


2017

Hopeful Thinking: Conceptualizing a Future Beyond Domestic Abuse

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Walden University

College of Social and Behavioral Sciences

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Henri Zombil

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Walden University
2017

Abstract

Hopeful Thinking: Conceptualizing a Future Beyond Domestic Abuse

by

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MS, Walden University, 2013

MHA, Strayer University, 2011

MA, Asbury Theological Seminary, 2007

BA, Texas Wesleyan University, 2003

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

Human & Social Services—Crisis, Disaster, and Interventions

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Abstract

Domestic violence is a continuing public health problem. Immigrant women facing domestic violence have additional challenges in dealing with domestic violence and accessing services. Hopeful thinking has been identified as a strategy for intervening and surviving beyond domestic violence. The purpose of this multiple descriptive case study was to explore hopeful thinking in Haitian immigrant women domestic abuse survivors' (HIDAS) conceptualizations of the future beyond domestic abuse. The framework for the study was resilience theory, which emphasizes the individual's ability to bounce back from stressful situations. This framework was used to investigate how HIDAS in the United States experience hopeful thinking and the role hopeful thinking plays in how they perceive the future. Four women participants were recruited from a Haitian community in Florida, and data were collected through interviews. Findings from content analysis showed that while each woman had a different strategy for how to get out of the abusive relationships, they became independent by hoping that things would change for the better. Although the interpretation of findings clarified these survivors' experiences of domestic abuse, the findings are not meant to solve the larger problem of domestic abuse. The study results may influence social change by informing development of operational hope-based community and trauma intervention services for HIDAS and other groups of immigrant women.

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Dedication

I dedicate my study to all Haitian women in Haiti, in the United States, and all women survivors around the world who are in different kinds of domestic abuses and women who are still dealing with domestic abuse.

Acknowledgments

I thank and acknowledge all Haitian women survivors who chose to share their stories about domestic abuse experiences in this study.

I want to thank and acknowledge my spouse and my family for their supports and encouragements that I received in all settings of this journey.

I would like to acknowledge and thank Dr. Barbara Benoliel and Dr. Tracey Philips, my dissertation chair and co-chair for helping me focus and supporting me to framing this study.

Finally, I want to thank Sonia Castleberry, a wonderful editor for her hard work and advice.

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Chapter 1: Introduction to the Study

Introduction

Domestic abuse is a crime in some places, but not all. Some researchers see it as a social and mental health problem (Kundu et al., 2014; Modi, Palmer, & Armstrong, 2014). The central historical context for domestic abuse among Haitian immigrant women in the United States is the Haitian people's experience of violence and poverty since the Atlantic slave trade, the post-independence economic, retaliation of France and the embargo proclaimed on Haiti in 1803 (Dubois, 2012). Haitian immigrant women and their children who survive domestic abuse contend with denial and feeling trapped, hopeless, and imprisoned (Clark, 2006; Dubois, 2012; Latta & Goodman, 2005).

Hope is essential to human beings. This emotion helps one fight against depression, discouragement, fear, anxiety, isolation, or loneliness (Johnstone, 2014; Sun, Tan, Fan, & Tsui, 2014). Hopeful thinking can empower, create independence, and facilitate an escape from incarceration, whether physical, mental, social, or spiritual (Allen, 2013; Bossons & Cole, 2012). However, some women in domestic abuse situations remain in denial and stay committed to the abuser because they hope for a change, the abuser promises to change, or their social or religious beliefs strongly discourage them from leaving the relationship (Clark, 2006; Dubois, 2012; Latta & Goodman, 2005).

Hope is a common emotion around the world (Johnstone, 2014; Sun et al., 2014), but little is known about hopeful thinking in survivors of domestic abuse (Crain & Koehn, 2012). As such, my intent in this study was to explore the role of hopeful thinking

in the lives of Haitian immigrant domestic abuse survivors (HIDAS). While victims of domestic abuse can be men or women, the majorities are women and were this study's focus. As such, the identifier woman was not used in this study when discussing domestic abuse survivors unless necessary. I explored the concepts of hope and resilience among HIDAS, how these women conceptualized hopeful thinking and their future beyond domestic abuse, and the role of hopeful thinking in promoting that future. Lastly, I identified possible strategies for coping and making changes based on their experiences.

Active hope focuses on finding and offering a response to different crises and challenges that people face daily; it is something that one does rather than has (Johnstone, 2014). One can cultivate resilience practice, which is the ability to bounce back from adversities (Ledesma, 2014; Zimmerman, 2013). Exploring one's hopes and fears is a type of scenario planning that is useful in increasing one's preparedness for the future by anticipating different ways in which the future may unfold. In other words, this is a goal-directed behavior.

I assumed that information gained from this study would be useful for HIDAS in developing goal-based and active hope-based interventions reflecting hopeful thinking. In this chapter, I briefly summarize the study background, the details of the research problem, and the study purpose. The research question; the theoretical and conceptual framework; study assumptions, limitations, and scope; and the significance of the study are also presented. According to Patrick and Hagtvedt (2014), Sun et al. (2014), and Tam (2014), hope is an active motivational state founded on goal-directed energy, pathways, and agency, or believing that instigating change results in achieving goals.

Background

Domestic abuse is a social crime against men and women and is a significant health problem worldwide (Chatha, Ahmad, & Sheikh, 2014; World Health Organization [WHO], 2013). Domestic abuse is also a prevalent problem among Haitian migrant women in the United States (Clark, 2006; Latta & Goodman, 2005). Domestic abuse disrupts lives in general, and women's lives in particular. Most people want out of an abusive relationship and hope for a way out. However, other people do not want out of the relationship and just want the abuse to stop (Kundu et al., 2014; Modi et al., 2014).

Survivors of domestic abuse experience different kinds of abuse, and the cycle of abuse continues if nothing changes. Survivors of any trauma might remain in a state of denial and hope (Bossons & Cole, 2012; Johnstone, 2014; Sun et al., 2014). Survivors of domestic abuse often admit their denial but still want to be with their abusive partners because they feel trapped, hopeless, and imprisoned (Bossons & Cole, 2012). Survivors of domestic abuse often hope their abusers will change their ways. If the survivors' lives and those of their children continue to be disrupted, they will seek help or leave the abusive relationship at some point.

Hopeful thinking is an important component in people's lives (Smedema, Chan, & Phillips, 2014; Snyder, 2002). Hope is a driving force in human beings' lives when they are in stress, pain, or despair (Johnstone, 2014; Rawdin et al., 2013; Sun et al., 2014). Many researchers have discussed Snyder's theory of hope and have investigated its application to domestic abuse cases (Smedema et al., 2014; Snyder, 2002). This discussion has made people aware of hopeful thinking's role in treating domestic abuse.

Snyder's theory of hope provides an understanding of the importance of hope and the three components of hopeful thinking: goals, pathways, and agency (Mind Tools Editorial Team, 2016). However, many researchers (Coduti & Schoen, 2014; O. B. Davidson, Feldman, & Margalit, 2012; Hellman, Pittman, & Munoz, 2013; Kwan, 2010; Snyder, 2002) have urged more research on hope.

Haitian women who live in Haiti react differently to life than Haitian women in the United States do (Rahill, Ganapati, Clérismé, & Mukherji, 2014). Social processes in Haiti (such as how women are treated, the justice system, their resources, and their beliefs) are not the same as those in the United States. These differences create pressures and barriers for Haitian women migrants who are trying to get out of abusive relationships or who are out and trying to survive in a new life. These women follow their husbands or they migrate to the United States and their husbands follow them. Either way, their husbands find ways to abuse them because the expectation in Haitian culture is that women are to be submissive to men (Clark, 2006; Latta & Goodman, 2005; Rahill et al., 2014).

When Haitian women migrate to the United States, some are still subjected to abuse from their partners (Clark, 2006; Latta & Goodman, 2005). Many remain silent because they are not aware that outside support is available. Some Haitians in the community, the church, and local Haitian society reinforce the notion that abuse against women is tolerable because of Haiti's long history of violence, which has somewhat normalized domestic abuse (Clark, 2006). Other Haitians believe it best to keep family problems between husband and wife.

A lack of available information for some, language barriers for others, poverty, and religious beliefs can all play a role in Haitian immigrant women's experiences of coping with domestic abuse (Clark, 2006; Latta & Goodman, 2005; Taylor et al., 2010). However, religious beliefs can help people find a meaning in life and improve their feelings of hope (Taylor et al., 2010; Wnuk & Marcinkowski, 2014). Religion is an important part of Haitian culture and can play a role in how Haitian survivors of domestic abuse develop or improve hopeful thinking.

Many HIDAS are in a state of denial and false hope, and the cycle of abuse and violence continues when nothing is done (Clark, 2006; Latta & Goodman, 2005). These women may have a difficult time adjusting to the American lifestyle and culture. The dilemma of continuing to live with their abusers might also be problematic (M. Davidson & Bowen, 2011). Hope can be an important resilience factor and may drive behaviors during various stressful situations in life (Sun et al., 2014; Tam, 2014).

Community plays a role in supporting domestic abuse survivors by providing such resources as shelters, emergency housing, support groups, social services, and counseling. Greater public awareness has helped open shelters worldwide to assist women, in particular, in their battle against domestic abuse (Kundu et al., 2014; Modi et al., 2014). For some abuse survivors, leaving their abusive partners requires community support (Bossons & Cole, 2012). In shelters, survivors learn about different resources to help them change their situations. They have a place to share and discuss their experiences as they work toward becoming more stable and financially independent (Izuhara, 2016; Lapierre & Côté, 2016; Lin-Roark, Church, & McCubbin, 2015).

Effective intervention can help domestic abuse survivors focus on their hope for the future and know they are capable of starting a new life beyond domestic abuse (McKee & Mason, 2015; Smith, 2011).

Hopeful thinking can sustain people when they feel pain, loss, despair, or vulnerability, and it helps people cope with everything that life brings to them (Johnstone, 2014; Rawdin et al., 2013; Sun et al., 2014). I did not find much in the literature about hopeful thinking related to conceptualizing the future beyond domestic abuse or about hopeful thinking in survivors who overcome obstacles and are not willing to return to their abusive relationships. I designed my study to address this gap in the literature by exploring the role of hopeful thinking in promoting resilience in HIDAS.

Problem Statement

The specific social problem that drove this study is the frequent reoccurrence of victimization of Haitian women immigrants in abusive relationships, particularly related to their returning to their abusers I sought to understand whether these women have hope for the future when facing domestic abuse Researchers have shown that hope can play a key role in recovering from such trauma and in envisioning the future (Cristea, 2012; Rahill et al., 2014; Sun et al., 2014). However, whether hope is a factor in these strategies is unclear.

Hopeful thinking can have positive or negative influences. It may create physical, psychological, or spiritual changes as well as influence social choices in people's lives, and it has been shown to be a factor in domestic abuse support work (Cristea, 2012; Rahill et al., 2014; Sun et al., 2014). Hopeful thinking may be an essential component of

goal-oriented, purposeful thinking and hopes for a better future among domestic abuse survivors, specifically HIDAS in the United States. While researchers have examined domestic abuse in the Haitian population, I have not found literature on the role of hopeful thinking in decision-making among HIDAS.

Purpose of the Study

The purpose of this multiple case study was to explore the role of hopeful thinking in conceptualizing the future beyond domestic abuse among HIDAS from the perspectives of HIDAS themselves. Relying on active hope-based interventions may transform survivors' consciousness by sustaining their hopes and capabilities. Hence, those collected themes may be useful in developing effective hope-based interventions. These interventions may help HIDAS develop a different way of life and a sense of financial, physical, and mental independence.

Research Question

Two research questions guided this investigation.

Research Question 1: How do HIDAS in the United States experience hopeful thinking?

Research Question 2: What role does hopeful thinking play in how HIDAS perceive the future?

Conceptual Framework

I used resilience theory as this study's theoretical framework. Resilience theory originated among psychologists and psychiatrists (see Ledesma, 2014), and is a positive adaptation despite adversity (see Fleming & Ledogar, 2008). Resilience theory holds that

individual has the capability to bounce back from adversity, frustration, violence, deception, or pain (Fleming & Ledogar, 2008; Ledesma, 2014; Rutter, 2012; Svetina, 2014). Survival, recovery, and thriving are concepts related to resilience. The ability to conceptualize the future after facing adversity of various types is another example of resilience (Ledesma, 2014; Zimmerman, 2013). I focus more on the concept of resilience in Chapter 2.

Different variables have been used to characterize resilience and thriving, including self-confidence, hopefulness, having strong social resources, being adventuresome, having a low fear of failure, strength of mind, and diligence, as well as tolerance of uncertainty or of the unknown (Ledesma, 2014; Rutter, 2012; Svetina, 2014). In social science, the definition of resilience has been related to a survivor's ability to recover from negative life experiences (Rutter, 2012; Svetina, 2014) and become stronger while overcoming those negative experiences (Ledesma, 2014).

Nature of the Study

This was an exploratory study with a focus on gaining a greater understanding of HIDAS's conceptualizations of the future beyond domestic abuse. Specifically, I used a multiple descriptive case study approach (Cox, 2012; Lund, 2012) to study hopeful thinking in a sample of HIDAS. Taking a qualitative, multiple descriptive case study approach helped me identify and explore how HIDAS live, how they expect to change their lives in the future, and how they conceptualize their future beyond domestic abuse through hopeful thinking. A multiple descriptive case study approach was appropriate for this topic because of its focus on the process, meaning, and interpretation of individual

experiences (Lund, 2012). Experience is a complex concept that one cannot observe externally because each person experiences things differently (Lund, 2012).

I met with study participants, conducted open-ended interviews using semi-structured interview questions, and referred to an interview protocol to elicit their lived experiences, perceptions, and beliefs. The content from these interviews formed the data for analysis (Cox, 2012; Lund, 2012). The target sample size was seven to 10 participants. I arrived at this size by using the concept of saturation, which holds that data can conclude when there is no need for additional information to replicate the research study or when further coding is not possible (Fusch & Ness, 2015). The final sample size was four participants, which was sufficient to reach saturation. Demographic data also included ethnicity to ensure that all study participants were Haitian immigrant women who survived domestic abuse in the United States.

Study Assumptions, Limitations, and Delimitations

Assumptions

In this study, I assumed that the Haitian immigrant women who had experienced domestic abuse would agree to participate in the study. It is possible that domestic abuse survivors have lived with feelings of hope in their present and past situations. They would likely best know those feelings. Further, I assumed that Haitian immigrant domestic abuse survivors represented the best source of information about their lives, would share any experiences of hopeful thinking they might have and would share this information in a face-to-face interview with a male researcher. Additionally, I assumed

that I would complete accurate analyses of responses from study participants and that they would be able to understand the questions asked of them.

Limitations

This study's most important limitation was the non-generalizability its findings. The study participants were HIDAS residing in Orange County, Florida. Given the extremely limited study focus, it may not be possible to generalize study findings to HIDAS in other parts of the United States, to Haitian domestic abuse survivors who are not immigrants, or to other immigrant survivors of domestic abuse. It would be necessary to conduct similar studies among these populations to confirm the generalizability of this study's findings. Further, I used a criterion-based sampling method, which might also have a limited generalization. As I describe in Chapters 1 and 3, criterion-based sampling was used to identify HIDAS who had experienced hope and who were willing to share their experiences, which boosted this study's credibility. Participants in this study were willing to share their narratives of abuse in personal interviews. They were resilient and full of hope. Hence, researchers wanting to replicate this study would need to consider finding another population that is hopeful and seeing if the perceptions of individuals in this population are any different.

