

UNIVERSITY OF OKLAHOMA

GRADUATE COLLEGE

FEEDING HOPE THROUGH
TULSA'S PHILANTHROPIC COMMUNITY

A DISSERTATION

SUBMITTED TO THE GRADUATE FACULTY

in partial fulfillment of the requirements for the

Degree of

DOCTOR OF PHILOSOPHY

By

RANDY K. MACON
Norman, Oklahoma
2014

FEEDING HOPE THROUGH
TULSA'S PHILANTHROPIC COMMUNITY

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BY

Dr. Chan Hellman, Chair

Dr. Gerard Clancy

Dr. Julie Miller-Cribbs

Dr. Chad Johnson

Dr. Curt Adams

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This work is respectfully dedicated to those who have known the pain of going to bed hungry and to those sentinels working tirelessly to ensure future generations do not.

Acknowledgements

Althea Gibson is credited with these words of wisdom: No matter what accomplishment you make, somebody helped you. With this sentiment, and my unending gratitude, I wish to collectively acknowledge all the somebodies who have supported me along this spectacular journey. In particular, I would like to immortalize the contributions of Dr. Chan Hellman and Dr. Jeanne Gillert. They inspired hope.

Table of Contents

Acknowledgements	iv
Table of Contents	v
List of Tables.....	vi
List of Figures	vii
Abstract	viii
Chapter One: Introduction.....	1
Statement of Problem.....	6
Purpose of Study	9
Significance of Study	9
Research Questions	10
Hypotheses	10
Definition of Terms.....	11
Chapter Two: Review of Literature	13
Food Insecurity.....	14
Well-being.....	15
Hope Theory.....	21
Stigma	25
Summary	25
Chapter Three: Methodology	27
Participants	27
Design	31
Measures	31
Procedure.....	35
Analysis.....	36
Chapter Four: Results.....	37
Completed Surveys	38
Hypotheses One, Two, and Three	39
Hypothesis Four	41
Chapter Five	47
Conclusions Related to the Hypotheses	49
Implications to Nonprofit Organizations	50
Implications to Research	51
Limitations	52
References	53
Appendix A: Survey.....	66
Appendix B: Information Sheet for Consent to Participate in a Research Study ..	73
Appendix C: Institutional Review Board Letter of Approval.....	75
Appendix D: Map of Respondent Zip Codes.....	76

List of Tables

Table One: Demographic Variables of Participants.....	29
Table Two: Completed Surveys Per Organizations	38
Table Three: Zero-Order Correlation Matrix	40
Table Four: Results of Hierarchical Regression DV SWL	43
Table Five: Results of Hierarchical Regression DV SPANE Balance	45

List of Figures

Figure One: The Philanthropic Emergency Food Response System	6
Figure Two: Boundaries of Zip Code 74127	30
Figure Three: Maslow's Hierarchy of Human Needs	48

Abstract

Hope Theory continues to emerge in the scholarly literature. A facet of positive psychology, this theory is comprised of three facets: goals, pathways thinking, and agency thinking. To date there has been limited application of hope theory to the context of work underway in the nonprofit sector. The purpose of this quantitative study was to apply hope theory as a lens to predict well-being among clients seeking food-related assistance from nonprofit organizations in Tulsa, Oklahoma. The measurement instruments used in this study were the Future Hope Scale, the Food Security Survey, the Satisfaction with Life Scale, and the Scale of Positive and Negative Experience (SPANE). The results suggest that respondents living in food insecure conditions struggle with life satisfaction and report high levels of negative affect based on their experiences. Additionally, Hope Agency accounted for significant variance in both satisfaction with life and affect, over and above food insecurity and hope pathways, among this sample. The results of this study can inform future research specific to hope theory and have direct application to the nonprofit and philanthropic sectors engaged in this work in Tulsa, Oklahoma.

Chapter One: Introduction

On any given day in the United States, more than 35 million individuals, including 12 million children, struggle to find their next meal (Berg, 2008; Brown, Shepard, Martin, & Orwat, 2007). Between 2009 and 2011, 14.7% of U.S. households faced some level of food insecurity—meaning that at least one person had to reduce the quantity of food consumed at some point during the year due to lack of resources (Coleman-Jensen, Nord, Andrews, & Carlson, 2012). For this same three-year period, Oklahoma matched the national average with 14.7% of households, approximately 600,000 individuals, stressed by hunger related issues (Coleman-Jensen et al., 2012; Regional Food Bank of Oklahoma, n.d.). With each passing year an increasing number of individuals face food insecurity making hunger a pervasive issue in our country, across our state, and in our communities.

As individuals strive toward the pursuit of life, liberty and happiness, those challenged with food insecurity face added obstacles beyond their empty cupboards. Food insecurity has been empirically linked to instances of anxiety, shame, exclusion, powerlessness, depression and guilt (Hamelin, Beaudry, & Habicht, 2002; Siefert, Heflin, Corcoran, & Williams, 2004).

Two primary sources of support exist for those dealing with food insecurity: the government and the philanthropic sector (including faith-based organizations). The Supplemental Nutrition Assistance Program (SNAP), formally known as food stamps, is the largest assistance program administered by the U.S. Department of Agriculture through the Food and Nutrition Service division (Cunnyngham, Sukasih, & Castner,

2013). Title IV of the omnibus Farm Bill, most recently reauthorized as the Agricultural Act of 2014, provides for SNAP assistance to low-income families and individuals through FY2018 (Chite, 2014; U.S. Congress H.R. 2642). For fiscal year 2012, a total of \$86.5 billion was appropriated to the SNAP program to assist an average of 46 million individuals each month (United States Department of Agriculture, n.d.) By 2012, more than 800,000 Oklahoma residents relied on SNAP assistance at some point during the year (Oklahoma Department of Human Services, 2012). President Obama's proposed budget for fiscal year 2015 reduces the SNAP appropriation to \$84.25 billion, of which \$5 billion will be reserved for use only if needed and will require additional approvals to access (Food Research Action Center, n.d.)

Current SNAP benefits are capped at \$200 per month for an individual or \$668 per month for a family of four (United States Department of Agriculture, 2013a). When divided over a month's time, SNAP allocations equal between \$5.50 and \$6.60 per person per day, or between \$1.83 and \$2.20 per meal. As a supplemental program, SNAP is not intended to cover the full cost of food for any recipient. However, the reality is that many in extreme poverty are unable to obtain nutrient-rich foods such as fresh fruits and vegetables even with SNAP assistance (Leung et al., 2013). As of January 2013, the projected cost of one moderately priced nutritious meal, prepared at home, for an adult male between the ages of 19 and 50 is \$3.26 (United States Department of Agriculture, 2013b). Assuming an adult male qualifies for the full SNAP allocation, and assuming he is able to prepare a balanced meal using the projected

budget, he still faces a gap of \$1.43 per meal (\$3.26 projected cost minus \$1.83 SNAP allocation). To fill this gap, individuals often turn to the philanthropic sector for hope.

