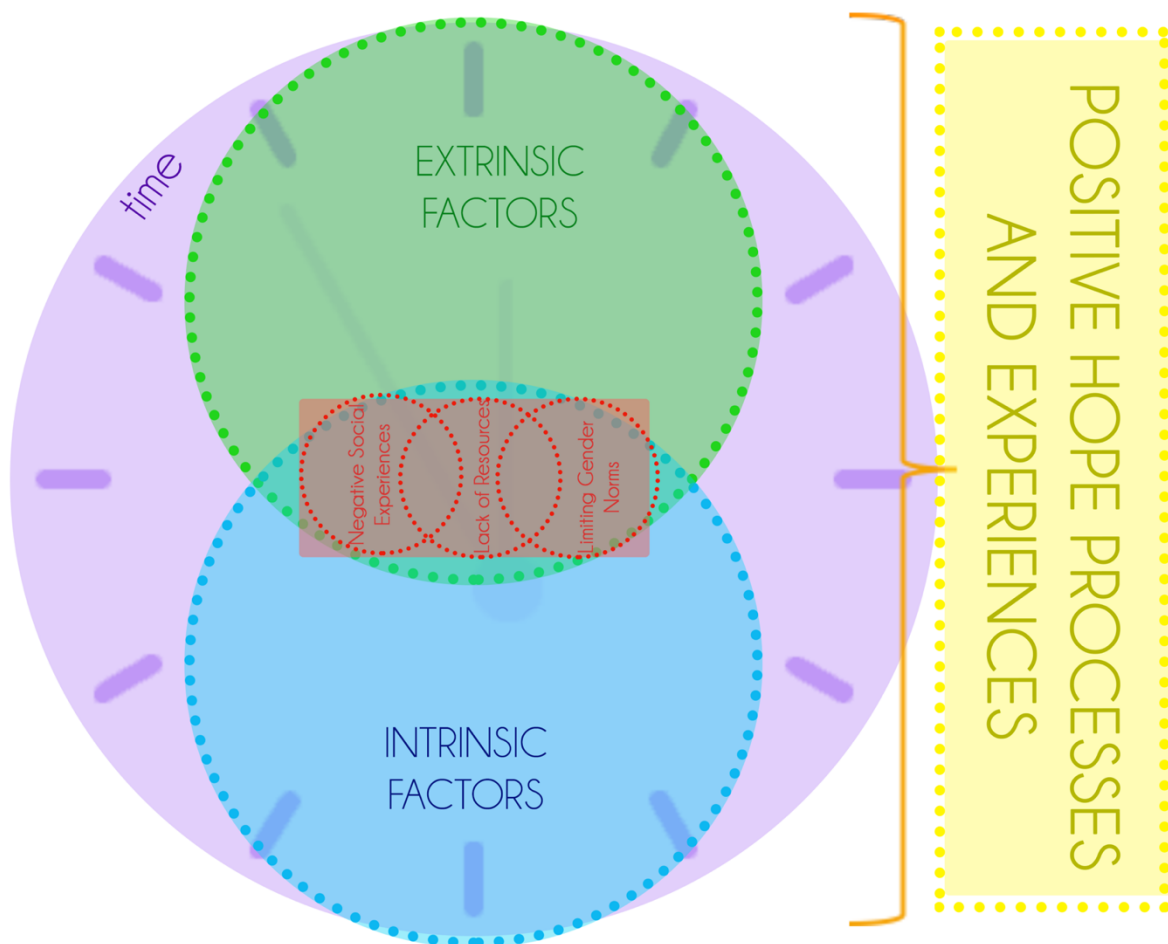


Figure 5.1: Visual summary of findings

5.3 REFLEXIVITY

Reflexivity may be understood as the process of self-reflection in which the researcher is actively aware of their own positioning in relation to the research (Bloomberg & Volpe, 2018; Creswell, 2016). The awareness that is gained through reflexive practices allows the researcher to critically assess how their positioning may influence the process of conducting the research (i.e. participants' reactions towards the researcher) and the subsequent interpretation and analysis of the research (Creswell, 2016). The positioning of a researcher includes factors such as the researcher's age, language, race, gender, culture, sexual orientation, beliefs, biases, personal history and any other possible factors that the researcher may not even be fully aware of but that may emerge (Attatia & Edge, 2017; Berger, 2015). A researcher should aim to practise reflexivity through critical self-reflection in order to enhance the transparency and trustworthiness of their research process (Attatia & Edge, 2017; Creswell, 2016).

When I reflect on my study of limited scope, I acknowledge my position as a white, English-speaking young woman who has grown up in suburban areas. To minimise the effect of this, I remained aware of my positioning and made a concerted effort to not allow my positioning to interfere with the way I engaged with the participants or in the analysis of the findings. At the outset, I stated that my assumptions with regard to what I believe may be the results of my study (see Chapter 1, Section 1.7). I had assumed that a lack of resources would be a significant barrier to hope. This was based on previous work experiences (i.e. tutoring individuals from various backgrounds), my reading of existing literature, an awareness of contextual issues and current affairs in the country, as well as my personal observation of the disparities between areas in which I have resided (i.e. more privileged) and those similar to the context of my study (i.e. resource-constrained). In my findings, I report that access to structural resources did act as a barrier to hope. Similarly, my other assumptions, which included a lack of positive relationships having a hope-disabling impact and external barriers remaining consistent over time (see Section 1.7), were confirmed by the findings.