I worked to reduce the possibility of running into difficulties when collecting information from the participants in the study. I needed to gain participants' respect by showing them that I value their ethnic histories and privacy (Cox, 2012; Lund, 2012). For instance, the experience of domestic abuse and the outcomes or consequences of the abuse are life-changing dilemmas. I explored how much interest in hopeful thinking

Haitian immigrant survivors had to understand their experiences and the role hopeful thinking played in their lives and those of their children.

Delimitations

This study represented only the experiences of HIDAS living in Orange County, Florida. The screening criteria included self-identification of being a Haitian immigrant newly out of an abusive relationship for 1–2 years. Demographic data, including age, education, and ethnicity, were also important to gather as study participants were HIDAS in the United States. The final sample size was four participants, which was sufficient to reach saturation. The determination of data reaching saturation was about the data collected becomes repetitive information between the participants (Lub, 2015; Lund, 2002).

Significance of the Study

Domestic abuse is a burden on families, in many different sectors of social service systems, and on women's health and well-being (Mishra et al., 2014). National development is affected because abuse is costly when it comes to law enforcement, health care, loss of work, and uncertainty about the future (Chatha et al., 2014; Kundu et al., 2014; Modi et al., 2014). However, the hope for a better future can serve as an anchor for domestic abuse survivors. Social services professionals need a greater understanding of the role hopeful thinking can play in these survivors' lives because it can be a key factor in helping this population start fresh new lives.

The purpose of this study was to expand the body of knowledge and literature to help researchers, counselors, psychologists, and other types of social services providers

who work with abuse survivors. More specifically, its results may inform treatment of HIDAS by helping them find different ways to fight against this abuse and become self-sufficient and financially independent. The target audience includes individuals working in immigration services, law enforcement, and domestic abuse shelters who may encounter HIDAS. Data from this study may be useful for generating themes as the basis for developing effective intervention approaches for increasing hopeful thinking among survivors of domestic abuse. Hopeful thinking may be an anchor for Haitian women immigrants to use as they go forward into their new lives.

Study findings could support professional practice and contribute to positive social change by informing individuals who may assist and provide support to HIDAS. Social services agencies may increase their outreach because they may be better able to intervene for these women and support them in their new journey after experiencing domestic abuses. Study results may also be helpful in informing the development of an operational by social services, hope-based intervention program.

Summary

The specific social problem that drove this study is the frequent reoccurrence of victimization of Haitian immigrant women in abusive relationships, particularly related to their return to their abusers. There is little knowledge about the role of hopeful thinking among HIDAS in conceptualizing the future beyond domestic abuse. I selected a multiple descriptive case study design to gain a greater understanding of this process in HIDAS. Resilience theory was the theoretical framework, and Snyder's theory of hope framed this exploration. My goal was to develop a greater understanding of how HIDAS experience

hopeful thinking and how they might use it to conceptualize their future beyond domestic abuse. In Chapter 2, I present a review of the relevant literature, and in Chapter 3, I present the study methodology. In Chapter 4, I present how HIDAS experience and view hopeful thinking. Finally, in Chapter 5 I conclude the study by presenting the potential implications for counselors and future research.

Chapter 2: Literature Review

Abuse against women is an international public health issue (Chatha et al., 2014; WHO, 2013). Many women are targets of physical abuse every year, and they hope for a better future (Crain & Koehn, 2012; Lukasse et al., 2015). Women experience hope differently according to their situation when in an abusive relationship (Dockterman, 2014). Many women who have experienced domestic abuse can be in a state of denial. When in denial, hope can play a significant role in envisioning the future beyond domestic abuse by helping to boost proactive behaviors through difficult times (Bossons & Cole, 2012; Johnstone, 2014; Sun et al., 2014).

In this literature review, I explore the literature related to Resilience, hopeful thinking, domestic abuse, and, specifically, domestic abuse of Haitian women, which were the key factors in this study. I begin by providing an overview of my literature review research strategy and the theoretical framework of Resilience. I then discuss the cognitive-based theory of hopeful thinking, domestic abuse in general and domestic abuse specifically as it relates to Haitian women in their home country and the United States. When discussing domestic abuse, I address related social problems and some existing community support services.

Literature Review Research Strategy

Resources that I accessed via the Walden University Library were the primary source for this literature review. I searched the following databases: Academic Search Complete, EBSCO Host, ProQuest, Education Resources Information Center (ERIC), and Google Scholar. For the searches, I used the following keywords: *Haiti, Haitian*

immigrants, Haitian migrants, hopeful thinking, domestic abuse, domestic violence, women survivors, church and religion and violence, Haitian beliefs, culture, faith, and hope. I also accessed pertinent dissertations through ProQuest Theses and Dissertations database. I found dissertations that focused on domestic abuse and hope, but I did not find any that specifically addressed hopeful thinking among HIDAS.

A few of the studies I discuss in the following literature review date to before 2011; I included them because I felt they made significant contributions to my review. I also included two studies completed in early 2000, but most of the journal articles related to hopeful thinking and domestic abuse are from 2011 through 2016. I compared and discussed different articles based on conceptual frameworks, population characteristics, findings, and relevance related to the topic. I analyzed gaps, themes, culture, ethical concerns, and study limitations when reviewing articles.

Resilience

Evolution of Resilience Theory

Resilience theories originated in materials science and environmental studies research (Rensel, 2015). As it applies to human beings, resilience theory originated among psychologists and psychiatrists (Ledesma, 2014). Social scientists generally define resilience as positive adaptation despite adversity (Fleming & Ledogar, 2008; Luthar, 1991). According to Fleming and Ledogar (2008), no one definition of resilience exists. In psychology, the term is often a descriptor of good developmental outcomes despite high risks, of sustaining competence under stress, and of recovering from trauma (Werner, 1995).

In resilience theory, individuals can recover from life's adversity, frustration, violence, deception, or pain (Fleming & Ledogar, 2008; Ledesma, 2014; Rutter, 2012; Svetina, 2014). Survival, recovery, and thriving are concepts related to resilience. The ability to conceptualize the future after facing adversity of various types is another example of resilience (Ledesma, 2014; Zimmerman, 2013). In the social sciences, resilience is the ability for a survivor to recover from negative life experiences (Rutter, 2012; Svetina, 2014) and become stronger while overcoming those experiences (Ledesma, 2014).

Resilience theory has evolved since the 1960s, and research on resilience has gone through several stages since then (Fleming & Ledogar, 2008). Psychologists initially focused on what were invulnerable or invincible children, but soon realized that resilience's primary drivers and influences originated outside of the individual (Fleming & Ledogar, 2008; Hill, Woodson, Ferguson, & Parks, 2012). The focus of research since then has been on identifying resilience factors at many levels, including individuals, families, communities, and cultures (Fleming & Ledogar, 2008). More currently, resilience theory has been useful in addressing issues in these areas (Rutter, 2012; Svetina, 2014). Many different fields, including social work, psychology, sociology, education, and theology (Rutter, 2012; Svetina, 2014) use the theory. The study of resilience has become important in different academic disciplines and political dialogues (Welsh, 2014). Resilience theory has been a conceptual framework in many natural and social science settings (Brown, 2014; Welsh, 2014).

Survival, recovery, and thriving are concepts related to resilience (Ledesma, 2014). These concepts could be descriptions of individual stages during or after facing adversity (Ledesma, 2014). I have identified various variables when characterizing resilience and thriving, including self-confidence, hopefulness, strong social resources, being adventuresome, low fear of failure, the strength of mind, determination, and tolerating uncertainty or the unknown (Ledesma, 2014; Rutter, 2012; Svetina, 2014).

Resilience can have many sources. Kim and Esquivel (2011) studied the connection between spirituality and resilience in juveniles. They found that spirituality could be a source of resilience in adolescents because it promoted healthy development and academic success, enhanced coping abilities, and led to psychological well-being and positive mental health outcomes. Thus, spirituality in juveniles should be encouraged and developed through spiritual education in the family, school, and community to promote resilience (Kim & Esquivel, 2011). Dean and Stain (2010) found that adolescents in rural Australia knew about the impact of self-deficiency, family, and community on their future, but the levels of emotional distress were not reported regarding how to take care of these adolescents. Through the results, Dean and Stain (2010) showed that young people, years before the study, were healthy when compared to the younger people after the study. Hence, to prevent unhealthy behaviors, the preventive intervention was designed to focus on family and community by discussing the resilience of adolescents diagnosed with mental health adversity, such as deficiency (Dean & Stain, 2010).

Various measures of risk and protective factors have been used in empirical studies on resilience (Fleming & Ledogar, 2010). Resilience is a measure involving a

complex and individual range of personal characteristics including external family and community factors that can influence a cycle of negative and positive experiences or chain reactions. When people face high levels of adversity, they may run into confusion and lack of clarity when it comes to resilience (Dean & Stain, 2010), but they may also exhibit resilience about hoping for a better future (Ledesma, 2014; Svetina, 2014). Domestic abuse survivors often have a broad range of positive and negative experiences and tolerate abuses as a way of life and marriage (Dean & Stain, 2010; Dubois, 2012). Hence, being adaptive and able to function, and exhibiting competence or positive outcomes are key indicators of resilience (Dean & Stain, 2010; Fleming & Ledogar, 2010).

Christle, Harley, Nelson, and Jones (n.d.) noted that protective factors, the qualities, or situations that can alter or reverse expected negative outcomes, can provide and promote resilience. Such factors can be internal (inside the individual) or external and can involve the family, school, and community. In adults, identifying aspects in people that make them stronger can prevent problems from occurring as well as help them more effectively deal with trauma and other life occurrences in general (Taormina, 2015).

According to Taormina (2015), stability and control can create a resilient mind in all areas of life when facing adversities. The theory of adult personal resilience is distinguishable from general concepts of resilience through a multidimensional construct that identifies adult individual resilience (determination, endurance, adaptability, and recoverability). When determined to get to a certain point in life, to get rid of bad habits,

or to change one's way of life, individuals would likely endure pain. They then adapt to an uncomfortable situation and heal from different kinds of pain and disappointment (Rawdin et al., 2013; Taormina, 2015).

Resilience has been the subject of contemporary discussions about global environmental change (Brown, 2014). In one form, resilience is an effective adaptation. One person reacts differently compared to another when facing or dealing with adversity. In another form, one will be angry, another disappointed, dejected, or victimized. Another person could experience a rush of excitement when facing adversity, even while also being fearful. The challenge is to turn negative experiences into positives and to counter adversity with resilience (Fleming & Ledogar, 2010; Hill et al., 2012).

Research has shifted from a focus on a deficit-based approaches to social problems and some community support services to a focus on strengths and resources to enable adaptive function and positive outcomes (Dean & Stain, 2010; Fleming & Ledogar, 2010; Maltby, Day, & Hall, 2015). Focusing on strengths and resources has led to further development in resilience research.

The Role of Religion in Resilience

Does religion play a role in resilience? Some research has indicated that it does. For example, South Africa was tormented by the consequences of domestic abuse that were accentuated by colonial oppression, but Black South Africans were resilient and hoped for a better life (Davies & Dreyer, 2014). The colonial oppression failed to balance discipline and protection of the people against domestic abuse. However, South African black men, as victims of colonial power, controlled everything from families to

communities, and even politics where women were put down and abused. The patriarchal mindset of male control was commonly impressed on South African women and girls working in South Africa.

Davies and Dreyer (2014) investigated how the cycle of domestic abuse could be broken, and how spiritual counseling for survivors and abusers could be used to prevent abuses from continuing. Davies and Dreyer found that pastoral care and counseling reflected spiritual and emotional support, which is compatible with religious subjects of hope and life. Pastoral counseling was an effective response to domestic abuse in their study. Even though women were abused, they stayed the course, they stayed strong, and they were hoping for a change, which is one of the reasons that hope and new life are the primary foundations of resilience theory.

Another example of the role of religion in resilience comes in Landman's (2011) discussion about public theology, in which the needs of the voiceless in intimate situations, including domestic violence, become public. Landman presented a case study of farm workers who were ignored in northeast South Africa despite national laws about domestic abuse relationships. Religion was a part of the farm workers' daily lives. Landman found that religion, as a way of life for farm workers was harmful to them when it was not practiced according to the scriptures. In such a context, religion seemed to promote domestic abuse, in which survivors did have a voice. Reworking harmful religious ideas is a healthy practice for bringing safety and healing to survivors of domestic abuse (Davies & Dreyer, 2014). Many survivors have no voice in a country in which cultural and religious taboos prevent clarity about domestic abuse (Dubois, 2012;

Taylor et al., 2010). Scripture may be misinterpreted to keep women prisoners and dependent on their husband or men in general (Halama, 2010). HIDAS in the United States may also suffer from this harmful misinterpretation.

The Concept of Hopeful Thinking

Hopeful thinking is one's conscious actions about achievable goals, which then produce different ways of thinking to achieve those objectives (Smedema et al., 2014; Snyder, 2002). Put another way; hopeful thinking helps facilitate successfully achieving goals when facing obstacles in life. Hope is a component that helps an individual move toward a goal (agency) and create strategies to reach that goal (pathway) to overcome different obstacles and barriers that occur in life (Patrick & Hagtvedt, 2014; Smedema et al., 2014; Snyder, 2002; Snyder, Rand, King, Feldman, & Woodward, 2002).

The characterization of hope throughout history has been significant for people who struggle in different ways (Snyder, 2002; Snyder et al., 2002). Researchers have discussed whether hope is a good or bad thing (Snyder, 2002; Snyder et al., 2002). Some people also believe that hope is a remedy for and as well as a source of human torment (Snyder, 2002; Snyder et al., 2002).

In discussions on the concept of hope, researchers have described possible expressions ranging from hopelessness to ultimate hope (Landman, 2011; Smedema et al., 2014; Sun et al., 2014). Some researchers have reported that they found hope a waste of time, but others believed that things could change or be different through hope (Smedema et al., 2014; Sun et al., 2014). People who experience traumatic events may have a sincere hope that things will get better by talking to a counselor, therapist,

psychologist, or pastor (Landman, 2011; Smedema et al., 2014; Sun et al., 2014). People do not act alike when it comes to hopeful thinking (Johnstone, 2014). Genetics, the environment, or making life choices may influence hopeful thinking. These relationships may be biological, psychological, spiritual, and social components in the expression of hopeful thinking (Allen, 2013; Crain & Koehn, 2012; Sun et al., 2014).

Researchers (e.g., Coduti & Schoen, 2014; Snyder, 2002; Snyder et al., 2002) have found that individuals with high levels of hope are more capable of reaching their goals than an individual with low levels. Hope plays a large part in such areas as rehabilitation counseling, which focuses on the necessary tools to build and facilitate hope for people with disabilities (Coduti & Schoen, 2014). Survivors of domestic abuse experience trauma and sometimes they lose hope, and they do not know which direction in life to take (Coduti & Schoen, 2014).

Individuals who have experienced traumatic experiences, such as domestic abuse, need to conceptualize their future. One key way of conceptualizing the future is by generating or visualizing goals, which can help people, achieve things that they did not know that they could reach (Smedema et al., 2014; Snyder, 2002; Snyder et al., 2002). People who have survived traumatic events would probably hope for a better future, a better life of self-sufficiency, and financial independence (Smedema et al., 2014; Snyder, 2002; Snyder et al., 2002). They would also seek help from different sources and be motivated to achieve their goals. A hopeful thinking strategy could work for one survivor, but not for another who does not believe that he or she could achieve their goals and become financially independent and self-sufficient (Smedema et al., 2014; Snyder,

2002; Snyder et al., 2002). Survivors might possess pathways and agency, lack both, or have only one of the components of hope and emotion.