Generally defined, philanthropy includes “private initiatives for public good, focusing on quality of life” (McCully, 2008, p. i). America has maintained a philanthropic ethos since the country’s founding. Elements supporting this spirit are woven into the preamble of our country’s most important document, the Constitution of the United States:

We the People of the United States, in Order to form a more perfect Union, establish Justice, insure domestic Tranquility, provide for the common defence [sic], *promote the general Welfare* [emphasis added], and secure the Blessings of Liberty to ourselves and our Posterity, do ordain and establish this Constitution for the United States of America. (U.S. Const. pmb1)

Classified today as a part of the third sector (distinct from private business or public government), philanthropic organizations exist to carry out the mission of promoting general welfare. The philanthropic sector in the U.S. is comprised of millions of autonomous nonprofit organizations powered by tens of millions of volunteers and trillions of dollars in assets (Payton & Moody, 2008, p. 16). One estimate predicts that as much as 41 trillion U.S. dollars will be involved in an intergenerational transfer of wealth from 1998 through 2052 (Whitaker, 2007) and much of this asset base could end up in the philanthropic sector as families create new private foundations or further fund foundations already in existence. A sampling of 1,122 of the largest grant-making foundations in the United States taken in 2011

revealed that, of the \$24.5 billion awarded by this group during this timeframe, \$696.7 million went to support food, nutrition and agriculture (The Foundation Center, 2013). This amount did not include funds given by individual donors directly to 501(c)(3) charitable organizations, which is a more difficult number to obtain; one estimate suggests this is as much as 83 percent of all charitable donations given in the United States (Payton & Moody, 2008). The combined philanthropic response to hunger in America is estimated to be more than \$14 billion annually (Brown, Shepard, Martin, & Orwat, 2007).

These funds support a sophisticated infrastructure for emergency food delivery in the United States. Feeding America, formerly known as America's Second Harvest, is the largest domestic hunger-relief charity and coordinates a network of 202 local food banks across the U.S. which collectively assist more than 37 million Americans – including 14 million children and 3 million senior citizens – each year (Feeding America, n.d.). Most food banks do not provide food directly to individuals. Instead, these distributors work through partner programs, mostly nonprofit organizations themselves, to ensure assistance reaches those who need it most (see Figure 1).

As an example, through relationships with 450 partner programs across a 24-county service area, the Community Food Bank of Eastern Oklahoma distributes more than 15 million pounds of food annually using a force of 10,000 volunteers and more than 50 full-time employees. With this food, these partner programs serve an estimated 247,000 meals to 70,000 individuals each week (Community Food Bank of Eastern

Oklahoma, 2013). Assistance is provided in two primary ways: through emergency kitchens, also known as soup kitchens, and pantry programs.

Emergency kitchens serve prepared meals to be consumed on site (Coleman-Jensen et al., 2012). There is usually no formal intake process and no limit to the number of times an individual can utilize a soup kitchen in a given period. Pantry programs distribute bags of groceries for use offsite (Coleman-Jensen et al., 2012). After participating in an intake process, clients seeking pantry assistance generally receive enough groceries to last between three and seven days. Grocery items are either pre-selected by program staff or volunteers or, in some cases, chosen with client input. Access to this type of assistance is often limited to a pre-determined number of visits in a given period, based on each organization's capacity. Individuals living in rural areas face additional challenges, such as transportation and scarcity of fresh fruits and vegetables, when relying on food pantry assistance (Whitley, 2013).

Figure 1

The Philanthropic Emergency Food Response System

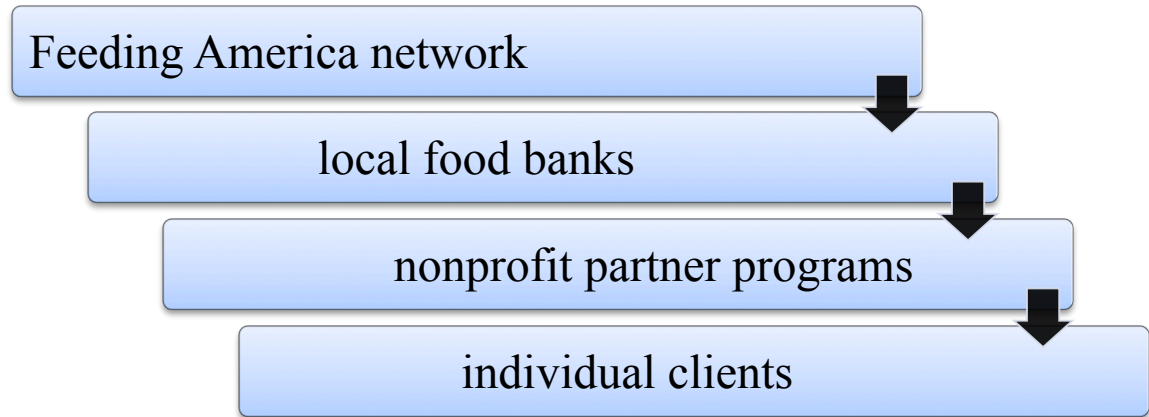


Figure 1. The philanthropic emergency food response system.

Statement of Problem

It is estimated that hunger cost the United States more than \$90 billion in 2007 (Brown, Shepard, Martin, & Orwat, 2007). By 2010 this cost had increased to \$167.5 billion of which the philanthropic sector contributed \$17.8 billion (Shepard, Setren, & Cooper, 2011). Hungry and malnourished individuals have more healthcare needs, miss more days of work and school, and are usually less productive when working or learning than individuals who receive proper nourishment (Brown et al., 2007; Shepard et al., 2011; Tarasuk, 2001). Moreover, individuals dealing with hunger often find that it invades other aspects of life and forces them to make stressful life choices that can lead to increased levels of anxiety, depression, psychosocial dysfunction, and suicide (Brown et al., 2007; Mander, 2008; Shepard et al., 2011). For example, approximately

40 percent of respondents to a 2011 study reported experiencing stress over having insufficient funds to pay rent, pay medical bills, and purchase food (Shepard et al., 2011).

Food insecurity impacts children in unique ways. When compared with their peers from food secure households, children experiencing food insecurity contend with educational challenges at higher rates. Specifically, they are 50 percent more likely to miss days of school, 200 percent more likely to be suspended; and approximately 50 percent more likely to be retained at a given grade level (Shepard et al., 2011).

Aside from its impact on our nation's bottom line, feeding the hungry is considered by many to be a moral imperative. Mother Teresa is credited as teaching "if you can't feed a hundred people, feed just one" (Goodreads, n.d., para. 4). The New International Version of the Bible attributes Jesus as saying "For I was hungry and you gave me something to eat, I was thirsty and you gave me something to drink..." (Matthew 25:35). Proverbs 31:8-9 instructs devotees to "Speak up for those who cannot speak for themselves, for the rights of all who are destitute... defend the rights of the poor and needy." Rabbinic leaders use the Torah and the Talmud to illustrate the Jewish responsibility to feed the hungry as part of *tzedakah* (justice) and *tikkun olam* (repairing the world) (Mazon, 2012).

The United Nations' Universal Declaration of Human Rights includes a statement confirming access to adequate food to be a fundamental right afforded to all humans (United Nations, n.d., article 25.1). As a social justice issue, food insecurity relates to poverty, oppression, and loss of dignity among those turning to socially undesirable

methods to obtain food (Silverbush et al., 2010; Tarasuk, 2001). Those already considered to be vulnerable populations, such as children, the elderly, the homeless, and certain minority groups, experience the indignity of food insecurity in disproportionate ways as it often more challenging for them to obtain healthy and affordable food (Brooks, Lamonica, & Mazziotti, 2012; Chilton, Rabinowich, Council, and Breaux, 2009).