However, my findings also highlighted the complex nature of the obstacles to hope and their tendency to interact. The lack of resources, for example, also meant a lack of role models in the community and fewer opportunities to learn from others. The interaction of obstacles was not something I had considered prior to the research process, and upon

reflection, I believe this may be because I have not personally experienced a similar lack of resources.

When I reflect on the research process, I believe that having the opportunity to be a part of a larger research project, namely the RYSE project, was advantageous. The experience of entering a new community when you are an outsider can be overwhelming. It helped to have supervisors who were familiar with the site and the community, along with the CAP who assisted in participant selection and the RYSE project manager who eased the process and provided guidance.

5.4 LIMITATIONS OF THIS STUDY

Reflecting on my study helped me to identify specific limitations. These included the following: the group-work nature of the data generation process may have resulted in limitations with regard to what the participants were willing to share with myself and my colleague. Participants may not have been as willing to share or to provide lengthy explanations for fear of judgement from other group members (Fusch & Ness, 2015). Furthermore, in group settings some participants may not feel they have the opportunity to share, as other more vocal participants may dominate the conversation or have more lengthy responses that take up more time (Anderson, 2010; Fusch & Ness, 2015). In my study, I tried to manage these limitations by ensuring I provided each participant with an opportunity to contribute and by respectfully probing the participants' responses. I also discussed issues with regard to respect in the group and confidentially within the group before generating data. Besides the group-work setting, I believe there may have been language barriers and this may have limited the extent to which the participants were able to express themselves. Although speaking and understanding English was part of the inclusion criteria to participate in the study and I had the support of the project manager and my colleague, both of whom are fluent in the local language, I believe that the participants may have provided even richer descriptions of their experiences if they could have done so in their home language (Angell et al., 2014). Furthermore, as is the case in many longitudinal studies, there was participant attrition (Delfabbro et al., 2017). I believe this was a limitation as I did not have the opportunity to personally engage with all the participants from the previous year and to follow up on their experiences. This may have influenced the variation in saturation between Time 1 and Time 2 in each theme. Finally, as there was only one male participant at Time 2, I believe he may have found the all-female group setting limiting in terms of what he was

willing to share. This participant was also shy and even with probing did not share easily. I believe the male perspective/voice is lacking in the findings with regard to the longitudinal aspect of my study.

5.5 RECOMMENDATIONS

5.5.1 Recommendations relating to future research

I believe that it would be beneficial if there was a follow up to my study that explored barriers to hope over time. Should there be a follow-up study I would recommend that the researchers possibly do more than one site visit. This could allow participants to become familiar with the researcher and one another. Alternatively, the researcher could consider doing group and one-on-one interviews. If one-on-one interviews are not possible, I would recommend data generation methods that allow for anonymous responses to the questions. For example, an open-ended questionnaire could be given to participants that could allow them to disclose information that they felt they could not share during the art-based activities. In this way, participants may be more willing to share and it may minimise the possibility of participants' insights being overlooked (Creswell & Poth, 2018). As noted in the limitations, longitudinal studies often experience participant attrition. Therefore, I would recommend that any future researcher work closely with the CAP to help involve the same participants as in previous years. I would also recommend, when working with the CAP, to determine ways to make the ratio of participants more equal in terms of males to females. This will allow both voices to be represented in the research process and in the further interpretation of any variations or findings.

I would recommend that translators or multi-lingual researchers be involved in the research process, especially if the home languages of the researcher and the participants are not the same (Oxley et al., 2010). In this way, participants can be provided with the opportunity to express themselves in the language they feel most comfortable with, and the researcher can use the help of translators to probe in more meaningful ways.

5.5.2 Recommendations for educational psychologists

I would recommend that the findings be used with the context of the client in mind. In particular, the findings from my study are relevant to adolescents in resource-constrained contexts and thus may hold value for educational psychologists who work in such contexts (Buyana et al., 2020; Isaacs & Savahl, 2014; Singh & Naicker, 2019). Educational

psychologists who work in well-resourced contexts could find that some of the obstacles remain relevant – for example, it is possible that gendered expectations also obstruct hope in more privileged contexts. However, it would be important not to assume this, given the central place that contextual dynamics seemed to occupy in the obstacles that my participants reported. I would also recommend a follow-up study in which obstacles to hope over time are explored with younger children. Such a study could contribute to more developmentally appropriate insights into the factors that obstruct their hope and related interventions.

Resilience interventions that focus on developing and enhancing social relationships have been found to have positive effects on the psychosocial functioning of adolescents. The role of peers was particularly beneficial for adolescents (Van Harmelen et al. 2017). The relevance of relationship-focused interventions was confirmed in my study, where negative social experiences were identified as a barrier to experiencing hope. I would therefore recommend that educational psychologists use interventions that improve relationships and social skills. I would further recommend that educational psychologists work closely with the communities and families of their adolescent clients to address aspects such as gender stereotypes and to work preventively within the system of the adolescents.