Religion wields a positive influence on psychological health by helping people find the meaning of life and through faith, which can facilitate hope for a better future (Kwan, 2010; Wnuk & Marcinkowski, 2014). Hence, the relationship between spiritual practices, hope, the meaning of life, and psychological health functions positively or negatively and influences survivors according to their choices (Bernardo, 2013; Crain & Koehn, 2012; Kwan, 2010; Wnuk & Marcinkowski, 2014). Wnuk and Marcinkowski (2014) examined the relationships between spiritual experiences, hope, the meaning of life, positive and negative affect, and psychological well-being through daily spiritual experiences and prayer. They noticed a sense of life and hope as being mediator factors between religious experiences and positive affect. Spiritual experiences are not related to negative affect, as the meaning of life and hope are not predictors of the negative effect (Kwan, 2010; Wnuk & Marcinkowski, 2014). A sense of life and hope are important factors in the spiritual relationships related to positive psychological outcomes (Kwan, 2010; Wnuk & Marcinkowski, 2014). These positive psychological outcomes encourage a healthy and active life, positive behaviors, and positive hope. They discourage or reduce negative behaviors, cynical hope, and negative affect (Johnstone, 2014; Landman, 2011; Wnuk & Marcinkowski, 2014).

Hope, Emotions, and Self-Worth

Snyder (2002) found that emotions are part of individual pursuit goals. Emotions are a consequence of goal-directed thinking in which an individual could have more or

less hope. When one is trying to achieve an objective, positive emotions would likely result in greater hope. Individuals could find different alternatives pathways when barriers occur. However, when one has lower hope, individual obstacles to goals could result in negative emotions and result in losing hope (Boden, 2013; Johnstone, 2014; Taormina, 2015). Hope can be unrealistic when false hope for change influences one's decisions to stay in a situation or relationship that can cause stress or trauma (Bernardo, 2013; Sun et al., 2014). On the other hand, people who hope for or anticipate a positive outcome might change their situation and escape further or potential harm (Bernardo, 2013; Sun et al., 2014).

When domestic abuse survivors experience trauma, their strategies toward a goal may be limited, which can lead to the unsuccessful agency and fewer pathways. Survivors need to be self-regulated, which leads to self-definition when facing the realities of domestic abuse challenges (Snyder, 2002). Trauma often affects survivors' sense of self-worth and the ability to tend to their needs (Taormina, 2015). Traumatic stress depletes hope and can lead to self-denial, blaming oneself, and believing that one deserves the punishment (Boden, 2013; Johnstone, 2014; Taormina, 2015).

Survivors may be confused about hope, and they could be disrupted and could have a problem adjusting about self-control and self-esteem when they face diversity (Ferrari, Stevens, Legler, & Jason, 2012). The relationship of dispositional hope (i.e., agency and pathway) to self-esteem (to like oneself, competence, and confidence), and self-regulation (control and discipline) is clear diversity (Ferrari, Stevens, Legler, & Jason, 2012). Hope is a power that drives people to be confident when they feel depleted

or down (Kwan, 2010). Positive behaviors lead to confidence. Hope is longing for the future and moving toward a goal. Hope eliminates despair and suffering. Hope conceptualizes existential, spiritual, and cognition (belief and expectation) levels (D'Orsa & D'Orsa, 2011; Johnstone, 2014; Sun et al., 2014).

Fear can disrupt hopeful thinking (Boden, 2013; Johnstone, 2014; Sun et al., 2014). People are often ready to give up on the first sign of trouble or adversity, but the role of hopeful thinking for survivors of traumatic events is a fundamental factor of not losing hope (Boden, 2013; Johnstone, 2014). However, hope allows survivors to fight for their future as they see it beyond the traumatic events to avoid the fear of failure, denial, and other setbacks (Boden, 2013; Johnstone, 2014). Trauma survivors need to consider the future they wish to achieve (Boden, 2013). Without this consideration, survivors may become vulnerable to adversities and disasters in life (Davidson et al., 2012; Johnstone, 2014). A domestic abuse survivor needs to cultivate the resilience strength, need to think of the future and active hope beyond abusive life (Johnstone, 2014; Ledesma, 2014).

Core Self-Evaluation, Self-Efficacy, and Self-Control

Core self-evaluation. Core self-evaluation (CSE) is a representation of one trait stability that encompasses the subconscious, self-evaluation fundamental, abilities, and control of the individual (Smedema et al., 2014). People with high CSE think positively and are confident of what they represent. To conceptualize the future beyond domestic abuse, people need a motivational model of CSE, which includes hope, participation in their success and life change, and life satisfaction. This motivational model produces a positive effect and can be useful in helping survivors manage their lives after domestic

abuse (Smedema et al., 2014). Positive affect may or may not enhance self-control when dealing with hopeful thinking (Winterich & Haws, 2011).

Survivors may experience a future-focused positive emotion; a hopefulness emotion to help them conceptualize their future according to their way of life and what they are expecting their lives to be from domestic abuse experiences (Davies & Dreyer, 2014; Kundu et al., 2014; McAllister & Roberts-Lewis, 2010; Modi et al., 2014; Winterich & Haws, 2011). When a woman survivor faces uncertainties, she hopes for a good future without abuses, and hopes to start a new life, in which she hopes for a future without unhealthy thoughts, discouragement, or fear (Davies & Dreyer, 2014; Kundu et al., 2014; McAllister & Roberts-Lewis, 2010; Modi et al., 2014; Winterich & Haws, 2011). Domestic abuse survivors act differently when motivated. How they feel about themselves and their competence affects their motivation to attain their goals. Considering what survivors experience, accomplishing a task or reaching a certain goal depends on many different factors that can affect the motivation for doing so (Bandura, 2006; Van Der Roest, Kleiner, & Kleiner, 2015; Yiu, Cheung, & Siu, 2012).

Self-efficacy. Survivors facing a life-challenging task might depend on their self-efficacy for the motivation to tackle the challenge. They may put forth no effort and purposefully fail to maintain self-worth by creating the illusion that they could have succeeded had effort been exerted (Bandura, 2006; Van Der Roest et al., 2015; Yiu et al., 2012). Self-efficacy relates to thoughts about one's competence toward motivation. For instance, individuals may not know how to dance and have a low self-efficacy, which does not result in low self-esteem because dancing may not be important to them. Self-

esteem is different from self-efficacy in that self-esteem is an internal feeling and self-efficacy depends on the performance at hand (Van Der Roest et al., 2015; Yiu et al., 2012). Many people use high or low self-esteem as a concept that refers to their overall evaluation of self and worth (Van Der Roest et al., 2015; Yiu et al., 2012).

Self-efficacy is also a concept related to self-esteem, an assessment of one's ability to perform a task or face a situation, an ability to succeed against all the odds, and the outcomes and consequences of one's ability and competence. Self-efficacy reflects a strong belief in one's own ability to learn and develop (Bandura, 2006; Van Der Roest et al., 2015; Yiu et al., 2012). Self-efficacy emphasizes the role of observation, the experience in the society, and personal development (Van Der Roest et al., 2015; Yiu et al., 2012). High self-efficacy levels include developing one's accomplishments and feelings, staying calm when facing a challenge, mastering new ways in life, being willing to experiment with new ways of life, encouraging high expectations, and increasing persistence and focus to do better than before (Bandura, 2006; Van Der Roest et al., 2015; Yiu et al., 2012). High self-efficacy does not guarantee a positive outcome; it varies from person to person. Some people have high self-efficacy, and they trust themselves, but when they do not trust themselves, and things do not go right in their lives, the consequences may lead to low self-efficacy (Bandura, 2006; Van Der Roest et al., 2015; Yiu et al., 2012).

Self-control. Goal-directed behavior is increased or decreased by the choices that one makes in life and the words that are selected, which often determine the outcome according to how one speaks (Patrick & Hagtvedt, 2014). The influence of language

elements of self-talk as “I do not” versus “I cannot” are a denial and motivating goal-directed behavior. Hopeful people may exhibit greater self-control. Winterich and Haws (2011), in a study on temporal focus and positive emotions regarding self-control in consumer snack consumption, found that individuals with future-focused positive emotions, or hopefulness, made better food choices than those who had past- or present-focused emotional states such as pride and happiness.

The cognitive capability to recognize different possibilities for reaching personal goals is a definite predictor of life satisfaction (Davidson et al., 2012; Halama, 2010). Hopeful thinking acts as a partial mediator between one’s mind, consciousness, and life satisfaction (Halama, 2010). The basis of sustainable life after domestic abuse experiences is the sense of coherence, self-efficacy, and hope, which are protective factors in one’s life no matter what kind of situation one has endured or is enduring (Bernardo, 2013; Davidson et al., 2012). The sense of coherence and self-efficacy relates to hope in different situations.

The Problem of Domestic Abuse

Domestic abuse has been a global issue for many centuries (Chatha et al., 2014; WHO, 2013). Domestic abuse is a violation of the human law (Chatha et al., 2014; Davies & Dreyer, 2014; Mishra et al., 2014). Although men have abused their wives or partners physically, mentally, verbally, and spiritually; for many these behaviors were normal or acceptable and considered part of marriage (Allen, 2013; Davies & Dreyer, 2014; Kappler & Kaltenbrunner, 2012; Mishra et al., 2014).

Domestic abuse is a criminal act (Davies & Dreyer, 2014; Kappler & Kaltenbrunner, 2012; Mishra et al., 2014). In the 1800s, around the world, no retribution occurred when husbands abused their wives, and beating women was tolerated (Kappler & Kaltenbrunner, 2012; Kotzé, Hulme, Geldenhuys, & Weingarten, 2013). Until members of the feminist movement in the 19th century pressured governments and society about domestic violence, it remained an issue. After leaving their abusive relationships, many women had nowhere to go. A lack of other resources was also a problem (Chatha et al., 2014; Kappler & Kaltenbrunner, 2012; Kotzé et al., 2013).

Beginning in the 1970s with the establishment of the first rape crisis line in the United States and the first refuge for battered women in England (Kelly, 2013), women began to speak up after being abused, began searching for legal help, and were encouraged to refuse to take the blame for their victimization. Treatment of domestic abuse was similar to that for other types of assaults (Kappler & Kaltenbrunner, 2012). The result of the women's organization actions was a greater understanding of domestic abuse in the family and the community (Kappler & Kaltenbrunner, 2012; Mishra et al., 2014).

The conceptual structure of domestic abuse varies according to the situation and the violence. The center of domestic abuse consists primarily of violence, home life, and structural inequality (Andrienko & Andrienko, 2012; Chatha et al., 2014; Mishra et al., 2014). Perpetrators of domestic abuse are all around the world and are from all socioeconomic, cultural, and educational backgrounds. Poverty and alcohol and drug

abuse can contribute to domestic abuse (Chatha et al., 2014; Charles, 2014; Mishra et al., 2014; Rahill et al., 2014; Sandiford, 2013).

Domestic abuse is one of the most widespread violations of human rights and public health problems (Bernardo, 2013). Domestic abuse creates a burden on families, communities, and countries (Tasdemir, 2014). Zimmerman (1995) discussed that domestic abuse is a burden on the society and family, which is a step back from development batterers cost countries fortunes regarding law enforcement, health care, lost labor and general progress in development (Zimmerman, 1995). These costs do not only affect the present generation, beginning as an assault by one person on another but they also reverberate through the family and the community into the future.

The repercussions of domestic abuse are often long-term, mostly devastating, and can affect women's mental, spiritual, and physical health (Bernardo, 2013; Kaur & Garg, 2008; Mishra et al., 2014; Rapp, Zoch, Khan, Pollman, & Krämer, 2012). Most women who experience domestic abuse feel marginalized (Bernardo, 2013). Women survivors of domestic abuse have dealt with dishonor, shame, and fear, which often stop them from seeking help. For some survivors, the cycle of violence is repetitive and produces low self-esteem. Others feel hopeless, helpless, depressed, stuck, and perhaps convinced that they deserve to be abused (Kotzé et al., 2013).

Some domestic abuse survivors try to make sense of the stressful situation by activating internal resources and acting according to them (Bernardo, 2013). Hope is another internal resource that some survivors use. Others marshal external sources such as relationships with other people in the family or community. These sources are

protective characteristics that help most survivors suppress domestic abuse's effects (D'Orsa & D'Orsa, 2011; Johnstone, 2014; Sun et al., 2014).

People who experience domestic abuse may hope that things will get better by talking to a counselor, pastor, or therapist (Davies & Dreyer, 2014; Kappler & Kaltenbrunner, 2012; Mishra et al., 2014). Psychological factors such as helplessness and low self-esteem decrease resilience in domestic abuse survivors. Decreased resilience can maintain the cycle of violence by causing a loss of independence. These survivors need support from families and communities (Bernardo, 2013).

I did not use the term domestic violence in this study but instead used domestic abuse because while not all abuses are violent, they are still disruptive. While many people may know about domestic abuse situations, most choose not to say anything for different reasons (Mishra et al., 2014; Rapp et al., 2012). Unfortunately, there are not many solutions to avoiding the violence for domestic abuse survivors (Kotzé et al., 2013; Sun et al., 2014).

Hope and cogitation can significantly influence depression, but hope moderates contemplation's effects on depression (Sun et al., 2014). Survivors encounter different kinds of obstacles ranging from financial limitation to depending on their abusers' provision in their life journey (Kotzé et al., 2013; Sun et al., 2014). They often hope that their abuser would change, or they would stay just for the support and have a place to live with their children if any. Many women remain in abusive relationships because they are discouraged. When they report the crime to the police nothing is done, and little

protection against the abusers' retaliation is available (Kappler & Kaltenbrunner, 2012; Kotzé et al., 2013).

Survivors are afraid of their abusers becoming violent. Abusers retaliate unpleasantly when survivors try to leave or report the violence, press charges, or file for an injunction (Davies & Dreyer, 2014; Mishra et al., 2014). In their extreme, abusers' actions can result in murder or attempted murder (Bilefsky, 2011; Kachaeva, 2016). Abused women often remain marginalized (Mishra et al., 2014). These marginalized women exhibit different responses to the abuse such as shame, stigma, and fear that regularly stop them from seeking the support they need, especially if they are immigrants (Arnold & Slusser, 2015).

Many ways exist to help women who experience domestic abuse, including shelters, mental health counseling, financial support, family support, community or social support, and education on the matter of domestic abuse. However, in most cases abused women often remain marginalized (Mishra et al., 2014). Davies and Dreyer (2014) investigated breaking the cycle of domestic abuse and the importance of spiritual counseling for survivors and abusers to prevent the abuse from happening again. Spiritual counseling has worked well in South Africa, the focus of Davies and Dreyer's study, because the government has taken steps to protect individuals from abuse. Pastoral care and spiritual counseling constitute a spiritual and emotional support system compatible with religious subjects of hope and life (Davies & Dreyer, 2014; Mishra et al., 2014). The narrative of pastoral counseling is an effective response to domestic abuse (Davies & Dreyer, 2014; Mishra et al., 2014).