As many private grantmaking foundations move toward a performance-based model for funding, food-providing nonprofit organizations are struggling to demonstrate their worth in terms of ensuring that clients served by emergency assistance programs today are on track to becoming self-sustaining individuals tomorrow. Until now, many of these nonprofit organizations have relied on output data such as number of individuals served or pounds of food distributed when reporting their successes to those who provide funding. While impressive by virtue of the scope of their accomplishments given the limited resources with which they have to operate, relying on this model of outputs most likely will not satisfy funders much longer, which jeopardizes the likelihood that private foundations will continue to renew/increase their investments. From an academic perspective, it is important to “acknowledge the fully rounded humanity of poor men, women and children... recognising [sic] that they are not completely defined by their poverty, nor can they be fully understood in its terms alone” (Gough, Mcgregor, & Camfield, 2007, p. 3). In an applied sense, to the extent that nonprofit organizations can begin to quantify their impact in terms of helping

clients flourish, it is reasonable to expect grantmaking foundations will take a renewed interest in further supporting this work.

Purpose of the Study

The purpose of the proposed study is to examine hope theory as it contributes to well-being for clients seeking emergency food assistance from nonprofit organizations. To the extent these nonprofit organizations are able to articulate ways in which they add value for clients over and above the food they provide, local grantmaking foundations and corporations can be reasonably expected to renew, and perhaps increase, their financial support for this work.

Significance of the Study

As nonprofit organizations, especially those engaged in assisting with immediate basic needs, attempt to quantify their impact for grantmaking foundations, the application of hope theory and measures of flourishing and well-being should add a level of robustness not currently captured when these organizations simply report outputs such as number of meals provided within a certain timeframe. Moreover, as the nonprofit organizations adapt the language that accompanies hope as a theory of change, it can be reasonably expected they will gradually begin to shift their approach and slowly begin to incorporate goal-setting methods and follow-up into their intake and case-management processes for the clients they serve.

In a scholarly context, this research seeks to build on our current understanding of hope theory and individual well-being. Although the literature is replete with empirical studies examining these constructs in a variety of settings and at various levels, a gap

exists in the context of the nonprofit sector. The proposed study will serve the dual purposes of advancing scholarly discourse around hope theory – a primary facet of the emerging positive psychology movement -- as well as assisting nonprofit organizations focused on basic needs as they seek to better quantify the impact of their work in terms of improving welfare for the clients they serve.

Research Questions

The research questions guiding this study are:

1. Is food insecurity negatively related to well-being?
2. Is hope positively related to well-being among individuals receiving food assistance?
3. Does hope account for significant variance in well-being over-and-above food insecurity?

Hypotheses

The review of literature has informed the following hypotheses for this study:

H₁ Food insecure individuals will report negative levels of life satisfaction.

H₂ Food insecure individuals will have higher levels of negative affect and lower levels of positive affect.

H₃ Individuals living in food insecure homes that receive food assistance from nonprofit organizations will report high, positive levels of agency-specific hope.

H₄ Hope will account for significant variance in well-being over and above food insecurity.

Definition of Terms

Hunger / Food Insecurity. The United States Department of Agriculture defines *hunger* as “the uneasy or painful sensation caused by a lack of food... a potential, although not necessary, consequence of food insecurity” (Bickel, Nord, Price, Hamilton, & Cook, 2000, p. 6). In recent years, the USDA updated the terminology used in the official assessment of hunger in the United States. This revision replaced the word *hunger*, which is limited to a physiological state, with the term *very low food security* in an effort to better reflect the social condition of compromised access to adequate and nutritional food sources (Allen, 2007; Lewit & Kerrebrock, 1997; Powledge, 2010). To understand *food insecurity* it is important to first examine the definition of *food security*: “the state in which all persons obtain a nutritionally adequate, culturally acceptable diet at all times through nonemergency sources, including food from local production” (Cohen, Andrews, & Kantor, 2002, p. 54). Bickel et al. extend this definition by adding “...an assured ability to acquire acceptable foods in socially acceptable ways (e.g., without resorting to emergency food supplies, scavenging, stealing, or other coping strategies)” (p. 6). Therefore, *food insecurity* is defined as “limited or uncertain availability of nutritionally adequate and safe foods or limited or uncertain ability to acquire acceptable foods in socially acceptable ways” (Bickel et al., p. 6). Stated another way, it is conceivable for an individual to be classified as food insecure without being hungry; he or she would have access to food sources sufficient to satisfy hunger pangs but the food would be of limited or no nutritional value (Tarasuk, 2001). Additionally, it should be noted that the measure of

food insecurity typically spans several months (most commonly one year) and should not be mistaken to imply that individuals living in situations of high food insecurity are constantly hungry (Texas Food Bank Network, 2014).

Hope. In colloquial use, *hope* is often confused with *wish* in that it involves little more than “desire[ing] with expectation of attainment” (Merriam-Webster, n.d., para. 1). In hope theory, the definition is more robust. “Hope is 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)” (Snyder, 2002, p. 250). Grounded in pursuit of a specific goal, hope theory moves beyond simple *wishing* in that it begins to involve willpower and waypower to arrive at the desired end state. In the context of this study, hope is examined as clients of food providing nonprofit organizations seek pathways (i.e., food) in order to advance beyond the first tier in Maslow’s hierarchy and pursue other goals that promote flourishing and well-being.

Well-Being. The construct of *well-being* has been defined in different ways in the literature (discussed in-depth in chapter 2). For the purposes of this study, well-being is operationalized using the Satisfaction With Life Scale (Diener, Emmons, Larsen, & Griffin, 1985). The self-report measure assesses the respondent’s social-psychological prosperity, which encompasses facets of social capital, relatedness, self-acceptance, psychological capital, and optimism.

Chapter Two: Review of Literature

In his 1899 presidential address to the American Psychological Association (APA), John Dewey asserted that “psychology as a discipline was in a unique position to add value to human life by promoting wellness in the community” (Schueller, 2009, p. 922). Almost 100 years later, in his 1998 presidential address to the same organization, Martin E. P. Seligman challenged members to grow beyond the then-standard emphasis on deficits and pathologies to explore and support conditions that make life worth living (Seligman, 2011, p. 1). Since its renaissance, the faction now referred to as positive psychology has received increasing interest from academicians and expanded column space in the scholarly literature. Constructs explored through positive psychology include accomplishment, contentment, creativity, courage, determination, flow, future mindedness, gratitude, happiness (now segmented into positive emotion, engagement, and meaning), honesty, hope, love, optimism, perseverance, responsibility, satisfaction, spirituality, well-being, and wisdom, among others (Seligman & Csikszentmihalyi, 2000; Seligman, 2007; Seligman, 2011). The overarching goal of positive psychology “is to understand and foster the factors that allow individuals, communities, and societies to thrive” (Kobau et al., 2011, p. e8) and is therefore pertinent to the philanthropic sector that seeks to accomplish the same mission.

Food Insecurity

Food insecurity became a nationally debated topic during the late 1960s and early 1970s (DeVault & Pitts, 1984; Lewit & Kerrebrock, 1997). As a matter of food distribution and access, as opposed to production, hunger can impact individuals, households, and entire communities. Areas with an abundance of fast food outlets yet few or no sources of affordable nutritious food, such as supermarkets, exhibit higher levels of obesity as compared to communities where these resources exist (Maddock, 2004; Morland, Roux, & Wing, 2006). At the family or household level, hunger-related stress can negatively impact daily family life, family interaction, and parenting abilities, especially when children with disabilities are present (Park, Turnbull, & Turnbull III, 2002). As it relates to individual well-being, food insecurity has been linked to high-risk behaviors such as transactional sex, coerced sex, and unsafe sexual practices (Maganja, Maman, Groues, & Mbwambo, 2007; Miller et al., 2011; Rajaraman, Russell, & Heymann, 2006). At the individual level, food insecurity has been found to predict poor self-rated health and an increased likelihood for an individual to meet the criteria for major depression as established in the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders III-R (Siefert, Heflin, Corcoran, and Williams, 2001).