My findings highlight the interaction between the individual and their context, as well as the harm to hope when the context is socially disadvantaged and unjust. I would suggest that educational psychologists be mindful of structural disadvantages and work with a social justice agenda. This view is supported by the writings of Hart and colleagues (see Aranda & Hart, 2014; Hart et al., 2016). They suggest that practitioners should incorporate social justice work along with resilience building to challenge systemic inequality.

Finally, in conjunction with the above and given the consistency of the reported obstacles over time, I would recommend that educational psychologists consider the persistency of the challenges (i.e. resource constraints, societal norms) that exist in the contexts where they work (Hostinar & Miller, 2019). In particular this should involve working with clients and their social ecology to identify which of the factors that affect their hope have been prevalent over time. It has been noted that preventative interventions need to be relevant to the context of the target audience (Fergus & Zimmerman, 2005), which would include factors that present as chronic obstacles as these as has been seen in my study in part stem from context of participants. It is my hope that the findings of my study will create a starting point for us to better understand which factors may potentially be barriers

to experiences of hope over time. Hopefully it might also contribute to preventative interventions that aim to minimise the effects or likelihood of these barriers.

5.6 CONCLUSION

In my study, the prominent themes that emerged – negative social experiences, lack of resources to pursue dreams, and gender role norms – suggest that the adolescents in a resource-constrained community are challenged by intersecting obstacles that ultimately impede their ability to experience hope. Furthermore, from the findings of my study it appeared that these obstacles were consistent over time. Given this consistency, it is important for hope-focused interventions to address chronic obstacles as a matter of priority. Ideally, such hope-focused interventions will be contextually relevant (Ungar, 2011) and be aimed at adolescents *and* their social ecologies. However, future studies will be needed to trial such interventions to ensure an evidence base for these interventions, their efficacy and their relevance over time (Dahl et al., 2018; Malti et al., 2016).

In conclusion, I believe that the line from the song *Anthem* by Leonard Cohen, *There's a crack in everything, that's how the light gets in*, describes the main takeaway from my study (see Figure 5.2). While there are barriers to hope (the cracks), it is in realising what they are and being able to support individuals to respond to them that hope may be promoted. I believe that educational psychologists are able to foster hope-related pathways of resilience by collaborating with adolescents and their social ecologies to prevent or manage consistent obstacles. Given the consistency of these obstacles over time, the sooner such collaborations start, the better.

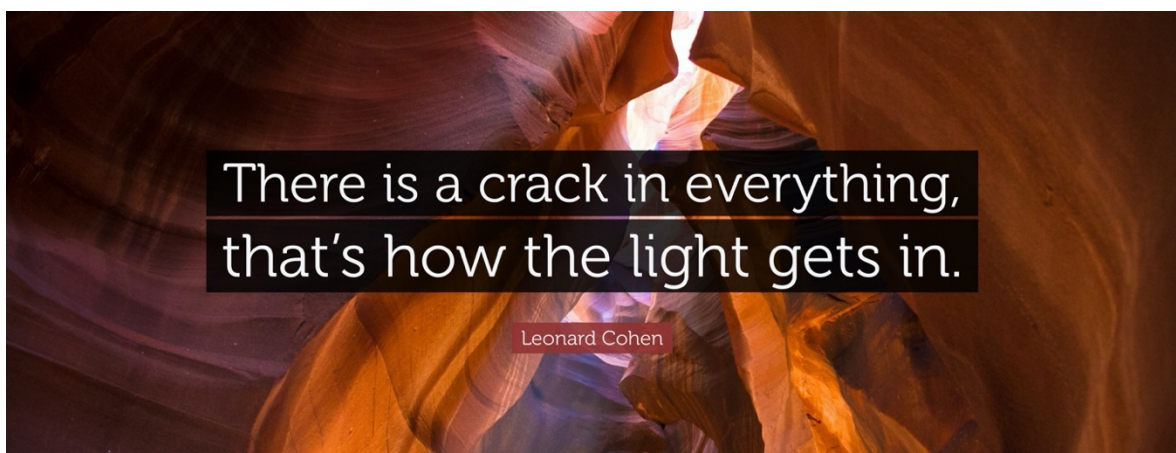


Figure 5.2: Visual metaphor

Image source: <https://quotefancy.com/quote/981200/Leonard-Cohen-There-is-a-crack-in-everything-that-s-how-the-light-gets-in>

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7. ADDENDA

7.1 ADDENDUM A – Ethics Clearance Certificate: My Research Study



UNIVERSITEIT VAN PRETORIA
UNIVERSITY OF PRETORIA
YUNIBESITHI YA PRETORIA
Faculty of Education

RESEARCH ETHICS COMMITTEE

CLEARANCE CERTIFICATE	CLEARANCE NUMBER: UP 17/05/01 Theron 18-006
DEGREE AND PROJECT	MEd Barriers to hope and adolescent resilience over time
INVESTIGATOR	Ms Michelle Gerber
DEPARTMENT	Educational Psychology
APPROVAL TO COMMENCE STUDY	10 October 2018
DATE OF CLEARANCE CERTIFICATE	01 September 2020
CHAIRPERSON OF ETHICS COMMITTEE: Prof Funke Omidire	
	
CC	Ms Bronwynne Swarts Prof Linda Theron Dr Sadiyya Haffejee

This Ethics Clearance Certificate should be read in conjunction with the Integrated Declaration Form (D08) which specifies details regarding:

- Compliance with approved research protocol,
- No significant changes,
- Informed consent/assent,
- Adverse experience or undue risk,
- Registered title, and
- Data storage requirements.