Most Haitians believe that women have to submit to men because of God's order in the scriptures (Clark, 2006; Cristea, 2012; Dubois, 2012; Latta & Goodman, 2005). Domestic abuse threatens the well-being, security, and lives of millions of religious women every year (McAllister & Roberts-Lewis, 2010). Religious women are often more vulnerable than women who are nonreligious. The former tend to believe that God's will is to obey and stay in a marriage even when abused because whatever God has joined together nobody should separate (NIV, Matthew 19:3–9; Mark 10:1–10). Other people, even some clergy members, believe most of the time in “for better or for worse,” another saying derived from the Bible and interpreted differently (NIV, Genesis 1–3, 1 Corinthians 11). These passages state that women should stay in a relationship, whether abused or not, and they have to be in a marriage no matter what (Kundu et al., 2014; McAllister & Roberts-Lewis, 2010; Modi et al., 2014). Living like this is not the way of life. Matthew 19:3–9 states that a man or a woman should not divorce unless one is unfaithful. Unfaithfulness does not only pertain to adultery but also to security, confidence, love, joy, peace, and so on (Kundu et al., 2014).

Most of the time, the church has not been a safe place for domestic abuse survivors (McAllister & Roberts-Lewis, 2010; Rahill et al., 2014). Women are vulnerable because they have to abide by church rules and to misinterpretations of the Holy Scriptures. Interpreting scriptures found in Matthew 19:3-9 and Mark 10:1-10 can lead to believing that women must submit to men and not to separate what God had united unless an act of unfaithfulness occurs (McAllister & Roberts-Lewis, 2010; Rahill et al., 2014).

The Plight of Haitians Women and Haitian Immigrants Women

Many Haitian immigrants' women are sexually and physically abused in and outside of their marriages, however, people in Haiti commonly accept this kind of behaviors as normal (Clark, 2006; Cristea, 2012; Latta & Goodman, 2005). Many Haitian immigrant women in the United States do not speak up, and their stories are invisible, so many people do not know, acknowledge, or talk about how these Haitian immigrant women suffer (Clark, 2006; Cristea, 2012; Latta & Goodman, 2005). Domestic and sexual abuses are often linked. For Haitian women who have experienced different kinds of abuses, it is a nightmare in the country where justice is not consistent and where women are treated as slaves and as being low class. To some extent, the treatment of women in Haiti is primarily sexual, and they are seen as tools for men's pleasures (Clark, 2006; Cristea, 2012; Latta & Goodman, 2005). When they migrate to the United States, they may search for peace, voice, and independence, but justice mostly is not served well. Some men, even church leaders, endorse submission of women to men as a way of life (Clark, 2006; Cristea, 2012).

Throughout history, Haiti has experienced physical, political, and sexual violence (Dubois, 2012; Rahill et al., 2014). Since the country's independence in 1803, Haitian women have suffered from domestic abuse (Dubois, 2012). The result is that many children and adults alike are affected differently. When women are abused, children suffer also. For many years, Haitian people have experienced violence and poverty, which has been a catalyst for domestic abuses for many women in Haiti and women migrants to the United States (Dubois, 2012; Rahill et al., 2014).

Haiti is spiritually connected with Roman Catholicism. However, voodooism, worshipping the spirits and the dead as well as seeking the ancestors' blessings, is also common (Clark, 2006; Latta & Goodman, 2005). Journalists around the world have chronicled Haiti, mostly focusing on the violence, the conflict between Haiti's political parties, and international intervention efforts for peace (Cristea, 2012; Dubois, 2012; Latta & Goodman, 2005). However, the plight of abused women has been kept quiet to some extent. Domestic abuse is seen as part of life and marriage. Satisfying men's pleasures is seen as women's jobs (Cristea, 2012; Dubois, 2012).

Haitian communities are deep in religious beliefs and faith and often rely on cultural stances to interpret the scriptures, which has resulted in enslaving women to be submissive to men even when abused (Cristea, 2012). Clergy members and other religious leaders often are misinformed about the nature of domestic abuse or their personal beliefs about domestic abuse are flawed. Some do not want to intervene for fear of being sued (Charles, 2014; McAllister & Roberts-Lewis, 2010; Rahill et al., 2014; Sandiford, 2013). However, even though these flaws and deficits exist, the church can provide the right help to domestic abuse survivors (McAllister & Roberts-Lewis, 2010; Rahill et al., 2014).

Spirituality can help people suffering from depression (Allen, 2013; Clark, 2006; Latta & Goodman, 2005; Peteet, 2012). There can be issues in treating depression and clinicians, and spiritual advisors need the training to help set them aside or avoid them (Allen, 2013; Clark, 2006; Latta & Goodman, 2005; Peteet, 2012). Clinicians and spiritual care providers need training on how to care for people who are suffering from

depression so that they can find ethical ways to treat different of obstacles, emotion, and spiritual settings of how to treat depressed patients (Clark, 2006; Latta & Goodman, 2005, Peteet, 2012). Peteet (2012) found that increasing hopeful thinking and independence for survivors of domestic abuse is necessary. When dealing with Haitian immigrant survivors of domestic abuse, creating an integrated treatment plan (spiritual, mental, and physically) is necessary. A solid treatment plan includes recognizing different challenges and possible drawbacks (McAllister & Roberts-Lewis, 2010; Peteet, 2012; Rahill et al., 2014).

Summary

The purpose of this literature review was to analyze literature relevant to this study's focus and to identify strengths and weaknesses in the research. I provided an overview of the literature review research strategy, the review framework, the problem of domestic abuse, and the use of hopeful thinking. I then discussed the cognitive-based theory of hopeful thinking and the theoretical and conceptual framework of resilience.

Minimal research exists on the future of HIDAS in the United States. Hope is important for people who live in dangerous situations and unpredictable circumstances (Johnstone, 2014; Sun et al., 2014). Snyder's (2002) theory of hope provides an understanding of survivors of domestic violence experiences of hope and different factors and behavior according to their culture or ethnicity.

In Chapter 3, I provide information on the methodology for this multiple descriptive case study, the criteria for participant inclusion in the study, the questions that I asked of participants, and the data gathering and analysis procedures.

Chapter 3: Research Method

Introduction

This study's purpose was to explore HIDAS's conceptualizations of the future beyond domestic abuse through hopeful thinking. In this chapter, I discuss the research design, study rationale, and my role as a researcher. I also explain procedures for recruitment, participation, data collection, and data analysis. A discussion of the ethical procedures I used to protect participants' rights, and identities conclude the chapter.

Research Design and Rationale

My goal in this study was to explore how HIDAS conceptualize the future through hopeful thinking. Two research questions guided this investigation: (a) How do HIDAS in the United States experience hopeful thinking? And (b) What role does hopeful thinking play in how HIDAS perceive the future? I chose a qualitative approach because I felt it would be the best method for exploring the identified issues that HIDAS face. Qualitative approaches are appropriate for exploring and understanding human life experiences and social problems (Baxter & Jack, 2008; Patton, 2002). Identifying the problems relevant to this population was important before I could make any assumptions how to help HIDAS conceptualize their future through hopeful thinking after domestic abuse experiences.

I initially determined that phenomenological approach would be the most appropriate for this study. However, the participants' situations did not allow sufficient data to be collected. As such, I instead employed a multiple descriptive case study approach in keeping with my goal to develop a multifaceted and in-depth understanding

of a complex issue in its real-life context (see Crowe et al., 2011). Yin (2014) defined case studies as empirical inquiries for investigating a case or cases by addressing *how* and *why* questions. Because my goal was to gain a better understanding of how HIDAS experience hopeful thinking and the role that hopeful thinking plays in how they see the future, I determined that a multiple descriptive case study approach was an appropriate fit for this inquiry. Further, complex concepts like hopeful thinking cannot be observed externally because all people have their own unique experiences (Cox, 2012; Lub, 2015; Lund, 2012). A multiple descriptive case study approach also allows for comparing results in the specific cases and across cases, which can result in the more in-depth analysis in investigations that may encompass cases with differing contexts (Baxter & Jack, 2008).

I chose not to use an ethnographic approach because it would not have been appropriate or possible for me to live with the participants because of their domestic abuse situations. A narrative approach may have been appropriate, but I chose not to use it because this approach is time-consuming. I also did not choose a grounded theory approach for my study because of time constraints and because grounded theory encompasses a systematic generation of theory that leads to conceptual categories (Lub, 2015; Lund, 2012), which was not a goal in this study.

Role of the Researcher

Because interviews were the sources of data for this study, my role as researcher played an integral part in the study. I am a Black man who has worked and continues to work with U.S. Haitian communities, domestic abuse shelters, churches, and missions,

providing counseling and health care. I have worked as a pastor, a counselor, an advocate for domestic abuse survivors, and as a healthcare administrator and consultant. These experiences have provided me many opportunities to view the role of hopeful thinking as someone close to survivors of domestic abuse and their experiences.

Given my background in counseling, pastoring, and health care among adults, older adults, youth, and children, I have conducted many interviews, which have enriched my openness and willingness to hear and listen, observe, see, and understand the way of life of HIDAS. I advocate for women in abusive relationships and encourage self-sufficiency, financial independence, and hope.

Through this case study process, I used extensions of everyday activities of listening, observing, speaking, and reading when I interacted with participants (see Cox, 2012; Lund, 2012). Such judgments and diligence guide researchers through the case study process (Lub, 2015; Yilmaz, 2013). I had to empathize with participants' feelings and willingness when they told their stories and shared their experiences, but I could not allow my personal feelings to enter how the interviews were conducted. This study may provide a deeper understanding of what is like for Haitian immigrants to the United States who survived domestic abuse. Gaining this type of knowledge requires that researchers not take advantage of the participants in any way that they would feel used and abused when sharing their experiences (Cox, 2012).

I had to be open to how I interacted with participants and how I immersed myself in the complexity of the concept of the future beyond domestic abuse through hopeful thinking. Specifically, I had to take a fresh view of what hope means. Taking a fresh view

requires putting aside one's personal experiences to make the study about the participants, not about the researcher (Lub, 2015; Lund, 2012). Throughout the research process, I removed myself from voicing my personal experiences to participants and refrained from using my position of power as a pastor or a counselor.

I ensured that these experiences and my position of power did not influence my interpretation of what study participants relayed during their interviews. I used bracketing, as suggested by Lub (2015) and Lund (2012), to set aside my beliefs and opinions so I could focus on analyzing the experiences that the participants detailed. In addition, as Cox (2012), Lub (2015), and Lund (2012) have suggested, I refrained from doing harm or causing stress to those who choose to participate in the research study. I did not ask questions that would offend the participants or discriminate against them. I was aware of their ethnic and cultural backgrounds, which in some circumstances call for them to defer and be submissive to men (Clark, 2006; Cristea, 2012; Latta & Goodman, 2005).

Methodology

Participant Selection

Case study methodology calls for exploring personal experiences in which participants recall and verbalize their stories (Cox, 2012; Lub, 2015; Lund, 2012). Sampling in qualitative research refers to selecting individuals, units, and settings that need to be studied using purposive or criterion-based sampling to identify a sample that fits the characteristics of the research questions (Cox, 2012; Lub, 2015; Lund, 2012). The

rationale is that case study research focuses on the meaning and not on generalized hypothesis statements.

I used purposive sampling, as discussed by Lub (2015), Lund (2012), and Yiltmaz (2013), to identify Haitian immigrant women who have experienced domestic abuse. I selected participants who were willing to share their stories and their experiences about how they conceptualize their future beyond domestic abuse. According to the Migration Policy Institute (2016), U.S. Census data pooled for female Haitian immigrants in the United States between 2008 and 2012 showed that about 70% lived in Florida and New York. My focus was on women living in the Orlando metropolitan area of Orange County, Florida, because there is a significant concentration of Haitian communities there, and because I live in central Florida.

I recruited Haitian immigrant women from Haitian churches, sexual abuse centers, and outreach centers for domestically abused women in Orange County, Florida. I put up flyers (see Appendix A) in various locations around the community, including grocery stores, coffee shops, churches, and community centers, to recruit participants. Eligibility criteria for this study included the following:

- living in Orange County;
- age 18 years or older;
- comfort in speaking English, French, or Haitian Creole;
- self-identifying as a survivor of domestic abuse;
- not residing in a shelter or transitional housing;
- not living with the abuser;

- being out of the abusive relationship for a minimum of 1 year, and
- not in emotional crisis or undergoing psychological treatment.

It was important that study participants not live with the abuser, as this would not have been safe for them. Furthermore, conceptualizing the future beyond domestic abuse requires a transition from the abusing partner, so that hopeful thinking is a possibility. Marital or relationship status was not a consideration for this study; participants could be married, divorced, or separated. With the differences in the survivors' lives, a representative sample of different marital situations was helpful for discovering different themes of hopeful thinking. The final sample size was four participants. I deemed this number sufficient for data saturation, which reflects the point at which data collected repeats information gathered from study participants (see Lub, 2015; Lund, 2002).

Study exclusions can help prevent data corruption or false statements and help address different issues that may affect decision-making (Miles, Huberman, & Saldana, 2014). These exclusions support the protection of vulnerable populations and people with psychiatric, cognitive, or developmental disorders and address concerns about their capability to understand the information given and to make choices (Miles et al., 2014). I excluded individuals under 18 years of age, individuals with a diagnosed mental health disorder or who were experiencing a current crisis or emotional problem, and individuals in psychotherapy.

I gathered demographic data on age, education, and ethnicity—the last to ensure that all study participants were HIDAS. Participants received a \$25 gift card as a token of appreciation for their participation. Free counseling through women counseling center,

outreach center, or other community resource was made available to study participants, and they could access these services directly if they wished to use them.

Instrumentation

Yin (2014) identified six possible data sources for case studies: documents, archival records, interviews, direct observations, observing participants while being interviewed, and physical artifacts. In this study, interviews were the primary data source along with participant observation. I met with participants and conducted semi-structured interviews that included open-ended questions using an interview protocol (see Appendix B) to elicit their lived experiences, perceptions, and beliefs. The content from these interviews and my observations of the participants as they were interviewed provided the data for analysis. The interview questions focused on how these women view their future beyond domestic abuse and the role that hopeful thinking plays in their views. Interviews were audiotaped, and I took notes during them as well.

Before conducting the interviews, I reviewed the informed consent forms with the participants and had them sign the forms, indicating their consent to be a part of this study. The informed consent form detailed the reason for the study, why they were asked to participate, and advised them that the interviews would be recorded. I took brief notes so that I could maintain eye contact with the participants. Interviews took place in a quiet, semiprivate location, at a theological seminary in Orange County, Florida, which provided a healthy and safe environment for study participants. I followed Jacob and Furgerson's (2012) guidance on introducing interviews by describing the nature of the study.

Data Analysis

Data analyses for case studies typically fall into two categories: reflective analysis and structural analysis. In the present study, the goal was to create an exhaustive description of hopeful thinking among HIDAS regarding their conceptualizing their future beyond domestic abuse. As such, reflective and structural analyses were both followed to reach themes through analysis of the interviews with the study participants. The descriptive approach in this study was useful in reaching meanings through engaging with reality.

The seven-step method of data analysis typically translates into collecting extensive information and perceptions through inductive qualitative methods. These methods include interviews and discussions with study participants (Auerbach & Silverstein, 2003; Miles et al., 2014). The basis of this study was the survivors' experiences. The emphasis was on the importance of the survivors' perspective and interpretations embedded in a paradigm of personal knowledge and subjectivity.

I employed the following data analysis steps in this study. The descriptions of these steps are based on guidance from Auerbach and Silverstein (2003) and Miles et al. (2014).

1. Read a description of study participants to gain a feeling of the sense and meaning of their experiences.
2. Extract statements according to the research questions.
3. Accurately replicate the research data, such as direct statements from participants.