Food insecurity among vulnerable populations, such as children and the elderly, adds additional complications. For example, children maturing in food insecure environments face an elevated risk for stunted physical, educational and social development (Alaimo, Olson, Frongillo, & Briefel, 2001; Cook et al., 2004; Chilton,

Rabinowich, Council, and Breaux, 2009; Johnson, 2000; Miller et al., 2008; Vozoris & Tarasuk, 2003). Children from food insecure households are more likely to be obese than their peers from food secure environments (Jyoti, Frongillo, & Jones, 2005; Miller et al., 2008). Alarming, adolescents from food insecure environments have higher instances of depression and suicidal ideation than their food secure peers (Alaimo, Olson, & Frongillo, 2002). Elderly individuals are at elevated risks for decreased nutrient intake when faced with food insecurity, which can exacerbate other health concerns already present or developing (Lee & Frongillo, 2001a; Lee & Frongillo, 2001b; Lee, Johnson, & Nord, 2011; Rose & Oliveria, 1997). A commonly cited concern for elderly individuals is having limited financial resources that necessitate them having to choose between buying food or important prescription medications (Horton, 2013; Mander, 2008).

As philanthropic organizations continue to invest resources to help their communities thrive and flourish, it will be imperative to address issues of food insecurity before attempting to foster high-order elements to promote well-being.

Well-being

The concept of well-being is of fundamental importance in the positive psychology movement (Gudmundsdottir, 2011; Maddux, 2005; Schueller, 2009). Returning to our definition of positive psychology, we are reminded that the ultimate concern is to identify and enhance well-being, defined in general terms as “a person’s cognitive and affective evaluations of his or her life” (Diener, Lucas, & Oishi, 2002, p. 63). Although ambiguity remains in the literature about the role philanthropic

organizations should take in promoting well-being, Diener and Diener (2011) make a call-to-action specific to health professionals, those working in the philanthropic sector, and social scientists to establish guidelines and parameters for ways in which their respective sectors can support well-being among those they serve.

Some critics of well-being suggest that, because it is impossible to remove socially-created values from the quest for the “good life” (e.g., I should desire a house, 2.5 children and a dog because it is the American dream), the goals attached to the quest for well-being will change over time. There is also ambiguity in the conceptualization and definition of well-being among scholars. Two distinct categories have emerged: hedonic and eudemonic well-being.

Hedonic well-being is primarily concerned with “the subjective evaluation of the quality of one’s life involving both affective measures of positive affect and negative affect as well as cognitive measures of life satisfaction” (Jayawickreme, Forgeard, & Seligman, 2012, p. 328). Diener (1984) identified three basic characteristics of subjective well-being: (1) it is subjective at the individual level; (2) it includes positive measures, meaning it is more than simply the absence of negative factors; and (3) it is best used as a “global assessment of all aspects of a person’s life” (p. 544) as opposed to partitioning out into various aspects on one’s life. In their 1999 summation of the then-current state of well-being research, Diener, Suh, Lucas, and Smith articulated a three-factor breakdown of subjective well-being: positive and negative affect, domain satisfaction and global assessments of life. This paved the way for the most common measure of well-being still in use today. “Well-being can be evaluated by rating

subjective life satisfaction and the presence of positive and the absence of negative emotions” (Unwin & Dickson, 2010, p. 163). At the individual level, well-being is thought to be robust in that people will likely internalize external circumstances in different ways. For example, facing food insecurity could significantly impact one person’s self-perceived well-being yet another person might only experience a tiny blip on the Satisfaction with Life Scale (SWLS) when facing similar adversity.

Scholars such as Compton (2001) and Jayawickreme, et al. (2012) have tied well-being to Aristotle’s eudaemonia. In eudemonic well-being, the focus shifts to assessing “the extent to which individuals are ‘doing well’ (rather than merely ‘feeling good’) by looking at constructs such as meaning, purpose, engagement, and flow, among others” (Jayawickreme et al., p. 328). Eudemonic approaches to well-being align with need-based and flourishing approaches of positive psychology.

Initial work in the area of well-being was concerned with little more than an individual’s state of happiness (Wilson, 1967). When articulating his original theory of authentic happiness, Seligman (2002) applied this focus to three specific dimensions -- positive emotion, engagement, and meaning -- as the primary elements that people actively pursue as they seek to improve their happiness. Here, the gold-standard measure was concerned with life satisfaction and the primary goal of positive psychology was to increase one’s self-assessed level of satisfaction to the greatest extent possible.

In the decade following his initial work on well-being, Seligman addressed three critical flaws in his theory. After being challenged by a graduate student, Seligman

realized that these three components were not exhaustive elements of happiness; some individuals seek to achieve certain goals simply for the sake of accomplishing them (e.g., the doctoral student who desires a PhD for the sake of having one, with no real intentions of entering academia as a profession). The second self-identified flaw in authentic happiness theory “is that the dominant popular connotation of ‘happiness’ is inextricably bound up with being in a cheerful mood” (Seligman, 2011, p. 13). This ties closely with the third flaw identified by Seligman. “Life satisfaction holds too privileged a place in the measurement of happiness... It turns out, however, that how much life satisfaction people report is itself determined by how good we feel at the very moment we are asked the question” (p. 13). Critics suggest, and Seligman agrees, the presence of mood as a factor in assessing authentic happiness is a fundamental flaw because of the instability it causes.

In 2011, Seligman advanced the theory of well-being by encouraging social scientists to move beyond his original definition of happiness and its focus as the primary concern of positive psychology. Whereas happiness was concerned with life satisfaction and having a cheerful disposition, well-being theory, in its new iteration, is comprised of five elements: positive emotion, engagement, positive relationships, meaning, and accomplishment (referred to collectively as PERMA). As explained by Seligman (2011), each element of well-being shares three common characteristics. These common properties are: (1) It contributes to well-being; (2) Many people pursue it for its own sake, not merely to get any of the other elements; and (3) It is defined and measured independently of other elements. Whereas the goal of the original theory of

authentic happiness was primarily concerned with increasing one's level of life satisfaction, the goal of well-being theory is to foster increased levels of *flourishing* by increasing each PERMA element.

The first element, positive emotion, can be assessed subjectively. This element is held-over from Seligman's original theory of authentic happiness but, unlike the previous iteration, positive emotion becomes one of the five important elements as opposed to the single, primary concern. The Hedonic Well-Being approach to assessing emotion involves measures such as the Positive and Negative Affect Scale (Watson, Clark, & Tellegen, 1988). Fredrickson's broaden-and-build theory (2001) suggests that positive emotion is unique from negative emotion in both definition and purpose, and that, over time, "recurrent experiences of positive emotions allow people to build consequential personal resources" (Fredrickson, Cohn, Coffey, Pek, & Finkel, 2008, p. 1057). Fredrickson et al. found these personal resources to be linked with increased self-acceptance, good physical health, and positive relations with others. Hope is one positive emotion focused on future events that has been found to buffer against depression (Seligman, 2002).