7.2 ADDENDUM B: Audit Trail

7.2.1 Inductive thematic analysis

Narrative Data

Guiding Open Coding Question: *What makes it hard to hope?*

Note: Parts of the interview have been omitted for the purposes of this Addendum.

Extract 1 – 2018 Data Set

Precious: so the humans make it hard for us to hope. Social media uhm *sigh* yah...it's very hard to try to do something when you're told you can't. It's very hard to do something that you told you can't you know...it's it's very hard to try and convince yourself of something while others are saying something else. So that sometimes in a way gets to you, you know. So I think other people as well, as much as we love people and helping them out, sometimes other people are just not there you know. They don't wanna be helped, you know. They just...oh yah, can I just go back to school...uhm sometimes at school you get to see you know other people who have lost hope. And you can see, that these people have lost hope in general you know. And then if you can associate yourself with those type of people, in a way you also lose hope you know. So other people as well that's how they make it very difficult for us to hope.

Extract 2 – 2018 Data Set

Minky: okay so here I wrote what makes it difficult to hope is coming from a poor background or a place that lacks ambitious or successful people because they will make you think that it is not possible to do certain things in life then to add on to that you have negative people around you and you don't have the money to start whatever that you want to start maybe a business or you want to go university so I think what kills the hope is living amongst people who are negative or people who haven't achieved what they plan to achieve in their life so they'll make you feel like whatever you are dreaming it's impossible

Extract 3 – 2018 Data Set

Rainbow: anyhow...so with the community, what makes it hard or difficult for me to hope? You know at times, you like see community members talking about you. Saying okay let me just say, uhm a specific person can come to you and ask you what do you wanna be after matric and I'll be like I wanna be a mechanical engineer, they be like ishuu, that's for men.

Extracts addressing the research question	Open/Axial Code	Themes
humans make it hard for us to hope	People being viewed as a barrier to hope	Negative social experiences
sometimes at school you get to see you know other people who have lost hope. And you can see, that these people have lost hope in general you know. And then if you can associate yourself with those type of people, in a way you also lose hope you know. So other people as well that's how they make it very difficult for us to hope	Lack of hopeful role models in the community	Negative social experiences
very hard to try to do something when you're told you can't. It's very hard to do something that you told you can't you know...it's it's very hard to try and convince yourself of something while others are saying something else	Demotivating comments by others	Negative social experiences
makes it difficult to hope is coming from a poor background	Financial concerns	Lack of resources
place that lacks ambitious or successful people because they will make you think that it is not possible	Lack of hopeful role models in the community	Negative social experiences

to do certain things in life then to add on to that you have negative people around you	Demotivating comments by others	
you don't have the money to start whatever that you want to start maybe a business or you want to go university	Lack of financial resources limiting educational goals	Lack of resources
what kills the hope is living amongst people who are negative or people who haven't achieved what they plan to achieve in their life so they'll make you feel like whatever you are dreaming it's impossible	Lack of hopeful role models in the community	Negative social experiences
you like see community members talking about you	Percieved judegment from others in the community	Negative social experiences
a specific person can come to you and ask you what do you wanna be after matric and I'll be like I wanna be a mechanical engineer, they be like ishoo, that's for men	Being limited due to expectations associated with gender	Gender roles as limiting