4. Analyze substantial statements.
5. Articulate the meaning of the statements to create themes.
6. Group similar themes and organize them into categories.
7. Integrate data analysis results into a comprehensive description of the case.

After I completed these steps, I reviewed my findings. This step is conducted to strengthen data validity (Auerbach & Silverstein, 2003; Miles et al., 2014).

Weaknesses in case study analysis can reflect how participants articulate and provide information (Auerbach & Silverstein, 2003; Miles et al., 2014). The language and terms used may be obtuse or difficult; and knowing that each participant suffered and struggled with domestic abuse and each had a different story and different outcome (Auerbach & Silverstein, 2003; Miles et al., 2014). Therefore, I sought to describe rather than explain, starting from a perspective free from hypotheses or preconceptions but that emphasized the importance of clear interpretations and meanings placed on collected data, in keeping with guidance from Auerbach and Silverstein (2003) and Miles et al. (2014). In so doing, I conveyed the experiences and perceptions of HIDAS from their perspectives without assumptions.

Case study research generates many interview notes and tape recordings that are used in analyzing data in these studies. This analysis is messy because the data are not neat or organized (Auerbach & Silverstein, 2003; Miles et al., 2014). I first read the interview transcripts and notes to get a feel for what the participants said. This allowed me to identify the key themes and issues in each response. I then constructed this aggregated data by using a mind map and stick-on notes.

I looked at themes among participants. I extracted the comparison of data entries and identified the relationship between different themes and factors, reflecting guidance from Auerbach and Silverstein (2003) and Miles et al. (2014). I developed the significant statements and grouped them in themes. I then used the significant statements and themes to compose descriptive experiences of hopeful thinking.

I used narrative summaries produced by the participants during the interviews. The purpose of narrative summaries is to condense the interview material into shorter stories. Notation of each interview question and response was accomplished systematically to capture the essence of the stories and the participants' experiences of domestic abuse, as suggested by Lub (2015) and Patton (2002).

Issues of Trustworthiness

Credibility, transferability, dependability, and confirmability are the qualitative method's equivalent for internal validity, external validity, reliability, and objectivity and are a part of establishing the trustworthiness of qualitative studies (Lub, 2015; Lund, 2012). When reliability is set up in qualitative research, then credibility is represented by internal validity and the congruence of the findings describing the reality (Lub, 2015; Lund, 2012). I used several strategies to establish credibility in this study, including triangulation, log engagement, debriefing, member checking, and saturation.

Triangulation protects against bias and ensures credibility and trustworthiness (Lub, 2015; Lund, 2012; Yilmaz, 2013). The basis of techniques that may produce credible findings and interpretations include four modes of triangulation: theories, sources, methods, and investigations (Lub, 2015; Lund, 2012). For this study, I used

transcribed interviews to validate findings from different data sources, and I compared my findings across transcripts.

A prolonged engagement with study participants is an element of credibility and helps to establish trust with participants (Lub, 2015; Lund, 2012). To increase credibility, I engaged the participants directly, which helps build researcher–participant trust (Lub, 2015). Transferability implies the extent to which results from a study can be applicable in similar situations or with similar populations (Lub, 2015; Lund, 2012; Yilmaz, 2013). The study took place in a particular context, but individuals may decide what they think about how the study findings relate to their life experience (Lub, 2015; Lund, 2012; Yilmaz, 2013). Dependability reflects the reliability, trustfulness, and consistency of qualitative studies (Lub, 2015; Lund, 2012). As far as confirmability, it reflects objectivity. Each time a thought came to mind, I journaled it. My journal was a reflective journal in which I put everything that came to mind, which offered confirmation during my research process (Lincoln & Guba, 1985). It is also up to others to consider how to extend the study or may apply to various other findings (Lub, 2015; Lund, 2012; Yilmaz, 2013).

Ethical Procedures

Ethical considerations for this study included how I contacted and recruited participants as well as how I collected, treated, and protected the data. Before conducting the study, I sought approval from Walden University’s Institutional Review Board. Participant recruitment did not begin until approvals were in hand.

I asked all participants to sign a consent form, which specified their role in the study and how I would protect their identities. Participants had many opportunities to ask any questions they had regarding the nature of the study, the questions I might ask, and the methods I would use to protect their identities. They had sufficient opportunities to decide whether to participate or not.

The consent form contained simply worded language so that potential participants could easily understand the study's focus and purpose. It stated that I would treat everyone with respect and with the utmost consideration of each participant's feelings and experiences. In it, I also offered to debrief participants about the purpose of the study and how the findings would be used.

As a study of this nature could cause participants emotional stress due to recalling past events, I watched carefully for signs of such stress during the interviews and gave participants ample time interviews to pause, step away from their memories, and collect their thoughts. I also prepared a list of resources for counseling and emotional support. Information regarding the list's availability was in the consent form. Study participants could directly access all resources should they wish to do so.

As the researcher for this study, I was obligated to respect participant rights, values, needs, and desires. I protected all participants by assigning them a pseudonym to use in the final aggregated results. I did not reveal the research site before or after data collection.

All participant information was confidential. I stored and protected all collected data (i.e., verbatim transcripts, reports, data summaries) in Word or Excel documents on a

password-protected computer that only I had access to. The computer was kept under lock and key in my office. I stored the audio recordings in a password-protected file on my computer. Participant identifications and data were not linked in any way. I will destroy all raw study data after five years following study completion as per Walden University guidelines.

Summary

In Chapter 3, I explained the study's research design and rationale, the sampling procedures that identified participants, and ethical concerns procedures for protecting participants and respect their rights. I also described how data were collected, analyzed, and interpreted. In Chapter 4, I present the analysis and interpretation of the data gathered to explore hopeful thinking among Haitian immigrant women who survived domestic abuse.

Chapter 4: Results

The purpose of this multiple descriptive case study was to explore the phenomenon of the role of hopeful thinking in HIDAS's conceptualizations of the future beyond domestic abuse. When survivors rely on active hope-based interventions, it may transform their consciousness by sustaining their hopes and capabilities. Hence, those collected themes will be useful for me in this study in developing effective hope-based interventions. I hope that these interventions may help HIDAS develop a unique way of life and sense of independence, financially, physically, and mentally.

The questions formulated to guide the proposed inquiry were, (a) How do HIDAS in the United States experience hopeful thinking? And (b) What role does hopeful thinking play in how HIDAS perceive the future? In this chapter, I present an analysis and interpretation of the findings from this case study inquiry. Conclusions are presented in Chapter 5.

Setting

I chose to conduct the interviews for this study at a theological seminary in Orange County, Florida, which provided a healthy and safe environment for study participants. I felt that conducting the interviews with HIDAS and having a set of counselors ready to help case study participants who needed assistance was better for the study. I used one office, furnished with a couch, a chair, and a desk, for the interviews. The office was an adequate and a comfortable place to conduct the interviews.

Data Collection

Dates and times for all interviews were determined based on the participants' schedules. As this project's sole researcher, I conducted the interviews myself. Each open-ended interview lasted between 25 and 30 min. I had a counselor on hand to help me interpret and translate participants' interview responses. He was a Haitian American mental health counselor, spoke Haitian Creole, and translated my questions directly to the women and their responses directly to me. He signed a confidentiality form.

All interviews were audio recorded. I also took notes as I was conducting the interviews. I reviewed and completed the demographic data sheet and debriefing form after I ended the interview session. I offered to participants copies of different forms to review, including, consent, interview, and demographic forms. I then asked participants if there was anything else that they wanted to add, but none added anything else. I did not make any changes in the data collection process throughout the sessions as I mentioned in Chapter 3. There were no significant issues during the interview sessions; I thanked each study participant at the end of each interview for choosing to participate in the study.

Demographics

Participants in the study included four HIDAS. The sample participants reflected differences in demographic characteristics including age, education, job status, income, the city of birth, and some children. Regardless of differences, the study participants had characteristics in common, which included living in Orange County for at least two years, is a Haitian immigrant woman, and being divorced. Also, all participants had left their abusers at least one year before the study. Participant demographics are shown in Table 1.

All study participants were assigned pseudonyms to protect their identities, as shown in Table 1. All participants reflected the same mindset and resilience against domestic abuse.

Table 1

Participant Demographics (N = 4)

Characteristic	Participant			
	Aline	Betty	Carole	Denise
Age (in years)	43	41	28	35
Occupational situation	High school Certified nursing assistant	High school Housekeeper	Some college Custodian	College graduate Substitute teacher
Occupational planning	Keep job	Promotion to supervisor	Will change job	Will change job
Primary income	Job	Job,	Job, Women, Infants, and Children (WIC)	Job, Temporary Assistance for Needy Families
Current marital status	Divorced	Divorced	Divorced	Divorced

I next present each participant's story. All demographic information in each story is presented as current when the interviews were conducted. The stories are presented in the order in which I conducted the interviews.

Participant Stories

Aline's Story

Aline is 43 years old and divorced. She works as a certified nursing assistant. Aline has a soft smile, and she spoke in Haitian Creole and a little bit of English during the interview. As noted in Chapter 3, I understand the language fairly well, but I needed to have the counselor translate to make sure that I completely understood what Aline was saying. She gazed at me and said with her forced English, "I am peaceful now, and I work so hard" when asked how she can describe her life today. Aline is not happy about how things have turned out for her. However, she has hope in God, and she puts God before anything. She hopes that one-day things will turn out right for her. She has struggled a lot since she got to America.

Aline has a strong will as she talked about how resilient she was and focused on her future and that of her children. The abuses came as a shock to her. She started to have problems with her abuser, and things did not seem to work her way no matter what she did. Her hair started to break down. She could not even pray to God anymore as she used to. After she separated from and divorced her abuser, she continued working to help her children have a safe and pleasant life. She did not talk much. She spent most of her time stressing about everything.

Aline remembered that it was hard to leave her abuser because she did not know how. One day she went to church for the overnight prayer, noting, "I wanted God to change my life situation." She also stated that she heard a voice telling her "Don't go to the bedroom tonight." She never entered the bedroom, and her abuser never went to look

for her or come to her. A month passed, after which she said to herself that she would look for help and she went to court for a divorce. The abuser begged her to stay with him, but she did not want to go back to the situation she had, let alone with the abuser.

The moment that Aline felt hopeful was profound. She enjoyed her children, she had to hope for a better life for them, and she had to work harder than before. She was hopeful when her faith did not falter, and she spent time in prayer. She said she had hope in God because with God nothing is impossible. She reported that in God things become easy. "I don't know how to specify everything," she said with a smile, but with a sad little look, but "only with faith, and only with God, because without God I will lose," she added. She said that child support is not helping at all, but with her job, she is managing to pay her bills.

When asked how she felt when reflecting on her experiences while living with the abuser and how she felt presently, Aline shook her head in agreement but looked confused as if she did not understand my question. She and I both looked at the counselor for help. The counselor then explained the question, and then I saw Aline get comfortable and adjust herself on the couch. She said,

The truth is, I feel good. I have peace. And it is better to have a morsel of bread than to live with the abuser. He insulted me and broke things in front of the kids; he humiliated me many times, I felt hopeless. I was afraid to be killed one day. He choked me many times in front of my children. Who does that?

She continued with tears in her eyes, and the counselor handed her a tissue. "So my oldest son told him, 'You need to stop now, stop hitting my mom.' Then he said to my

son, ‘Let her come, and I will kill her.’” At that moment, Aline decided to leave him and told him she would divorce him. He then told her that he did not marry her to divorce after, but Aline had a choice to make, and the choice was to leave the abuser. She could not live in this situation.

I nervously asked Aline about her relationships with her family members after she left her abuser. She looked at me, this time not because she did not understand me, but because she saw that I was a little nervous. Wiping her tears, she said, with a quirky smile,

He spoke to me everywhere; he stopped me from seeing other people, including my family. I was isolated. I couldn’t talk to any member of my family, but now I don’t have a problem with my kids, not even my family.

Then she added, “My ex-husband doesn’t have contact with my children anymore.” Aline also said that her father told her that if she reached her abuser again, he would end up killing her and the kids. The abuser had tried several times to tarnish her reputation by insinuating horrible and hateful things against her.

I asked Aline how she could share her hope with other people who are going through the same situation she did. She directly responded as if she was expecting or knew what my question was and said, “If you have God in your life, things will get better. You need to pray to God. My situation worked out not because of me, but because of God; please live by faith.” Then she added, “People need to place their hope in God that is all.”

I asked each participant to share anything that I did not ask or to add anything that they wanted to help with the study. Aline said, “Fasting, praying are good ways to be hopeful because God can do anything and God will never leave you in that situation.” She added, “I will encourage the person to have God in her life. I will always tell them that.”

Betty’s Story

Betty is 41 years old, divorced, and has three children. I asked her to talk a little bit about herself and to describe her life today after leaving the abuser. She asked the counselor if she could speak in Haitian Creole because she is still learning English and felt more comfortable speaking her native language. The counselor looked at me, and I said it was fine for her to speak in the language she feels comfortable. Then Betty nervously smiled and said, “I am working now, and I go to church, and I am very busy with my kids. I do think a lot about Haiti, you know it is my country. I have days off that I relax a little bit.”

I asked Betty about the moment when hope affected her, and I asked her to share a little bit about moments in which she wanted to lose hope. Betty got emotional; she started to cry. The counselor handed her a tissue. She then continued, “I was suffering. My husband beat me all the time and cursed me out. I was troubled, and I was so stressed. I don’t want to explain in detail things, but it was not nice.” That is fine, I said, you can continue talking about what you think is suitable for you and you can tell me about things that give you hope in life. “Yes, I don’t mind,” she confidently said.

I had more stress before, but not today. I don't have anybody to beat me or curse me or give me troubles. I have hope because of my counselor, and I focus on my kids for their future. I have to live for the future, not for the past.

Betty then nodded, agreeing with herself on what she just said, and continued with her narrative.

I lost hope. I was in the unpleasant situation. I tried suicide couples of times by driving my car to bridge in an attempt to kill myself, but because of my counselor, I overcame my pain. I hoped again because God is on my side, I am not sick, and I will still live.

Betty paused again, and then continued. "I had a terrible experience and my family, and I have three beautiful children."

I asked Betty if her relationship with family members changed after divorcing her husband. She responded, "My family always there for me, and even my husband's family counsel me, but I am the one who doesn't call or talk to them. My family and I always talked." Betty hoped to share her story to help other individuals in the same situation of domestic abuse, to help them not to lose hope. She noted,

For instance, one day at work, a lady came with a swollen face. I knew exactly what was going on, so I told her not to let him do that to you. Look at me; we have a job, don't let him beat you up or mistreats you. You know, he won't kill you. I didn't think I will get out of my situation, but I did. She gave some excuses at the end why she is not leaving yet.

Betty paused a moment, and then she continued, "You know, we have a life to live."

I calmly asked Betty if there was anything she wanted to add to her story. She said, “No, but I wouldn’t let anyone live the kind of life that I lived. I will tell anybody to not live like this. I am good than before. Even though I have more bills now, but I am okay.”

Carole’s Story

Carole is 28 years old and a divorced mother of three. She works as a custodian. She is a strong woman, and her strength and will to survive got even stronger after her husband beat her often. She said she spent time in prayer, but not like she used to before the abuses. “I was so stressed out and so depressed” she lamented. “I got some counseling mentally and socially from my favorite counselor, and I got some help from my family. I have an objective, a goal that I need to fulfill.” Carole’s ex-husband did not allow her to go to school. He did not even let her find a job, or go out socially, which restrained her mentally, spiritually, and socially. She could not do anything. She received the help she needed from counseling. “Now I work, and I am going to school to be a nursing aide.”