Engagement, the second element of well-being theory, is also assessed subjectively through self-report measures. Similar to flow (Csikszentmihalyi, 1996), engagement is concerned with one's ability to become absorbed in a task and this contributes directly to well-being but usually only after the fact. A highly engaged individual needs intrinsic motivation to pursue tasks that relate to a clear goal (Csikszentmihalyi, 1996; Jayawickreme et al., 2012).

The final three elements of the PERMA well-being theory are positive relationships, meaning and accomplishment. The concept of positive relationships is akin to our understanding of social connectedness and the importance of interpersonal relationships (Lee & Robbins, 1995). Meaning is “belonging to and serving something that you believe is bigger than the self” (Seligman, 2011, p. 17). By this definition, meaning carries both subjective and objective elements. One can consider a goal to be personally meaningful while others in society might see it quite differently, and vice versa. Seligman explains that, as a profoundly dejected individual, Abraham Lincoln might have easily judged his life to be without meaning (subjectively) but an objective examination of his contributions to the evolution of America reveals a life full of meaning. Accomplishment, as it relates to well-being theory, is often pursued for no other purpose than its own sake. Simply described, accomplishment is the act of attaining a predetermined goal (Jayawickreme, Forgeard, & Seligman, 2012). Seligman added this final element as a reminder that “the task of positive psychology is to describe, rather than prescribe, what people actually do to get well-being” (2011, p. 20).

Just as the concept of well-being is of fundamental concern to positive psychology, it can be said that hope theory is of primary interest to well-being. Of the 24 character strengths that comprise the primary study of positive psychology, measured at the individual level by the Values in Action (VIA) Inventory (Peterson & Seligman, 2004), hope has been found to have the strongest relationship with well-being, even when controlling for inherent personality traits (Park et al., 2004; Snyder, 2004). Moreover, evidence to-date suggests that extremely high levels of hope,

sometimes referred to as false hope, do not present any negative implications to the individual in terms of his or her quest for well-being (Kwon, 2002; Snyder & Rand, 2003; Snyder, Rand, King, Feldman, & Taylor, 2002).

Hope Theory

Hope, as a cognitive process, consists of three primary elements: goals, agency thinking and pathways thinking (Kwon, 2002; Muilenburg-Trevino, 2009; Rand, 2009; Snyder, 2002; Snyder et al., 1991; Snyder et al., 1997; Snyder, Irving, & Anderson, 1991; Snyder, Ritschel, Rand, & Berg, 2006). Hope theory posits that individuals, when working to attain specific goals, engage in pathways thinking to conceive possible routes to attain said goal. The desired goal can be either short or long term (Sun & Lau, 2006) as long as the individual perceives the goal as realistic (Kwon, 2002). In articulating his theory, Snyder suggested that an element of uncertainty is crucial. “Goals with 100% probability of attainment do not necessitate hope. Conversely, persons pursuing goals with truly 0% probability of attainment often are better served by pursuing other goals” (Snyder, 2000, p. 13). Finally, the ability to map out multiple pathways is also important.

High-hope people purportedly are more confident in their ability to produce multiple routes to a goal compared to low-hope people. This perceived ability is advantageous when a pathway becomes blocked because it allows the person to continue pursuing the goal along an alternate pathway. As a result, greater pathways thinking should increase the likelihood of attaining goals. (Rand, 2009, p. 233)

It is important to note that two major types of goals exist in hope theory. Positive goals, also referenced as approach goals by Snyder (2000), include such outcomes as attaining something for the first time, sustaining something that one already possesses, or increasing the amount of something one desires. In contrast, the second type of goal is sought as a way to delay or circumvent a negative outcome. In the context of hunger and food insecurity, goals can exist in either form: I need the Food Bank's assistance to increase my food security as I await my first paycheck from this new job, or, I need assistance with acquiring food for my children so that I can prevent them from having to go to hungry for the next three days.

As the motivational component of hope theory, agency thinking is operationalized as "the perceived capacity to initiate and sustain movement along a pathway until the [desired] goal is reached" (Rand, 2009, p. 233). When faced with obstacles along their path, some individuals – in particular those considered low-hope – may simply give up on the goal. Here, dispositional agency, that is, the type that remains relatively stable over an individual's lifetime regardless of challenging situations, becomes important as a means to ensure these individuals stay motivated to pursue the original goal even though an alternative pathway will need to be identified (Dorsett, 2010; Kwon, 2002; Snyder, 2000; Snyder, Rand, & Sigmon, 2002).

The elements of hope theory can exist in two dimensions, state and trait. Trait characteristics are thought to be relatively fixed meaning that they vary relatively little over the course of a lifetime; they constitute a given individual's natural dispositions. An individual's trait-specific hope is important because it directly relates to his or her

ability to achieve self-determined goals regardless of situation-specific influence.

Unlike trait agency, state agency is impacted by positive and negative situations and is therefore subject to fluctuation as individuals experience challenges or roadblocks along the path toward achieving their goal. Tong, Fredrickson, Chang, and Lim (2010) found that only state-specific agency was consistently and positively related to goal attainment in the context of hope theory.

“When hope is present, people can identify meaningful and realistic desired outcomes, and harness the resource for pursuing those outcomes” (Gum & Snyder, 2002, p. 883). Moreover,

Hope seems to have considerable promise as a goal-related construct: one of the ways through which people manage their goals and adapt to everyday life challenges is hope. Hope contributes to one’s life fulfillment and longevity, and for this reason is identified in positive psychology as a human strength.

(Papantoniou et al., 2010, p. 13)

Hope theory is distinct from optimism in that it includes both personal agency (the “will”) and strategies to achieve the specific goals identified by the individual (Gallagher & Lopez, 2009). Whereas an optimistic person might feel as though a positive future lies ahead, and perhaps be able to talk in generalities about that future, a high-hope person will have identified pathways to achieve a specific goal that will contribute to that future. The vagueness of the former (optimism) previously satisfied grantmakers but in this new era of performance based funding, the specificity of the latter (hope) is expected from nonprofit organizations when reporting to their funders.

Additionally, hope theory differs from Bandura's theory of self-efficacy in at least one key way.

[The] duality of the agency and pathways components of hope is what clearly distinguishes hope from self-efficacy. Self-efficacy, a belief in one's capabilities to organize and execute courses of action (Bandura, 1997), shares some similarity to the agency (willpower) component of hope, but it differs from hope in that it does not incorporate the pathways component. (Papantoniou, Moraitou, Katsadima, & Dinou, 2010, p. 14)

In empirical tests, hope has been found to account for variance distinct from self-efficacy in predicating well-being (Magaletta & Olivier, 1999; Snyder, 2000).

Empirically, high scores on the Hope Scale have been found to predict desirable outcomes in education (Chang, 1998; Curry & Snyder, 2000; Snyder et al., 1991; Snyder et al., 1997) physical and psychological health (Heller, Wyman, & Allen, 2000; Kaplan, 2000), and athletic competitions (Curry & Snyder, 2000; Curry, Snyder, Cook, Ruby, and Rehm, 1997). Low hope scores have been linked with suicidal ideation among college students (Range & Penton, 1994) and African Americans (Davidson, Wingate, Slish, & Rasmussen, 2010). Relevant to the proposed study, individuals with high scores on the Hope Scale have been found to cope with stressful events (e.g., food insecurity) in more positive ways (Chang, 1998; Chang & DeSimone, 2001).