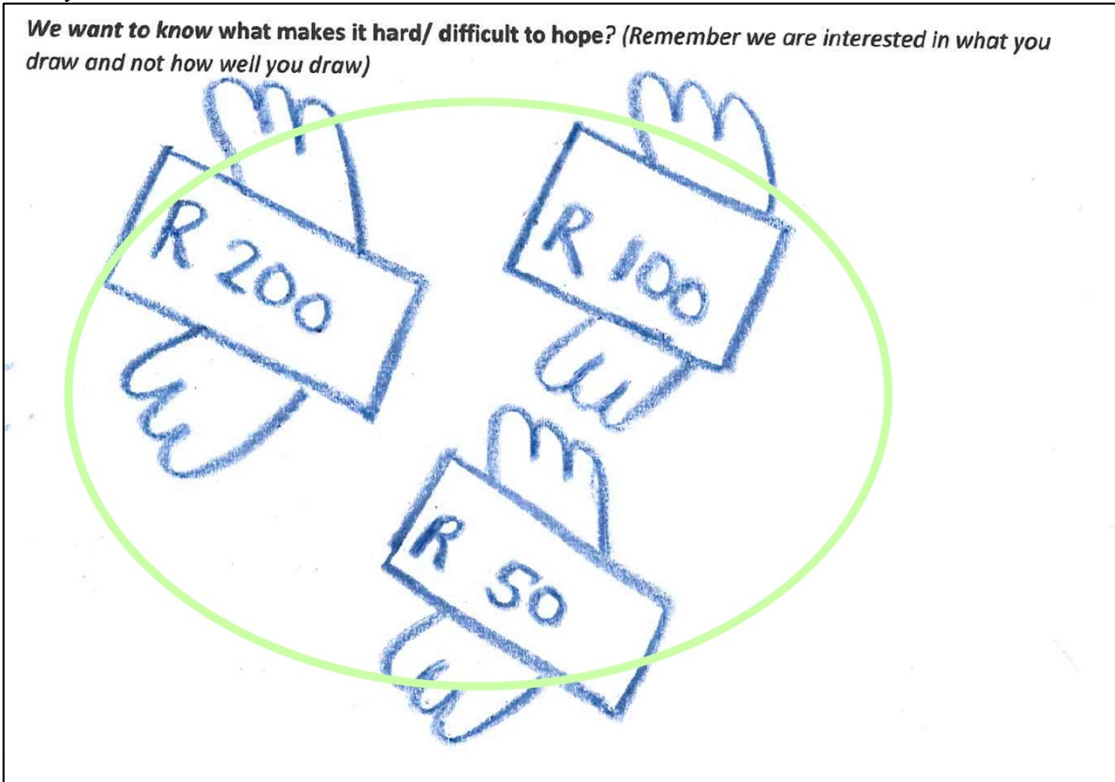
Visual Data

Guiding Open Coding Question: *What makes it hard to hope?*

Visual Data Extract 1 – 2018 Data Set

Minky:

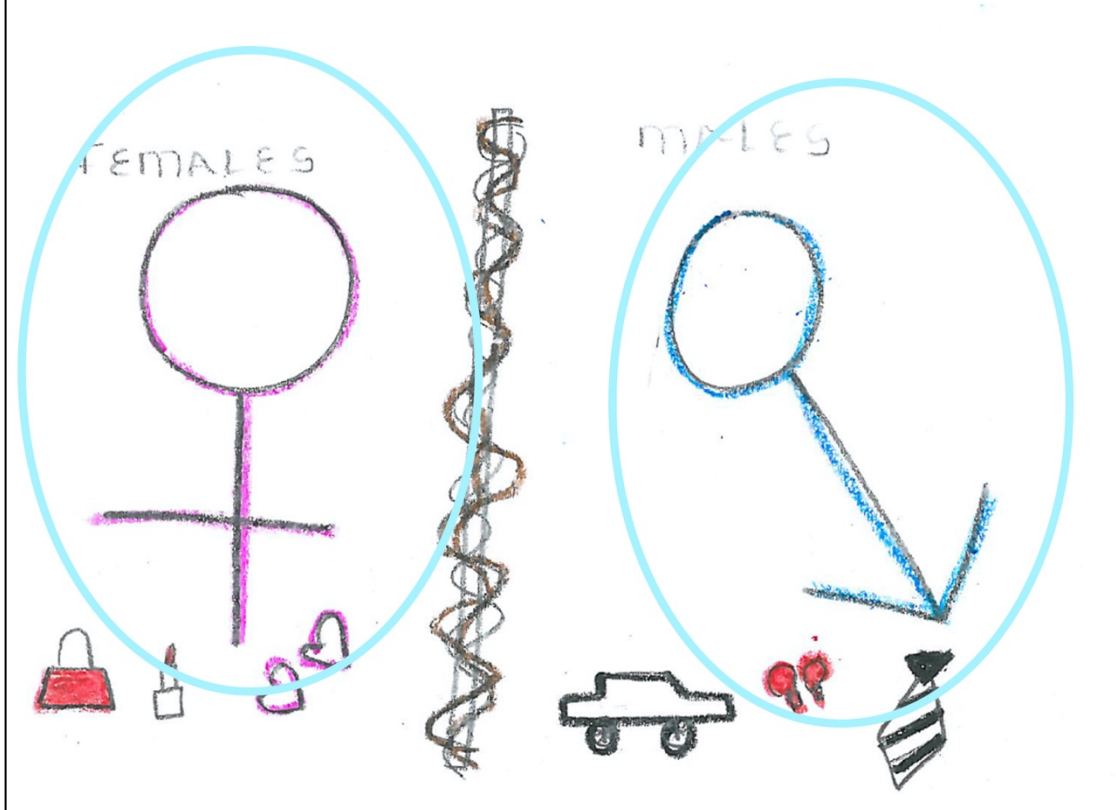
We want to know what makes it hard/ difficult to hope? (Remember we are interested in what you draw and not how well you draw)



Visual Data Extract 2 – 2018 Data Set

Khomotso:

We want to know what makes it hard/ difficult to hope? (Remember we are interested in what you draw and not how well you draw)



Visual Data Extract 3 – 2018 Data Set

We want to know what makes it hard/ difficult to hope? (Remember we are interested in what you draw and not how well you draw)



Extracts addressing the research question	Open/Axial Code	Themes
Visual Data Extract 1	Financial concerns	Lack of resources
Visual Data Extract 2	Gender being viewed as a barrier	Gender roles as limiting
Visual Data Extract 3	People being viewed as a barrier to hope	Negative social experiences

7.2.2 Deductive thematic analysis

Narrative Data

Guiding Open Coding Question: *What makes it hard to hope?*

Note: Parts of the interview have been omitted for the purposes of this Addendum.