Two days after Carole gave birth to her last child; her ex-husband verbally abused her and told her that he did not want more children because kids are not polite. He accused her of cheating, and said the new baby was not his. She supposed to make sure not to get pregnant again. Carole said, “In October 2014, I received a message from someone. My husband was so mad, he pushed me and insulted me from 10 p.m. to 2 a.m. I felt so bad, I didn’t say anything, but I just recorded him.” As far as the relationship with family members, Carole said,

I don't have any relationship with his family. He had told them lots of terrible things about me. My family has been there for me, supporting in many ways; mostly my dad and my mom, but friends help me too.

Carole said that her experience was terrible and not all that she went through was good, but "I would encourage anyone never to lose hope, and you need to accept the help when it comes, then seek for counseling." She added, "Keeping a supporting cast is important to keep hope alive and praying every time is also important." She believes that "God will show you the way, and he will send someone to help you."

When it comes to feeling hopeful, Carole said, "You need to direct people in need into the right direction." Then, with a confident smile, she added,

Many people when they are in the church, they need help. The church supposed to put counseling as a part of the worship and services of the church open to all members so that abuse doesn't have to repeat over because help needs to be spiritual, mental, and physical or social.

Denise's Story

Denise is 35 years old, newly divorced, and the mother of three. She is now living with her parents, helping them after they both got sick. "My life is great and peaceful," Denise said with a smile. Then she added, "I'm a caregiver to my parents. I have devoted my time to myself, to my children, building my future and that of my children." Denise seemed so confident, and she wanted to make sure that I got her narrative. She continued,

The hope that I have is not from me alone but God's. I believe in God and Jesus Christ; that is where my hope comes from. The truth is that I didn't even know that I was in an emotionally abusive relationship.

When asked about the moments when she felt hopeful and kept her hope alive, Denise said, "I was not asked to save my marriage, things were not changing, even though when I told my abuser that I was not feeling well, I thought that my abuser would care for me or change his ways, but nothing happened." Then she added, "I do read inspirational books about life, knowing how to grow, how to have a relationship with others, and learning how to forgive." I then asked Denise to tell me about the moments when she did not feel hopeful. She said,

Well, when I realize that the cheating was going on, and instead of recognizing his wrong doing, he started to blame me as if I was the one cheating on him. I wasn't doing any of that. It was devastating for me to even think about that.

Denise looked at me, laughed aloud, and then said, "Even all these are going in my life, I am happy though. I don't have to deal with all those stresses. And I don't wish that on anybody. I find myself crying sometimes, but it what it is." She paused a little, and then continued, "My family and I have a good relationship. I have gotten good support from them, and nothing has changed."

I asked Denise to share her experiences that could help others who are going through the same thing. Denise looked at me and said,

It is not easy, but for hard, and it feels like that it is a dead zone. Moving forward, there is hope. They can talk to other people, and most of the time, there are

always people who understand you. My hope was relying on God to give me strength and good family members to support me, seeking profession helps anything.

Denise got an education, and she knows what she wants to do. She is teaching now as a substitute teacher, and she wants to do more for her life and her future. She believes that most people place their home in God, in their family, and their children. When I asked Denise how anyone could have hope, she responded, “You need to believe in yourself. You know, to believe that you can do remarkable things for yourself. You need to have self-confidence and be independent.” I asked Denise if she had anything else to add. She said, “No, but hopeful thinking is an important thing.” Then she smiled.

Data Analysis

After completing the interviews, I retrieved data from the digital recorder, transcribed the data, and saved the transcriptions on my computer. I then reviewed the transcripts for rich, explanatory data based on the participants’ experiences. I generated themes from the collected data. I reviewed and edited each transcript and omitted some inappropriate words (Davidson, 2009).

I started the analysis process by detailing the experiences of each survivor I interviewed. I then followed up with individual textural-structural descriptions of all participants to create a composite textural-structural description of the essence of their domestic abuse experiences. I analyzed each participant’s data and created a document to reflect the preliminary findings (i.e., description of texts and structure and essence statement). Recording the interviews allowed me to understand how study participants

conceptualized hopeful thinking and its role in their perceptions of the future. I valued each participant's statement as they described their experiences of hope. I read each survivor's verbatim transcription several times, and I selected different statements. I did not try to change them in any way. I turned the statements into themes for each survivor. From the thematic analysis, I synthesized the description of each survivor's experiences into a composite description of hopeful thinking through intuitive integration.

The steps I took resulted in 21 themes: courage, learning new skills, faith, culture, family, giving up, self-love, hopefulness, setting positive goals, lost hope, determination, optimism, forgiveness, false hope, trusting in Divine Power, supportive relationship networks, loneliness, finding hope in children, resilience, and self-esteem. I selected seven as the most relevant as they had similar characteristics. These themes, as shown in Table 2, were hopefulness, setting positive goals, lost hope, trusting in Divine Power, supportive relationship networks, resilience, and self-esteem. Table 2 also shows the frequency of the mention of each theme in the participants' narratives. In the following section, I discuss how the themes emerged in the narratives from each HIDAS.

Table 2

Frequency of Meaning Units or Themes Among Study Participants (N = 4)

Theme	Participant			
	Aline	Betty	Carole	Denise
Hopefulness	5	2	3	6
Setting positive goals	7	6	6	7
Lost hope	3	5	2	3
Trusting in divine power	7	4	8	9

Supportive relationship networks	8	8	7	9
Resilience	7	6	5	8
Self-esteem	3	4	5	4

Results

Hopefulness

Optimism can be described as how one explains what happens in life to oneself (Seligman, 1991). Hopefulness means overcoming setbacks through one's efforts and abilities (Seligman, 1991). Carole said, "I'm always optimistic, and I want to make good choices for me, my children, and my future. Being a good mother, finish my education and have a good career." Betty shared her thought about being optimistic: "I still feel hopeful every day." Aline said, "Don't give up, you need to be strong." Denise said, "I don't have to worry about drama. I feel stress free and no drama anymore. I feel free and happy."

Setting Positive Goals

Hope shows ways to reach goals. Snyder, Irving, and Anderson (1991) defined hope as "a positive motivational state that is based on an interactively derived sense of successful, (a) Agency (goal-directed energy), and (b) pathways (planning to meet goals)" (p. 287). Goals are the anchors of hope theory; they offer the endpoint and motivate positive action sequences.

All HIDAS in the present study spoke in detail about setting positive goals, both when they were with the abuser and when they left the relationship. Aline said that her

goal was “to leave him when I can.” Betty also talked about setting up her goal to save money before she could get out the abusive relationship. For Carole, “I made up my mind, and I never looked back again.” As for Denise, she was hoping that the abuser would leave.

After leaving their abusive relationships, all survivors felt liberated and free to set their futures. They all believe in not losing hope no matter what comes. They spoke about the goals that they set relating to their children. Aline talked about making sure she would be the one providing for her children. She self-talks and works on moving away from negative thoughts. She also worked on affirmations such as “I am fine, I can do this or that. Yes, I can.” Aline believes that “hope is things that are going to get better and all right.”

Lost Hope

Hopeful thinking theory proposes a strategy to claim back lost hope (Simpson, 2000). Losing hope, according to Ong, Edwards, and Bergeman (2006), is the result of not being able to sustain hope when facing vulnerable situations, pain, and loss. Many people have experienced extreme trauma and stressful situations, which can rob them of desires to engage in hopeful manners (Simpson, 2000). HIDAS in this study described losing hope as taking away their happiness and becoming vulnerable, which negatively affected their children’s hope as well.

“Things that I wished for in my life, he took them all away from me,” said Aline. She said her abuser took away her happiness and she lost hope. Then she said, “I couldn’t go on.” Betty spoke of experiences of stress as “I did not want to go anywhere, I was lost

and alone.” Carole talked about situations of vulnerability where “I could not go anywhere. I saw my life just drifting.” Denise said, “I was so stressed, and I felt depleted of my hope. I just felt like my spirit was corrupted. I was not sure of my future anymore.” Aline also said, “I wondered how I got here.” Betty stated, “Some women in as domestic violence situations do not see the light at the end of the tunnel.”

Trusting in Divine Power

Snyder (2002) described hope as lifting our spirits and reminding us of possibilities. Snyder, Rand, King, Feldman, and Woodward (2002) envisioned that hope enhances the quality of life through positive psychology that focuses on human strengths. All HIDAS spoke of how faith in God gave them strength to leave their abusers. “I don’t know who else there is to put my hope in but God,” said Denise. “Believing in something better than myself to carry on,” Betty said. Carole said, “God . . . pass me a hand.” Aline said she would have left her abuser sooner if she had put her trust in God. Carole said, “Hope is God, and God is my keeper, and I put my trust in Him.” Aline also said, “I know God listens to my prayer . . . I prayed for God to change my husband, if not then I prayed that God gives me the strength to leave him.” Betty then said, “I know that without faith I think it would be a dark life.” All survivors believe that trusting in divine power is a good thing for their independence and survival.

Supportive Relationship Networks

Creamer et al. (2009) reported that people who had closer relationships with others became attached to caregivers or to people who support them have higher hope

from childhood to adulthood. Sometimes, simply having friendships that are more intimate provides bonds when going through challenging times (Creamer et al., 2009).

Aline described her relationship with her family as rocky. Even though family members were there to support her, they were isolated. Her father told her if she went back to her abuser, he would kill her and the children. However, Aline has people at the church who support her, and she feels comfortable with various services. Although Denise experienced family support, she also experienced some judgment from her family. “They felt that I should have left a long time ago.” Betty has support from her family and even her abuser’s family, but she chose not to talk to them. Carole said that she always has friends around to help her. Denise is happy that she has excellent support from her family and that she still living with her parents with her children. “It is a good supporting cast.”

Resilience

Rutter (2012) emphasized that bouncing back from life’s adversities, which reflects resilience, is associated with a life full of successful experiences. Snyder (2002) noted that hopeful and resilient people may or may not have experienced goal attainment. Not all HIDAS talked about resilience. Aline said, “I bounced back up quickly because of my kids. I don’t think life stops for us until we die.” Betty said, “I didn’t seek help because I thought I didn’t need it. I was ready to commit suicide, but until my counselor intervened for me.” Betty’s comment suggested that an accumulation of different life experiences could provide her a sense of being able to bounce back from her life adversities.

Self-Esteem

Focusing on improving strengths, including those of hopeful thinking, can influence self-esteem and the meaning of life (Cheavens, Feldman, Gum, Michael, & Snyder, 2006). The survivors stated that their experiences in domestic abuse relationships lowered their self-esteem, which they said also isolated them. Some survivors believed that their abusers stripped them of their self-esteem. Denise said, “My self-esteem had been tested.” Then she added, “I will not allow anyone to break my self-esteem.” Betty spoke of abuse experiences, as “I was isolated because I was embarrassed. It was humiliating.” Denise said, “I demeaned myself staying in my marriage.” Study participants touched on how abusers pulled down their self-esteem and that some abusers felt empowered by the abuses. Aline emphasized how her self-esteem was tested, “If they talk so bad about you, then you think low of yourself.” Since she left her abuser, Aline said, “I feel so independent now, and I feel confident.” Carole said, “I am just at peace with myself . . . and I am happy.” Betty explained, “My self-esteem was a little lost, and it was low.” Carole said she “felt like nothing, and I was worthless.”

Evidence of Trustworthiness

To set up the concept of trustworthiness of a research study, one needs to use credibility, transferability, dependability, and confirmability, which are the qualitative equivalents for internal and external validity, reliability, and objectivity (Elman, Gerring, & Mahoney, 2016). I next discuss the concepts of trustworthiness and their application in this study.

Credibility

Credibility reflects internal validity (Elman et al., 2016; Lincoln & Guba, 1985). In qualitative studies, credibility means ensuring that accurate descriptions of the participants' perspectives and experiences are made. Hence, threats to credibility lie in accurate capturing how participants make sense of their experiences.

I did one interview with each participant. There was no need for a second interview as I achieved saturation when new themes emerged from the analysis of the survivors' data (Denzin & Lincoln, 1994). I found themes that described survivors' experiences and beliefs of hope. Even though my study was changed to a multiple descriptive case study, over the course of the last interview, I reached a point of redundancy, which triggered the completion of collecting data (Lincoln & Guba, 1985).

To achieve further credibility, I worked directly with survivors and the counselor who was also acting as an interpreter when I did not understand what the participants were saying or to clarify my question to their language of birth, Haitian Creole. I collected the interview data myself. I engaged in a longer engagement approach to the data that further assured credibility of the analysis.

Transferability

Transferability reflects the scope to which the collected data and conclusions may apply to other contexts, scenarios, or with other study samples (Elman et al., 2016). I offered the description of the study participants, the study setting, and procedures in detail in my discussion of this study. I also provided detailed demographic situational descriptions, data analysis, and interpretation. Such descriptions help other researchers

reach their own conclusions about the dependability of the study data and if the results may transfer to other contexts of interest (Lincoln & Guba, 1985). I will keep the study data for a minimum of 5 years, which will allow other researchers to review them if interested. However, generalization of study findings is limited as this study was limited to HIDAS living in Orange County, Florida.

Dependability

Dependability reflects the reliability, trustworthiness, and consistency of qualitative studies. I recorded my data collection to show dependability regarding my analysis and result, and I organized the study in effective ways. I recorded the participant interviews and thematic summaries as electronic documents and saved them in a password-protected file on my computer.

I kept a reflective journal throughout the study on my decisions and thoughts regarding the study process. Through open-ended interview questions, I created meaning through my interaction with the participants. Providing substantial documentation of procedures and meaning created through my interactions with the participants, supported dependability of my data collection and findings (Lincoln & Guba, 1985).

Confirmability

Confirmability reflects objectivity (Lincoln & Guba, 1985). I kept a reflective journal where I put everything that came to mind, which provided confirmability during my research process. Each time a thought came to mind, I journaled it. My reflexive notes taken during my research process helped me capture and document my thinking and biases. Hence, I was aware of my biases. I have experience working with domestic

abuse survivors, have advocated for them, and have given them a sense of hope. I kept my mind open, and I was flexible. I listened carefully to the participants' stories, recorded and wrote their narratives, and tested original themes as they evolved. I avoided using my knowledge on the subject by keeping all collected data original.

Summary

The purpose of this chapter was to summarize and discuss the study findings from data I collected during open-ended interviews held with four HIDAS who live in Orange County, Florida. I organized the interview information in four ways: demographics, personal stories, emerging themes, and discussion of these themes. I presented verbatim excerpts from the interviews that reflected the HIDAS's experiences about hopeful thinking. I captured the meaning of hope through my interaction with the participants and their stories. In Chapter 5, I present a discussion of findings, recommendations, and conclusions.

Chapter 5: Discussion, Conclusions, and Recommendations

Introduction

This study's purpose was to explore HIDAS's conceptualizations of the future beyond domestic abuse through hopeful thinking. My goal was to develop a greater understanding of hopeful thinking in survivors of domestic abuse and how hopeful thinking helped them regain and build self-esteem, set goals, and create better lives for themselves following the abuse. Two research questions guided this investigation: (a) How do HIDAS in the United States experience hopeful thinking? and (b) What role does hopeful thinking play in how HIDAS perceive the future?

In Chapter 5, I discuss the findings from this descriptive case study. I begin with an interpretation of the findings from the interviews. Next I discuss study limitations. I then end with recommendations for practice, recommendations for further research, and implications for social change.