Stigma

For decades researchers have examined the stigma associated with welfare participation among poor and vulnerable populations in the United States (Rank, 1994; Ranney & Kushman, 1987). Single mothers receiving welfare assistance have been shown to experience greater amounts of psychological distress and hopelessness than their peers not receiving this type of assistance (Pettersen & Friel, 2001). Recipients also report lack of self-respect and other negative self-assessments (Contini & Richiardi, 2012; Jarrett, 1996; Moffitt, 1983). The same stigma and resulting self-doubt could exist when assistance is received from food-providing philanthropic organizations unless great care is taken to minimize this potential by those working for and volunteering with these organizations.

Summary

Studies have been conducted to assess the role of hope as individuals deal with adverse situations such as HIV/AIDS (Westburg & Guindon, 2004), cancer (Hou, Law, Yin, & Fu, 2010), guilt and shame (Williamson, Sandage, & Lee, 2007), and more positive aspects such as performance in academics and sports (Curry, Snyder, Cook, Ruby, & Rehm, 1997; Snyder et al., 2002). Attention has not been given to the role nonprofit organizations play in fostering hope on behalf of the clients they serve and how this hope contributes to an individual's self-perceived well-being. In particular, individuals facing food insecurity on a prolonged basis encounter significant obstacles as they attempt to navigate the pathways toward their desired life goals. This study was conceived to explore this dynamic in Tulsa, Oklahoma, and to provide the five

participating nonprofit organizations with a robust account of their impact as it pertains to hope theory as evidence for their funders. The unique contribution of this study aims to connect the fundamental aspects of American philanthropy (e.g., increasing well-being for clients) with a major construct of positive psychology “defining and enhancing human wellness” (Schueller, 2009, p. 922).

Chapter Three: Methodology

This chapter presents a description of those who participated in this study and a summary of their demographic characteristics along with a detailed accounting of the procedures used for data collection and the resulting data analyses used. Information regarding the psychometric properties of each instrument used is also presented. The University of Oklahoma Institutional Review Board for the Protection of Human Subjects approved the protocol for this study (see Appendix C).

Participants

The target population for this research consisted of clients receiving assistance from 160 nonprofit food pantry programs supported by the Community Food Bank of Eastern Oklahoma (Tulsa, OK). A purposive sample of nonprofit organizations operating food pantry programs was drawn based upon geographic location to minimize duplication of services to clients across programs. A total of 21 organizations were invited to participate in this project and, of this number, five accepted the invitation. Participating organizations included a social service provider for people affected by HIV and AIDS, an organization which assists with emergency needs for families with infants and toddlers, two large organizations affiliated with religious groups, and the Food Bank's self-operated senior assistance program. Leaders of these five organizations attended a two-hour meeting offered as part of a follow-up for the larger Nonprofits as Pathways of Hope initiative underway through the Center of Applied Research for Nonprofit Organizations at OU-Tulsa Schusterman Center. Data were collected over the course of 152 days (from August 9, 2013 through January 8, 2014)

and a total of 493 participants completed the questionnaire after being presented with an Information Sheet for Consent to Participate in a Research Study as approved by the University of Oklahoma Institutional Review Board for the Protection of Human Subjects (see Appendix B).

Demographic information was collected from participants including sex, age, race/ethnicity, relationship status, work status, and zip code of primary residence (see Table 1). The majority of respondents were female (71.5%), Caucasian (46.0%), single (45.1%), and unemployed (39.0%). The mean age was 46.8 (SD = 18.17). A total of 236 respondents (50.4%) also disclosed having children (ages 0 to 17) living in their houses in the previous 12 months. Respondents reported living in a total of 56 unique zip codes at the time of survey completion. Each zip code was verified against the United States Postal Service zip code verification tool and six reported zip codes were flagged as invalid. Therefore, a total of 50 confirmed unique zip codes were represented among the respondents. From this sample, the average respondent was most likely to reside in the 74127 zip code (see Figure III).

Table 1

Demographic Variables of Participants

	Frequency	Valid Percent	Tulsa County Demographics ¹
Sex			
Female	348	71.5%	51.2%
Male	138	28.3%	48.8%
Transgender	1	0.2%	
Race/Ethnicity			
Caucasian	223	46.0%	74.2%
African American	128	26.4%	10.9%
Hispanic/Latino	57	11.8%	11.4%
Multiracial	33	6.8%	5.7%
American Indian	29	6.0%	6.5%
Other	13	2.7%	-
Asian American	2	0.3%	2.5%
Relationship Status			
Single	219	45.1%	-
Married	114	23.5%	-
Divorced	62	12.8%	-
Widowed	44	9.1%	-
Cohabiting	29	6.0%	-
Other	18	3.5%	-
Work Status			
Unemployed	183	39.0%	-
Disabled	123	26.2%	-
Retired	74	15.8%	-
Full-Time	38	8.1%	-
Part-Time	38	8.1%	-
Student	13	2.8%	-
Children (0 to 17) Living in House During Previous 12 Months			
Yes	236	50.4%	-
No	232	49.6%	-

Table 1. Demographic variables of participants. ¹Demographics for Tulsa County from United States Census Bureau (2014)