Extract 1 – 2017 Data Set

Minky: And another thing the industry is mostly dominated by male and people say its because they need physical strength so it's going hard for me as female to find a job in that industry as a woman, and another thing is people has been underpaid so that makes it hard for me to have hope.

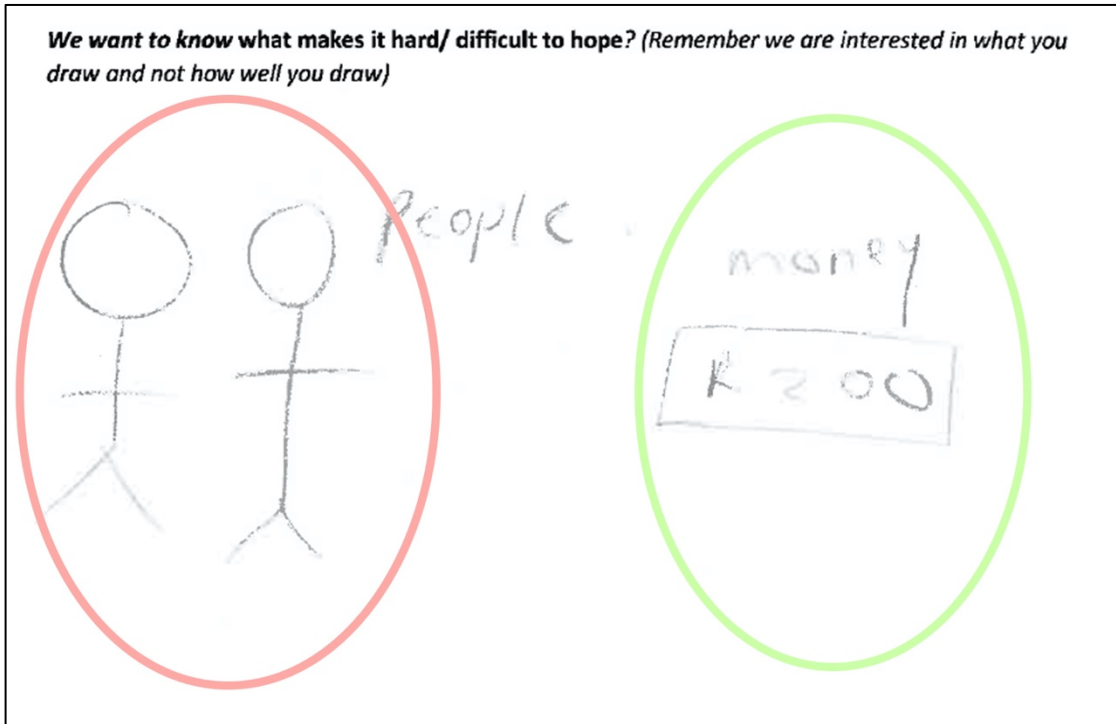
Extracts addressing the research question	Open/Axial Code	Themes
industry is mostly dominated by male and people say its because they need physical strength so it's going hard for me as female to find a job in that industry as a woman	Being limited due to expectations associated with gender	Gender roles as limiting
people has been underpaid so that makes it hard for me to have hope	Financial concerns	Lack of resources

Visual Data

Guiding Open Coding Question: *What makes it hard to hope?*

Visual Data Extract 1 – 2017 Data Set

Thoko:



Extracts addressing the research question	Open/Axial Code	Themes
Visual Data Extract 3	People being viewed as a barrier to hope	Negative social experiences
	Financial concerns	Lack of resources

7.2.3 Inclusion/exclusion criteria for themes

Theme	Inclusion criteria	Exclusion criteria
Negative social experiences	Any reference to plans/dreams and goals for the future being discouraged through experiences (e.g. unfavourable comparisons with others, judgement, demotivating remarks, not understanding/sharing the adolescent's passions) with family, friends or community members. Plans/dreams being discouraged or viewed as a barrier.	Any reference to social experiences that are negative in nature, but that did not hinder their hope, feelings of optimism or plans for the future. Reference to just disliking other individuals. References to social experiences that are limiting because of gendered expectations.
Lack of resources to pursue dreams	Any reference to a lack of access to or availability of resources such as study materials, facilities and/or money to achieve hopes, dreams and/or future goals.	Any reference indicating that the adolescent did not utilise resources.
Gender role norms limit future selves	Any reference indicating that the norms/expectations associated with the adolescent's identified gender impedes their hopes, future goals and/or dreams.	Any reference indicating that the adolescent merely disliked aspects of their gender.