Interpretation of Interview Findings

I identified a gap in the literature on the role of hopeful thinking in how one perceives the future, specifically among domestic abuse survivors, and even more specifically among HIDAS. To address this gap, I collected interview data from four HIDAS who talked about their experiences of domestic abuse. Through data analysis, I examined the role of hopeful thinking as it relates to conquering loneliness and abuse in order to achieve an optimistic state. All study participants experienced relief and even joy in leaving their abusers, and their responses to the interview questions revealed their lived experiences of domestic abuse.

I originally identified 21 themes from the interview data. From these themes, I selected seven as the most relevant: hopefulness, setting positive goals, lost hope, trusting in Divine Power, supportive relationship networks, resilience, and self-esteem. In the following discussion, I reflect on these themes as they relate to the key questions of how HIDAS in the United States experience hopeful thinking, and the role hopeful thinking plays in how they perceive the future and how they relate to the findings from the literature review. Suggestions for how these findings could be used to help domestic abuse survivors are intermixed in this discussion and recapped later in this chapter.

Hopefulness

Survivors talked about their experiences of hope that awakened their desire for a different direction in life and the joy that followed. Betty said, “Now I’m in a new world; I have a new life. Something happened, I was a new me. It was a wonderful feeling” as she talked about her experience leaving her abuser. Denise talked about having her “new self” back after she left her abuser; she has control of her life now.

While two of my study participants stated they believed that hope was a waste of time, they nonetheless continued to hope anyway. The others believed things could change or be different through hope no matter the situation, reflecting findings from Sun et al. (2014) and Smedema et al. (2014). Survivors were positively motivated by hope. The participants’ narratives indicated they had experienced hopeful thinking as a positive motivational state when they were still living with their abusers, which continued after they had left their abusive relationships. The participants talked about how their hope helped them envision their future goals, which required motivation while in an abusive

relationship. Survivors stated that wanting to provide for their children kept them motivated when they felt down. Others spoke of hoping that one day their abusers would change their abusive ways. Another survivor said that just being out of her abusive relationship motivated her to reach her goals for the future.

Survivors were aware of their self-advocacy for autonomy and self-determination. The participants self-advocated for their freedom and their choices over living with their abusers and took control of their life and their future. Interventions that focus on how to increase hope effectively (as opposed to false hope, which can lead to desiring goals that may be unattainable or unrealistic; Snyder, 2002; Snyder et al., 2002) among survivors may position community-based mental health providers to help survivors feel important, valued, and empowered because of hope.

All the HIDAS in this study had different experiences when it came to hopeful thinking. They wanted to be free from violence and abuse. They hoped to get better and do better for themselves and their children, and they expected to start their lives over and do things differently than how they did them before.

A hopeful thinking strategy could work for one survivor but not for others (Snyder et al., 2002; Snyder, 2002; Smedema et al., 2014). Survivors might possess pathways and agency or lack both. Or, they may only have one of the components of hope. Individuals with high levels of hope are more capable of reaching their goals than individual with low levels of hope (Coduti & Schoen, 2014; Snyder, 2002; Snyder et al., 2002).

Setting Positive Goals

The HIDAS interviewed for this study had different views, dreams, and goals for their future. They all wanted to live a life free of domestic abuse, and they each had an epiphany about leaving their abusers. They identified their goal to leave, then they planned to leave and were motivated to leave based on their thinking of having a different life without abuse. Then, they achieved their goals, and they became confident in the direction of life they were taking to better their future. They also did not have to worry about being lonely when they reached their goals and their new life situations.

These findings imply that the HIDAS focused on their goals, in this case, to leave their abusers (goal behavior), they planned to achieve their goals (pathway thoughts), and they were motivated to reach their goals (agency thoughts) by focusing on their future. After they left their abusive relationships, they believed that hope was the drive for their resilience; they want to bounce back from all the pains and abuses they sustained. Hence, hope helped them maintain a positive attitude and obtain positive goals.

For domestic abuse survivors, not having a vision for the future can negatively affect goal behavior and reduce their ability to move away from their abusers. Survivors need to have a vision and be able to set goals that they can accomplish or achieve. Without positive goals, they are more likely to go back to their abusers.

These findings parallel those from other researchers such as Coppock, Owen, Zagarskas, and Schmidt (2010), Geraghty, Wood, and Hyland (2010), Herman (1997), Snyder (2002), and Yalom (2005). Thoughts move an individual toward achieving goals (Snyder, 2002). Coppock et al. stated that a single therapy session could increase a

client's thoughts of hope and promote change. Geraghty et al. discussed hope agency that sustains intervention behavior for self-help therapy. Herman stated that survivors might be motivated to share their experiences in the hope that they can help others.

As I found in this study, survivors who talk to other survivors about their domestic abuse experiences tend to motivate them to express their beliefs through faith and prayer and strengthen their hope for a brighter future. Survivors, then, experience the positive emotional state of confidence after sharing their experiences and keeping changes in their lives after domestic abuse. Hope-based intervention is an approach that could be used to help promote social action by survivors connecting with other survivors. Yalom (2005) stated that a common hope factor in psychotherapy is a recognition of other individuals' accomplishments because doing so builds up hope for their improvement.

I concluded that psychologists or therapists must identify survivors' problems and help them reach their goal of leaving their abusers and living their lives without worrying about abuse. Another obstacle to discuss is how these survivors would cope without their abusers. Addressing this obstacle can also help survivors envision setting goals to help them become self-sufficient and independent.

Although the interpretation of findings clarified survivors' experiences of domestic abuse, the findings are not meant to solve the larger problem of domestic abuse. Rather, they are meant for use when working with survivors. The findings I have discussed in this section showed hope's role in how to set goals and how to reach them, which might help survivors reduce the desire to return to abusive relationships.

Lost Hope

Most people face obstacles when they are trying to achieve their goals, and they may feel discouraged (Snyder, 2002). Trauma often affects survivors' sense of self-worth and their ability to tend to their needs (Taormina, 2015). Traumatic stress depletes hope, leading to self-denial, blaming oneself, and believing that one deserves the punishment (Boden, 2013; Johnstone, 2014; Taormina, 2015). Study participants also described different problems and challenges they encountered during their abusive experiences that sometimes prevented them from reaching or achieving their goals.

Hope, or hopefulness, reflects goal-directed thinking, which includes goals, pathways, and interventions (Patrick & Hagtvedt, 2014; Sun et al., 2014; Tam, 2014). Hence, to be stuck in a state of denial and false hope may cause problems for HIDAS because hope is to want, believe, or anticipate a positive outcome, and false hope is an irrational hopeful belief when there is no indication of possible change (Boden, 2013; Johnstone, 2014). This false hope can result in abandoning the plan for change.

Hope can be unrealistic when false hope for change influences one's decisions to stay in a situation or relationship that can cause stress or trauma (Bernardo, 2013; Sun et al., 2014). On the other hand, people who hope or anticipate a positive outcome might change their situation and escape further or potential harm (Bernardo, 2013; Sun et al., 2014). Again, when HIDAS experienced trauma, their strategies toward a goal were limited, which could have led to the unsuccessful agency and fewer pathways; that is, losing hope. However, the HIDAS did not want to give up. Instead, they used self-

determination and self-regulation (Snyder, 2002) to face their realities and challenges and kept moving forward.

Trusting in Divine Power

Hope for HIDAS can take many forms when conceptualizing their future beyond domestic abuse and can be shaped by social, psychological, and spiritual factors. Religion plays a significant role in the Haitian community (Kwan, 2010; Wnuk & Marcinkowski, 2014). Hence, because it is one of the strongholds of the Haitian community, religion plays a vital role in the lives of HIDAS.

In the present study, religion wielded a positive influence on psychological health by helping HIDAS find the meaning of life through faith. Finding the meaning of life through faith can facilitate hope for a better future (Kwan, 2010; Wnuk & Marcinkowski, 2014). Hence, the relationship between spiritual practices, hope, the meaning of life, and psychological health function positively or negatively and influence survivors according to their choices (Bernardo, 2013; Crain & Koehn, 2012; Kwan, 2010; Wnuk & Marcinkowski, 2014).

As the present study's focus was on HIDAS, the church evolving response to domestic abuse as discussed by Bent-Goodley, St. Vil, and Hubbert (2012) seems particularly apt here. Churches have been inconsistent and limited at times when responding to domestic abuse (Bent-Goodley et al., 2012). I agree with Bent-Goodley et al. that to fight against domestic abuse, pastors need to provide responses and good leadership and that fighting domestic abuse takes all people, whether Black or White, no matter their backgrounds. Pastors need to enhance their training and find different ways

to address domestic abuse efficiently and effectively. They need to create sustainable and collective faith-based teachings, sermons, and biblical concepts that would encourage survivors to become financially independent, self-sufficient, empowered, seek help, and get an education (Bent-Goodley et al., 2012). Pastors are not the only ones who need to create sustainable and collective faith-based teachings for domestic abuse survivors. All churches and social services agencies should help domestic abuse survivors hope for a better and stable future.

Christian theology talks about hope and forgiveness (Teruelle, 2012). Offering forgiveness may be the ultimate act of hopeful thinking. Hopeful thinking is not just about giving information to survivors or giving them the tools they need, but it is about building relationships. A relationship between helpers (communities, counselors, and pastors) and survivors will help survivors of domestic abuse stabilize and yearn for independence and financial freedom (Coduti & Schoen, 2014; Teruelle, 2012; Wnuk & Marcinkowski, 2014).

Supportive Relationship Networks

Study results showed that HIDAS's relationships with intimate partners begin with thoughts of being a family. As time passed, the relationships became tangled in abuse, and the separation became deeper. From the interviews with the HIDAS who participated in this study, I found that what helped reduce their feeling to return to their abusers was the sense of being less alone since leaving their abusers. Survivors' feelings of loneliness were reduced by meeting with counselors for some and with support from family and friends for others. Most of the HIDAS talked about lacking supportive

friendships when they lived with the abuser. Hence, when they got the support they needed, they experienced renewed hope and self-love.

Hopeful thinking is important because hope helps build countries, communities, and families where all people work collectively toward common goals (Coduti & Schoen, 2014; Wnuk & Marcinkowski, 2014). When one hopes, feeling lonely dissolves and a sense that one can create healthier relationships develops (Snyder, 2002). The act of hope may help a survivor overcome the obstacle of loneliness after leaving her abuser (Snyder, 2002). Survivors may lose their confidence about sharing their situation with others. However, they may learn how to overcome their loneliness and reach their goal to exit successfully the abusive relationship (Coduti & Schoen, 2014; Wnuk & Marcinkowski, 2014). Hopeful thinking renews empowerment (Coduti & Schoen, 2014; Wnuk & Marcinkowski, 2014). With time, survivors regain their sense of empowerment as they reflect on their challenges (Coduti & Schoen, 2014; Wnuk & Marcinkowski, 2014). With hopeful thinking, survivors can stay empowered (Snyder, 2002).

Different organizations, churches, businesses, communities, families, and individuals can engage in programs based on hope to help HIDAS choose a different path to a different life for them and their children. Shelters for survivors of domestic abuse are needed, places where survivors and their children may be safe for a while and can get social, mental, spiritual, and legal counseling to help contribute to hopeful thinking (Kappler & Kaltenbrunner, 2012; Sun et al., 2014). HIDAS need support from their communities, their families, and society. They also might be grateful to have support from various local organizations that can help them achieve their goals and start a new

life without abuses, in which their basic needs will be fulfilled enabling them to hope for a better future.

Resilience

The concept of resilience is important for survivors of domestic abuse as it helps keep hope alive when fighting against different risk factors that lead to abuse (Miller et al., 2014; Sun et al., 2014). The experience of trauma may restrict survivors in achieving their goals (Sympson, 2000). As demonstrated in the present study, HIDAS in Orange County generated goals to leave their abusers and saw themselves achieving their goals. Their actions reflected resilience, the theoretical basis for this study. They believed that they could leave their abusers through various kinds of strategies (safety planning, transportation, shelter, goal-directed thoughts, agency, and pathways thinking). Hence, with hope, survivors were resilient and focused on successes over failures. When challenged, they stayed positive emotionally.

Women who want to live a new life, a life without abuses, an independent life, must be resilient. Resilience helps them bounce back and reclaim what they have lost. Resilience helps them build a new life in the hopes of achieving their goals of self-sufficiency and independence.

The definition of resilience is positive adaptation despite adversity (Fleming & Ledogar, 2008). In psychology, resilience is often a descriptor of good developmental outcomes despite high risks. It helps individuals sustain competence under stress and recover from trauma (Fleming & Ledogar, 2008). Resilience theory holds that individuals can recover from life's adversity, frustration, violence, deception, or pain (Fleming &

Ledogar, 2008; Ledesma, 2014; Rutter, 2012; Svetina, 2014). Survival, recovery, and thriving are concepts related to resilience. The ability to conceptualize the future after facing adversity of various types is another example of resilience (Ledesma, 2014; Zimmerman, 2013). Resilience helps survivors recover from bad and negative life experiences (Rutter, 2012; Svetina, 2014) and become stronger while overcoming the negative experiences (Ledesma, 2014).

Resilience research has focused on finding resilience factors at many levels, including individuals, families, communities, and cultures (Fleming & Ledogar, 2008). Many different fields, including social work, psychology, sociology, education, and theology use resilience theory (Rutter, 2012; Svetina, 2014). More recently, the theory has been used in discussing domestic abuse issues (Rutter, 2012; Svetina, 2014).

Resilience for survivors relates to survival, recovery, and thriving (Ledesma, 2014). In the present study, HIDAS identified characteristics of resilience such as thriving, self-confidence, hopefulness, strong social resources, adventuresome, low fear of failure, the strength of mind, faith, determination, and tolerating uncertainty or the unknown. These are all resilience factors discussed by Ledesma (2014), Rutter (2012), and Svetina (2014).

Resilience has many sources. Kim and Esquivel (2011) studied the connection between spirituality and resilience in juveniles and found that spirituality could be a source of resilience in adolescents because it promoted healthy development, enhanced coping abilities, and led to positive mental health outcomes, psychological well-being, and promoted academic success. Spirituality is important for HIDAS, and similar effects

of resilience were seen in the HIDAS who participated in this study. Spirituality was a source of encouragement for these women and promoted their development of resilience.

Resilience is a measure involving a complex range of characteristics and influences, including external family, church, and community. In the HIDAS who participated in this study, resilience created cycles of negative and positive experiences. When they faced elevated levels of adversity, they sometimes encountered obstacles, but their resilience helped them reach their goals and hope for a better future. These survivors often experienced a broad range of stressful and negative experiences and tolerated abuse as a way of life and marriage. However, they adapted, functioned, and competed for positive outcomes, which are key indicators of resilience.

According to Taormina (2015), resilience can help to create stability and life in control. Resilience fueled the determination to reach these goals among the HIDAS in this study. They were also committed to getting to a certain point in life, to get rid of bad habits, or to change their ways of life. They endured shame and pain. They adapted to an uncomfortable situation and healed from different kinds of pain and disappointment in their lives. They adapted to a life without abuse. They also recovered from the pain and adversities they encountered.

Resilience can reflect adaptation, as it did among the HIDAS in this study. All of the HIDAS reacted differently when facing or dealing with adversity. One was angry, another felt disappointed, dejected, and victimized. Another survivor experienced a rush of excitement when facing adversity, even while also being fearful. The challenge was for them to turn negative experiences into positives and counter adversity with resilience.