Figure 2

Boundaries of Zip Code 74127

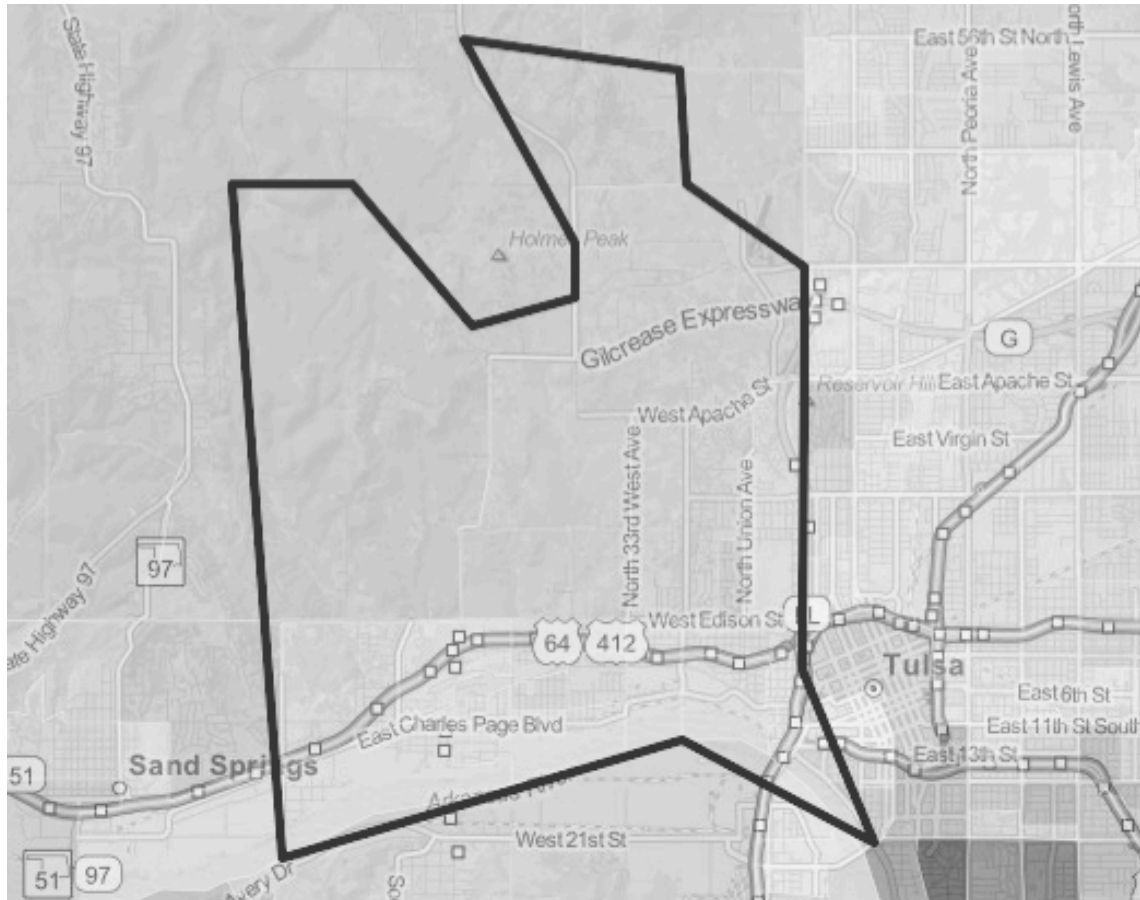


Figure 2. The 74127 Zip Code includes residents of the cities of Tulsa and Sand Springs, Oklahoma. Census data estimates the total population in these boundaries to be 16,821 individuals with an average adjusted gross income of \$29,741. (City-data.com, n.d.)

Design

This was a correlational, cross-sectional design conceived to measure hope, food security and other demographic variables as they correlate with client's self-perceived well-being. Five food-providing nonprofit organizations agreed to participate in this study by having their program staff administer this paper-based, self-report survey to clients during the 152-day data collection period. Staff from each organization received training by the researcher and his advisor in proper protocol for administering surveys. It was stressed that each client should be made aware that participation was optional and would have no impact on whether or not the individual received assistance sought from the food providing program on the day the survey was administered. To address matters of confidentiality, only general demographic information was collected. This research was granted exempt status from The University of Oklahoma Institutional Review Board for the Protection of Human Subjects. It was not necessary to obtain signed copies of an Informed Consent letter from participants. Instead, each participant was provided an information sheet along with the hard-copy survey (see Appendices A and B).

Measures

Instruments used included the Food Security Survey, The Hope Future Scale, The Satisfaction With Life Scale, the Flourishing Scale, and the Scale of Positive and Negative Experience. All scales are available for use without cost to the researcher. Survey items are provided in Appendix A.

Food Security Survey. The Food Security Survey is administered annually by the United States Department of Agriculture. The survey consists of 18 items designed to assess food security at the household level. Two of the items pertain to the respondent's level of perceived uncertainty of food security during the previous 12 months. The remaining items inquire about actual conditions, experiences and behaviors of both adults and children residing in the household during the previous 12 months. Following USDA guidelines, three or more affirmative answers qualify the respondent's household to be food insecure for the referenced 12-month period (Coleman-Jensen, Nord, Andrews, & Carlson, 2012). For the current study, 162 individuals were found to have "very low food security" meaning they reported between 8 and 18 conditions. A total of 168 individuals reported between 3 and 7 conditions classifying them as "low food security." The remaining 102 respondents had 2 or fewer conditions making them "food secure." Sixty respondents skipped at least one of the 18 items in the Food Security Survey therefore these responses were not included in the final analysis. The results of those completing all 18 items indicate a fairly even distribution among the three categories.

The Hope Future Scale. Hope was assessed using the Hope Future Scale (Snyder et al., 1991). The 12-item self-report measure is grouped into three sections: four items measure agency (the individual's determination to achieve his/her goal), four items measure pathways (the individual's ability to progress toward a desired goal even in the face of obstacles), and the remaining four items are used as filler. All items are presented in an eight-point Likert-type response format ranging from *1=definitely false*

to 8=*definitely true*. Total scores range from 12 to 96 with high scores reflecting high levels of hope. In addition to a total hope score, sub-scores can be obtained for an individual's reported agency and pathways thinking. Each sub-score can range from a four to a 32, with high scores again reflecting higher agency and pathways thinking.

Initially administered to six unique samples of students enrolled in introductory psychology courses at the University of Kansas and two samples of patients receiving psychological treatment, the psychometric properties of the Hope Future Scale (Snyder et al., 1991) were found to be stable for the scores obtained. Cronbach's alpha scores for the total scale ranged from .74 to .84; for the agency sub-scale the range was .71 to .76; and, for the pathways sub-scale the range was .63 to .80. A reliability generalization study conducted Hellman, Pittman, and Munoz (2012) supports the stability of scores obtained using the Hope Future Scale, with mean total scale scores ranging from .77 to .82. Nunnally (1978) confirmed that scales producing internal reliability scores of .70 to .80 are acceptable for research purposes (as cited in Snyder et al., 1991). For the present sample, Cronbach's alpha for the total hope scale was .86, slightly higher than scores reported in the reliability generalization study.

The Satisfaction with Life Scale. The five-item Satisfaction with Life Scale (Diener, Emmons, Larsen, & Griffin, 1985) utilizes a seven-point Likert-type response scale ranging from 1=*strongly disagree* to 7=*strongly agree*. Scores obtained from this self-report measure range from five to 35 with high scores representing high satisfaction with life. Representative statements include "in most ways my life is close to ideal" and "I am satisfied with my life." Cronbach's alpha coefficient of .87 was reported when

the original scale was presented. For the present sample, Cronbach's alpha matched the .87 reported with the original scale.

The Scale of Positive and Negative Experience (SPANE). Diener and Biswas-Diener (2009) presented their 12-item measure, consisting of six items devoted to positive experiences and six items pertaining to negative experiences. "Because the scale includes general positive and negative feelings, it assesses the full range of positive and negative experiences, including specific feelings that may have unique labels in particular cultures" (Diener et al., 2010, p. 146). Items take the form of single-word adjectives. Respondents are asked to reflect on their experiences over the previous four-week period and then, using a five-point Likert-type scale, indicate the extent to which each feeling was experienced. Response options range from *1=very rarely or never* to *5=very often or always*. The six positive items – positive, good, pleasant, happy, joyful, and contented -- are summed to produce the positive feelings sub-score (SPANE-P) with possible scores ranging from six to 30. High scores represent high positive feelings. The six negative feelings – negative, bad, unpleasant, sad, afraid, and angry – are summed to produce the negative feelings sub-score (SPANE-N) with possible scores again ranging from six to 30. Here, high scores represent high negative feelings. To arrive at the affect balance (SPANE-B) score, the SPANE-N is subtracted from the SPANE-P. Possible scores for SPANE-B range from a -24 (unhappiest) to 24 (highest possible affect balance). "A respondent with a very high score of 24 reports that she or he rarely or never experiences any of the negative feelings, and very often or always has all of the positive feelings" (Diener et al., 2010,

p. 154). Cronbach's alpha scores for SPANE-P and SPANE-N were respectively .87 and .81 respectively. For the present sample, Cronbach's alpha scores for SANE-P and SPANE-N were .89 and .84 respectively.