7.3 ADDENDUM C: Ethics Clearance Certificate: RYSE Study



UNIVERSITEIT VAN PRETORIA
UNIVERSITY OF PRETORIA
YUNIBESITHI YA PRETORIA

Faculty of Education

Ethics Committee

10 October 2018

Ms Michelle Gerber

Dear Ms Gerber

REFERENCE: UP 17/05/01 Theron 18-006

This letter serves to confirm that your application was carefully considered by the Faculty of Education Ethics Committee. The final decision of the Ethics Committee is that your application has been **approved** and you may now start with your data collection. The decision covers the entire research process and not only the days that data will be collected. The approval is valid for two years for a Masters and three for Doctorate.

The approval by the Ethics Committee is subject to the following conditions being met:

1. The research will be conducted as stipulated on the application form submitted to the Ethics Committee with the supporting documents.
2. Proof of how you adhered to the Department of Basic Education (DBE) policy for research must be submitted where relevant.
3. In the event that the research protocol changed for whatever reason the Ethics Committee must be notified thereof by submitting an amendment to the application (Section E), together with all the supporting documentation that will be used for data collection namely; questionnaires, interview schedules and observation schedules, for further approval before data can be collected. **Non-compliance implies that the Committee's approval is null and void.** The changes may include the following but are not limited to:
 - Change of investigator,
 - Research methods any other aspect therefore and,
 - Participants
 - Sites

The Ethics Committee of the Faculty of Education does not accept any liability for research misconduct, of whatsoever nature, committed by the researcher(s) in the implementation of the approved protocol.

Upon completion of your research you will need to submit the following documentations to the Ethics Committee for your Clearance Certificate:

- Integrated Declaration Form (Form D08),
- Initial Ethics Approval letter and,
- Approval of Title.

Please quote the reference number **UP 17/05/01 Theron 18-006** in any communication with the Ethics Committee.

Best wishes



Prof Liesel Ebersöhn
Chair: Ethics Committee
Faculty of Education

7.4 ADDENDUM D: Informed Consent/Assent Forms



Faculty of Education
PARTICIPANT INVITATION AND CONSENT FORM – Activity 2
(Young Adults)

We invite you to participate in a project called: *Patterns of Resilience among Youth in Communities that Depend on Oil and Gas Production and Those Coping with Climate Change.*

Who are we?

We are researchers from the University of Pretoria (South Africa), Dalhousie University (Canada), Royal Roads University (Canada) and Khulisa Social Solutions (South Africa). Our contact details are at the end of this letter if you need them.

What are we doing in this project?

Broadly, we want to learn from you (and other people from the Secunda area) what makes it possible for people to be OK in life when they live in communities which are involved in the oil and gas (petrochemical) industry. We will do the same with people living in North American communities which are involved in and challenged by the petrochemical industry. We will use this information to better understand what makes it possible for people to be healthy and to feel good. We want to use this understanding to make it possible for more people who live in communities involved in the petrochemical industry to be healthy and feel good.

The Research Ethics Committee of the Faculty of Education, University of Pretoria has said it is OK for us to do this study (UP 17/05/01). They know we will work carefully using South Africa's and international ethical rules (this is actually called the guidelines and principles of the international Declaration of Helsinki and the ethical guidelines of the National Health Research Ethics Council). The committee will maybe want to look at the forms you sign (if you say yes to being in this study) to check that we did everything in the right way.

Why are we asking you to be part of this project?

Because you

1. Are 18-24 years old, *and*
2. Are OK speaking English and can read and write in English, *and*
3. Live in the Secunda area, Mpumalanga, *and*
4. Have been affected (negatively or positively) by the petrochemical industry,
5. Were recommended as a participant for this project by someone working at Khulisa or by a member of the project's Community Advisory Panel.

What do you need to know?

- You can say no. If you say no, there will be no problem, you don't need to give a reason. Even if you say yes now, it is OK for you to change your mind later and stop taking part.
- If something (like drug use) makes it hard for you to understand clearly what this project is about, we will not be able to let you take part.

If you say yes, what will you be asked to do?

You will be asked to participate in a research activity

Date and time	Place	Description
Date: <hr/> Time: <hr/>	Embalenhle Sasol Club	We will ask you (and the other young people in your group) to use an artistic activity (we will give you everything you need to do this) that will help answer the some questions. E.g.,: <ul style="list-style-type: none"> – How does the petrochemical industry affect your life? – Are young men and women affected differently and if so how? – What does it mean for a young person to be OK when the petrochemical industry affects their life in a negative way? – What/who makes it possible for young people to be OK when the petrochemical industry affects their life in a negative way? – Are there differences in what/who makes it possible for young men and women to be OK when the petrochemical industry affects their life in a negative way, and if so how?

We will ask your permission to audio record the above so that we can write down what you say. We will also use video cameras to record what you are saying and doing during the research. We will also take photos of you during the research; we will ask your permission to use your pictures in on social media and on our websites.

What do you get out of this?

We would like to offer you R100 as a token of our appreciation. At the end of this study, a copy of the findings will be made available to you if you would like to have them.

Can you get hurt by taking part?

We don't think that you can get hurt physically, but there are some other risks. We explain them below and what we will do to manage them.