Resilience is a process, and its factors vary, often in the reflection of the risk involved (Fleming & Ledogar, 2010). Philosophies have shifted regarding social problems (Dean & Stain, 2010). Rather than providing support for a deficits-based approach, support today focuses on strengths and resources to enable adaptive function and positive outcomes for survivors (Dean & Stain, 2010; Fleming & Ledogar, 2010; Maltby & Hall, 2015).

Self-Esteem

Emotions are part of individual pursuit goals (Snyder, 2002). Emotions are a consequence of goal-directed thinking in which an individual could have higher or lower hope. HIDAS tried to achieve an objective by having positive feelings that resulted in greater hope. Survivors find different alternatives pathways when barriers occur. However, for survivors with lower hope, obstacles to goals can result in negative emotions, and they give up (Boden, 2013; Johnstone, 2014; Taormina, 2015).

Focusing on improving strengths, including those of hopeful thinking, can influence self-esteem and the meaning of life (Cheavens et al., 2006). The HIDAS in this study stated that their experiences in domestic abuse relationships lowered their self-esteem, which they said also isolated them. Some survivors believed that their abusers stripped them of their self-esteem. Denise said, “My self-esteem had been tested.” Then she added, “I will not allow anyone to break my self-esteem.” Betty spoke of abuse experiences, as “I was isolated because I was embarrassed. It was humiliating.” Denise said, “I demeaned myself staying in my marriage.” Study participants touched on how abusers pulled down their self-esteem and that some abusers felt empowered by the

abuses. Aline emphasized how her self-esteem was tested: “If they talk so bad about you, then you think low of yourself.” Since she left her abuser, Aline said, “I feel so independent now, and I feel confident.” Carole said, “I am just at peace with myself . . . And I am happy.” Betty explained, “My self-esteem was a little lost, and it was low.” Carole said she “felt like nothing, and I was worthless.”

The relationship of dispositional hope (i.e., agency and pathway) to self-esteem (to like oneself, competence, and confidence), and self-regulation (control and discipline) is evident (Ferrari et al., 2012). Hope is a power that drives people to be confident when they feel depleted or down (Kwan, 2010). Positive behaviors lead to confidence in a person.

Self-efficacy relates to self-esteem. Self-efficacy is an assessment of one’s ability to perform a task or face a situation, an ability to succeed against all the odds, and outcome and consequences of one’s ability and competence. It reflects a strong belief in one’s own ability to learn and develop (Bandura, 2006; Van Der Roest et al., 2015; Yiu et al., 2012). Goal-directed behavior, or self-efficacy, is affected (increased or decreased) by the choices people make in their lives (Patrick & Hagtvedt, 2014). The HIDAS in the present study acted differently when motivated, when their feelings about themselves and their competence were high, which affected their motivation to attain their goals. Accomplishing a task or reaching a particular goal depends on many different perceived factors likely to affect motivation (Bandura, 2006; Van Der Roest et al., 2015; Yiu et al., 2012).

Survivors who are facing a life-challenging task might depend on self-esteem and self-efficacy for the motivation to tackle their problems. Alternatively, they may put forth no effort (and purposefully fail) to maintain self-worth by creating the illusion that they could have succeeded, had effort been exerted (Bandura, 2006; Van Der Roest et al., 2015; Yiu et al., 2012).

The ability to recognize different possibilities regarding reaching one's goals is a definite predictor of life satisfaction (Davidson et al., 2012; Halama, 2010; Winterich & Haws, 2011). Hopeful thinking acts as a partial mediator between one's mind, one's consciousness, and the satisfaction of life (Halama, 2010). The basis of sustainable life after domestic abuse experiences is the sense of coherence, self-efficacy, and hope, which are protective factors in one's life no matter what kind of situation one has endured or is enduring, endured or are enduring (Bernardo, 2013; Davidson et al., 2012). A sense of coherence and self-efficacy were seen in the different situations HIDAS discussed during the interviews.

Study Limitations

This study's most important limitation was the inability to generalize its findings. The study participants were HIDAS residing in Orange County, Florida. Given the extremely limited study focus, it may not be possible to generalize study findings to HIDAS in other parts of the United States, to Haitian domestic abuse survivors who are not immigrants, or to other immigrant survivors of domestic abuse. It would be necessary to conduct similar studies among these populations to confirm the generalizability of the present study's findings. Further, I used a criterion-based sampling method, which might

have also limited generalization. As described in Chapters 1 and 3, criterion-based sampling was used to identify HIDAS who had experienced hope and who were willing to share their experiences, which boosted this study's credibility. Participants in this study were willing to share their narratives of abuse in personal interviews. They were resilient and full of hope. Hence, replication of this study would need to consider finding another population that is hopeful and seeing if perceptions of individuals in this population are any different. A different sampling method such simple random sampling, a basic sampling technique in which subjects for a study are drawn from a large population, and each participant is selected randomly and has an equal chance to participate in the study (Cox, 2012; Lub, 2015; Lund, 2012), could be employed. Or stratified sampling method, a sampling method that divides the population into smaller groups, or strata, based on characteristics, attributes, etc., that are then formed into random samples (Cox, 2012; Lub, 2015; Lund, 2012) could be considered.

This study's primary goal was to add to the understanding of hopeful thinking and its role in envisioning the future after sexual abuse. It reflects the study participants' experiences of hope as a positive motivational state. As such, this study provides a particular reflection of domestic abuse survivors' experience of hope. What these women experienced and their perceptions of the role that hope played in their envisioning the future could be very different from the experiences of other women with similar backgrounds.

Recommendations

The findings from this study suggest that hopeful thinking may reduce survivors' willingness to return to their abusers. Themes were generated that can be used to help develop interventions for increasing hopeful thinking among survivors of domestic abuse and form the basis for further research. Recommendations for further research are presented in this section.

The first recommendation is replicating this study among another immigrant population in which abuse is a problem. This study represented only the experiences of HIDAS women living in Orange County community in Central Florida but could be replicated for those who live in other counties, or even other immigrant populations around the United States. These marginalized women from all cultures and races encounter different responses, such as shame, stigma, and fear that regularly stop them from seeking the support they need, especially if they are immigrants (Arnold & Slusser, 2015).

Many ways exist to help women of all different cultures who immigrate to the United States and who have experienced domestic abuse, such as shelters, mental health counseling, financial support, family support, community or social support, and education on domestic abuse. However, abused women often remain marginalized (Mishra et al., 2014). Studying why these women often remain marginalized could shed light on why they remain in the shadows when various sources of support are available.

The second recommendation is a greater consideration of HIDAS cultural background when evaluating their progress. There is continuing influx of Haitian

immigrants to the United States, and there is a need for a greater cultural understanding of this population among clinicians and others who work with its members. One of the reasons for the multicultural education is to educate and protect Haitian women against domestic abuse because every culture learns differently. Many educators, counselors, pastors, and other professionals want to teach or help Haitian immigrants the same way they teach or help other cultures. An understanding of the Haitian culture and the challenges Haitian immigrants face should be obtained before offering help. Some of the HIDAS in this study stated that they felt invisible, that no one was paying attention to them. This can make survivors feel ashamed and unworthy.

Implications

Breaking the cycle of abuse is imperative when addressing domestic abuse. Findings from this study showed that hopeful thinking could play an important role. Efforts to build on hopeful thinking among survivors of domestic abuse could create significant social change. Social service agencies can use the concept of hopeful thinking to develop new ways to intervene and support HIDAS and other domestic abuse survivors. For example, during the interviews, HIDAS often talked about their feeling lonely. Interventions that help these women realizing that they are not alone are to realize that other women have experienced what they have gone through and survived. Statements such these, could give these women the strength to pursue their goals. This could result in their achieving independence for themselves and their children and lessen the need for their relying on public assistance as well as their chances of returning to their abusive relationships. Such interventions should not only be hope based, but they should

also reflect culturally informed approaches. Interventions like these may help survivors limit their desires to return to their abusive relationships or help them feel less lonely and more empowered.

The numbers of HIDAS are likely under-reported. As discussed in Chapters 1 and 2, many subjects, including domestic abuse, are considered taboo in Haitian culture. Hence, many people do not talk about domestic violence (Charles, 2014; Sandiford, 2013). This study's focus on this confounding issue in Haitian American culture is a step toward breaking that silence and bringing to light issues that have long been in the shadows.

Many HIDAS do not speak about their experiences. They do not want to be shamed or pushed aside in the community. Creating a means for these women to safely and comfortably report abuse, no matter how small it might seem to be, is important for building a united community, regardless of where these women come from or what they look like. Training and education are essential to being able to report abuse. Education on abuse needs to start when children are starting school. They should be educated on how to recognize and report abuse and how to fight against it. The concept of hope could be used to encourage children to help their mothers to be able to have hope for a brighter future.

Among all Haitian immigrant women, domestic abuse has created socioeconomic, spiritual, and cultural issues, all of which can be addressed by interventions that focus on the concept of hope. Components of such inventions could include a conversation about what is hope for survivors, conversation about how to reduce loneliness and to interact

with counselors or psychologists for a better life. They need to identify survivors' ideas of their goals and the importance of these goals; how to achieve short- or long-term goals and create choices and an independent future; identifying pathways for reaching their goals; how to forgive, become courageous, and build hope to achieve their goals; and how to increase agency thinking by unifying with other survivors to maintain changes in their lives. Interventions based on components like these may reduce the temptation from survivors to go back to their abusive lives. One setting in which interventions like these could be mounted could be in temporary housing for survivors who seek to get out of domestic abuse situations. Such facilities could also offer work training and education on family dynamics, relationships, saving for the future, health, independence, etc. Such training can help HIDAS develop goal-related thoughts as well as hopeful thinking. Sheltering survivors and helping them have a better understanding of family dynamics can decrease the risks of their going back to the same abuses and reduce homelessness, which can increase hope.

Hopeful thinking is important in society because hope helps build countries, communities, and families where all people work collectively toward common goals. HIDAS need support from their communities, their families, and society. Support from all of these sources will help them achieve their goals and start a new life without abuse and in which their basic needs are met, which will help them hope for a better future.

People may dismiss the church when it comes to domestic abuse, but as a clergy member myself, I believe that the doctrine of love and faith that the church provides is a strong way of life that survivors can follow that could provide support, empower them,

and help them become self-sufficient. Because of the nature and effects of domestic abuse, the church and its leaders need to be trained about domestic abuse and be prepared to talk about it. The church and church leaders need to find new ways to support and help domestic abuse survivors become self-sufficient and financially independent.

Conclusion

Hopeful thinking is one's conscious actions about achievable goals, which then produce diverse ways of thinking of different pathways to achieve those objectives (Smedema et al., 2014; Snyder, 2002). Hopeful thinking helps facilitate success and achieve goals when facing obstacles (Smedema et al., 2014; Snyder, 2002). Hope can help an individual move toward a goal, creates strategies to reach that goal, and overcome different obstacles and barriers that occur in life (Patrick & Hagtvedt, 2014; Smedema et al., 2014; Snyder, 2002; Snyder et al., 2002). Hope is essential for enhancing the quality of life through positive mindset and strengths (Harris et al., 2007; Snyder, 2002).

I conducted this study seeking to explore hopeful thinking in HIDAS's conceptualizations of the future beyond domestic abuse. The framework for the study was resilience theory, which is the ability to bounce back from stressful situations. Study results showed how HIDAS experienced hope as a positive motivation in their lives. Their experiences of hopeful thinking may help lead other domestic abuse survivors to a healthy life and reduce their willingness to go back to their abusers.

Hopeful thinking may help survivors create different strategies to overcome previous abuses or pains and focus on their future and their independence. Hope may help survivors counter the consequences of domestic abuse. Hope is a fundamental factor

to promote well-being and health for domestic abuse survivors (Harris et al., 2007; Snyder, 2002). Challenges are always possible when survivors are trying to achieve their goals. Hence, interventions may benefit survivors assessing and owning their decisions and goals. Hope through Resilience empowered the HIDAS in this study to leave their abusers. Now, living an abuse-free life, they have set their goals and have made their own decisions. Their decisions are influenced by their personal history of wanting to become independent.

Through this study's findings, I would like to call for awareness and increase the attention focusing on strengths designed for domestic abuse mental health interventions. Domestic abuse has grown in visibility and awareness, which has helped many people understand its enormity and the problem that it causes in communities (Kappler & Kaltenbrunner, 2012; Sun et al., 2014). Abusers have been convicted and tried, and many social and judicial departments have been created to fight against domestic abuse, which helps many women hope for the best future beyond domestic abuse (Kappler & Kaltenbrunner, 2012; Mishra et al., 2014).

Interventions make hopeful thinking possible and increase survivors' strengths for their future and reaching their goals. Findings in this study may help responders and other professionals in the field of psychology, human and social services, and counseling reduce the survivors' desire to go back to their abusive relationships by providing them positive ways to deal with domestic abuse. Findings from this study may be used to reduce HIDAS' desire to go back to their previous abusive life. Findings also may improve mechanisms of trauma-focused interventions. The social change implications of

this research study will possibly affect the participants in the study, the social services, and community-based trauma-focused intervention services for HIDAS.

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Appendix A: Flyer

Research Participants NEEDED!

You are invited to be part of a research study. I am a doctoral student at Walden University in the College of Social and Behavioral Sciences.

Title: Hopeful Thinking: Conceptualizing a Future beyond Domestic Abuse – Henri Zombil, Ph.D. Student/Researcher

What I want to learn about:

The purpose of this study is for me to try to understand your experiences of hope that you went through as a survivor of domestic abuse. How do you think about hope and its role in your life and decision making as a Haitian immigrant woman who has experienced domestic abuse at home?

The study will support professional practice and contribute to positive social change, by informing those who may assist and provide support to Haitian women who survived domestic abuse and develop a way for different organizations to intervene and help them.

STUDY PARTICIPANTS SHOULD BE:

(a) residing in Orange County, (b) 18 years old and older, (c) are comfortable speaking English, French or Haitian Creole, (d) self-identify as a survivor of domestic abuse, (e) not residing in shelter or transitional housing, (f) not living with the abuser, and (g) not under emotional crisis nor psychological treatment.

As a PARTICIPANT: I will ask you to be available and participate for 2 hours (maximum) on recorded interview, at [REDACTED] in Orlando. You will be protected inside the school compound, everything will be confidential, and your name or anything that can connect you to this study will not be used or revealed to anybody that is not a part of the study.

To Volunteer: Email [REDACTED] and provide your contact information or call [REDACTED]. A return email or call will confirm your eligibility for the research. Only your assigned number will be identifiable in the study to ensure confidentiality.

Appendix B: Interview Protocol

Interview Questions for the future of Haitian Women Survivors beyond domestic abuse

Interviewee Code: _____ Date: _____ Location:

Interview Estimation time: 120 minutes

Introduce yourself

- 1. Tell me about yourself (e.g. age, ethnicity, relationships, children, education).
- 2. How do you describe your life today?

Hopeful thinking

- 1. How has hope affected your life?
- 2a. What were the moments in which you felt like losing hope?
- 2b. What stopped you from losing hope?
- 3. What are the things that give you hope in life?
- 4a. Tell me about what were some moments or situations in which you felt hopeful.
- 4b. What kept that hope alive?
- 5. Tell me about what were some moments or situations in which you did not feel hopeful.
- 6. How do you feel; reflect about your experiences while living with the abuser, and now?
- 7a. How did your relationship with family members change when you left your abuser?
- 8. How could hope be shared with other individuals?
- 9. In what do people place their hope?

-10. How can anyone have hope?

Closing

-11. Is there anything else that you want to share about feeling hopeful?

-12. Is there anything I didn't ask you that you would like to add?

Thank you and end