Possible / Probable risks/discomforts	Strategies to minimise risk/discomfort
Speaking English could be tiring or difficult.	If you prefer, you can speak in your home language. We will ask members of the research team or others in your group to translate into English so that the researchers who speak English can also understand.
You will complete the activities on [date] in a group.	Because you will be part of a group, other people will know that you participated and what you said. To try and minimize outsiders knowing what you said, we will agree on group rules (e.g., treating one another respectfully; not talking to others about what specific participants said/did).
If your group chooses to use a video-activity and this video is made public, your community and many other people will know that you participated in the study.	You do not have to take part in the video. Alternatively, if you do want to take part but you don't want other people to identify you, then we can find ways of hiding your face (e.g., by wearing a mask). You can also choose whether your name is added to the credits or list of people who are in the video.

What will happen to what you write or draw or make or say during the study?

We will ask a person/people to listen to the audio-recordings of the activity that you did and type what you and the other participants have said. This person/these people will sign a form in which they promise to keep the recording private (meaning they can't tell anyone anything about what they listen to and type up). Once everything is typed up, the researchers from the University of Pretoria will delete (erase/wipe out) what was recorded.

We (the South African and Canadian researchers working in the project) will study the typed-up version of what you and others said. We will use the information you gave us to finalize a questionnaire that we will ask about 300 young people from the Secunda area to complete. We will also use it to write about what makes it harder and easier for young people to do well in life. We will probably quote what you said/wrote or show the drawings you made when we write about what we learnt from you or when we tell others about what we learnt from you (e.g., at a conference or when we teach students). We will also compare what you tell us with what we have learnt from young people living in Canadian communities which are involved in the petrochemical industry and use this comparison to better understand how young people think about health and about feeling good.

We will keep a copy of what you said in a safe place at the University of Pretoria. We will keep the copies for 10 years. Your name will not be on any of these copies. We will allow university students who have to complete research projects about resilience, adolescents, climate change or communities dependent on petrochemical producing companies to use these copies for their research projects.

Who will see the forms you sign and what happens to them?

Only the researchers from the University of Pretoria will have access to the forms that you sign. They will store these forms for 10 years.

Will it cost you anything to take part in this study?

No, it will not cost you anything. We will pay the cost of the local bus/local taxi that you use to participate in the research activities on _____

Do you have questions to ask?

- If you have questions you can email Linda Theron at Linda.theron@up.ac.za or phone her at 012 420 6211. You can also contact Mosna Khaile at 0767756180 or email her at Khaile.mosna@up.ac.za
- You can contact the chair of the Research Ethics Committee, Prof Liesel Ebersohn on (012 422 2337) if you have any concerns or complaints that have not been adequately addressed by the researcher.
- You will receive a copy of this information and consent form for your own records.

Thank you very much for considering our invitation!

Linda and Mosna

Declaration by participant

By signing below, I [full name] agree to take part in a research study named: *Patterns of Resilience Among Youth in Communities that Depend on Oil and Gas Production and Those Coping with Climate Change*.

I say that:

- I have read and understood this information and consent form and it is written in a language with which I am fluent enough and comfortable.
- I have had a chance to ask questions to both the person obtaining consent, as well as the researcher (if this is a different person), and all my questions have been adequately answered.
- I understand that taking part in this study is **voluntary** (I can say no) and I have not been pressurised to take part.
- I understand that what I contribute (what I say/write/draw) could be reproduced publicly and/or quoted.
- I reserve the right to decide whether or not my actual name or a made-up one will be used in the research. I will decide this at the end of my participation once I have a better understanding of what is involved, and once I have talked through what that would mean with the university researchers.
- I understand that I may choose to leave the study at any time and that will not be a problem. I also understand that once the findings of the study are in the process of publication I cannot withdraw what I contributed to the study.

- I may be asked to leave the study before it has finished, if the researcher feels it is in my best interests.
- I agree that photos/videos of me engaging in research activities can be put up on social media and on research websites and be used in research-related publications/conference papers.

Signed at (*place*) on (*date*) 2017

..... **Signature of participant**

..... **Signature of witness**

You may contact me again
I would like a summary of findings

My contact details are:

Name & Surname: _____

Age: _____

Male / Female: _____

Postal Address: _____

Email: _____

Phone Number: _____

Cell Phone Number: _____

In case the above details change, please contact the following person who knows me well and who does not live with me and who will help you to contact me:

Name & Surname: _____

Phone/ Cell Phone Number /Email: _____

Declaration by person obtaining consent

I (*name*) declare that:

- I explained the information in this document to
- I encouraged him/her to ask questions and took adequate time to answer them.
- I am satisfied that he/she adequately understands all aspects of the research, as discussed above.
- I did/did not use an interpreter.

Signed at (*place*) on (*date*) 2017

..... **Signature of person obtaining consent**

..... **Signature of witness**

Declaration by researcher

I (*name*) declare that:

- I explained the information in this document to
- I encouraged him/her to ask questions and took adequate time to answer them.
- I am satisfied that he/she adequately understands all aspects of the research, as discussed above
- I did/did not use an interpreter.

Signed at (*place*) on (*date*) 2017

..... **Signature of researcher**

..... **Signature of witness**

Faculty of Education
Fakulteit Opvoedkunde
Lefapha la Thuto