Procedure

Once each Executive Director from the five participating organizations agreed to participate in this study, their key staffers participated in one of two workshops held by the researcher and his dissertation advisor. The purpose of the workshop was to familiarize the nonprofit staffers of the purpose of the present study and to provide basic training on the proper techniques for data collection. It was stressed that clients should be assured their participation in this project was voluntary and would not in any way impact their ability to receive food assistance sought through the organization. Each of the Executive Directors was also made aware of this important detail and each agreed to follow up with their respective staff members during data collection to ensure this was thoroughly communicated.

To circumvent issues of confidentiality, and to allow the participants to maintain the greatest level of dignity possible, the researcher was not directly involved in the data collection process. Upon approval from The University of Oklahoma Human Subjects Review Board, each of the five participating nonprofit organizations administered the survey (see Appendix A) to clients as part of their intake process during the 152-day data collection period. Completed surveys were given to the researcher in five batches during the five-month data collection window. A total of 493 completed surveys were received.

Analysis

Data were analyzed using the Statistical Package for the Social Sciences (SPSS) software available to students at The University of Oklahoma. Demographic information presented earlier in this chapter was analyzed using the general frequencies and descriptive functions of SPSS. The first three hypotheses were analyzed using bivariate correlations. After testing for the assumptions of regression, a multiple linear regression was computed to test the fourth hypothesis. The significance level for this study was set at $p < .05$ as is customary in social science research (Hoy, 2010; Pedhazur, 1997; Vogt, 2007).

Chapter Four: Results

This purpose of this quantitative correlational research was to examine the relationships between hunger, hope, and well-being among individuals receiving assistance from a group of nonprofit organizations in Oklahoma. The independent variable of interest in this study was well-being, measured by the Satisfaction With Life Scale and, separately, with the Scale of Positive and Negative Experience (SPANE). Dependent variables included scores from the hope and food insecurity scales. To the extent we can understand ways in which nonprofit organizations are making positive contributions toward the well-being of their clients, over and above the benefits of the goods and services directly provided, we can equip nonprofit organizations and their philanthropic supporters with information they need to continue their respective missions, and to raise the required funds to support this work.

The research questions, and subsequent hypotheses, developed to guide this work were as follows:

RQ₁: Is food insecurity negatively related to well-being?

RQ₂: Is hope positively related to well-being among individuals receiving food assistance?

RQ₃: Does hope account for significant variances in well-being over and above food security?

H₁ Food insecure individuals will report negative levels of life satisfaction.

H₂ Food insecure individuals will have higher levels of negative affect and lower levels of positive affect.

H₃ Individuals living in food insecure homes that receive food assistance from nonprofit organizations will report high, positive levels of agency-specific hope.

H₄ Hope will account for significant variance in well-being over and above food insecurity.

Completed Surveys

A total of 493 completed hard-copy surveys were collected from individual clients of five nonprofit organizations between August 9, 2013, and January 8, 2014. The number of completed surveys per organization ranged from a low of 87 to a high of 118 (see Table 2). There was limited missing data among the completed surveys.

Table 2

Completed surveys per organization

Organization	Frequency	Valid Percent
Tulsa CARES	92	18.7%
Restore Hope	99	20.1%
Food Bank Senior Feeding	87	17.6%
Catholic Charities	118	23.9%
Emergency Infant Services	97	19.7%

Table 2. Completed surveys per organization. N = 493

Hypotheses One, Two, and Three

A correlation matrix was produced using scale scores computed from the data obtained. Table 3 provides the correlation values with internal consistency reliability (Cronbach's Alpha) scores reported along the diagonal. Score reliability estimates resulted in coefficient alpha's ranging from a low of .77 to a high of .89 suggesting relatively acceptable levels of measurement error (Nunnally, 1978; Cortina, 1993). Correlation strength was interpreted using the standard small ($\pm .10$), medium ($\pm .30$), and large ($\pm .50$) effect size categories established by Cohen (1992).

The first hypothesis stated *food insecure individuals will report negative levels of life satisfaction*. The observed correlation for Food Insecurity and Satisfaction with Life ($r = -.210$; $p < .01$) was negative. Although the strength of the correlation was classified as small using the heuristic developed by Cohen (1992), it was found to be statistically significant. The first hypothesis was supported.

Hypothesis number two stated *food insecure individuals will have higher levels of negative affect and lower levels of positive affect*. The observed correlation between Food Insecurity and Negative Affect, as measured by the SPANE, was small, positive, and statistically significant ($r = .217$; $p < .01$). With regard to Positive Affect, the observed correlation was small, negative, and statistically significant ($r = -.166$; $p < .01$). For this hypothesis, the words "higher" and "lower" refer not to strength but to direction so as to avoid confusing language such as "positive levels of negative affect" and "negative levels of positive affect." Observed correlations were consistent with the hypothesized directions thus supporting the second hypothesis.

Table 3

Zero-Order Correlation Matrix

Scale	Items	Mean	SD	1	2	3	4	5	6
1. Food Insecurity	18	6.03	4.299	<i>n/a</i>					
2. Hope Agency	4	24.57	5.271	-.119*	.821				
3. Hope Pathways	4	25.75	4.670	-.078	.653**	.774			
4. Satis w Life	5	19.04	7.363	-.210**	.308**	.200**	.868		
5. SPANE Pos	6	22.35	4.888	-.166**	.408**	.328**	.511**	.897	
6. SPANE Neg	6	15.25	4.782	.217**	-.432**	-.267**	-.363**	-.503**	.845

Table 3. **. Correlation is significant at the 0.01 level (2-tailed)

*. Correlation is significant at the 0.005 level (2-tailed)

Internal consistency reliability scores reported along the diagonal.

The third hypothesis stated *individuals living in food insecure homes that receive food assistance from nonprofit organizations will report high, positive levels of agency-specific hope*. By design, all respondents in this study received food assistance from nonprofit organizations. The observed correlation between Food Insecurity and Hope Agency was small, negative, and statistically significant ($r = -.119; p < .05$). Thus, this third hypothesis was not supported.

Hypothesis Four

The final hypothesis stated *hope will account for significant variance in well-being over and above food insecurity*. Prior to computing the multiple linear regression, it was appropriate to first test the statistical assumptions of regression (Ethington, Thomas, & Pike, 2002; Pedhazur, 1997). The process outlined by Lomax & Hahs-Vaughn (2012) was used to test for violations to independence, homogeneity, normality, and linearity.

Linearity. The assumption of linearity is concerned with ensuring a linear relationship exists between the dependent and independent variables (Lomax & Hahs-Vaughn, 2012). For the present data, a review of the partial scatterplot of the independent variables and the dependent variable (Satisfaction with Life) indicated linearity was a reasonable assumption. Additionally, a review of the zero-order correlations suggested further evidence of linearity among the data.

Normality. The assumption of normality, meaning a normal distribution shape, was tested. A total of 17 outliers were detected among the 493 cases used in the analyses, representing less than 3 percent of the data being examined. The maximum centered leverage value of .0 suggests there are no problems with cases exerting undue influence on the model (Lomax & Hahs-Vaughn, 2012).

Independence. This assumption is concerned with ensuring each error is independent of the other errors (Lomax & Hahs-Vaughn, 2012). A relatively random display of points in the scatterplots of studentized residuals against values of the independent variables and studentized residuals against predicted values provided

evidence of independence. The Durbin-Watson statistic was computed to evaluate independence of errors and was observed to be 2.044, which is in the range considered acceptable (Durbin & Waston, 1950). This suggested the assumption of independent errors was met.

Homogeneity of Variance. This fourth assumption seeks to ensure a relatively constant variance of residuals appears across the range of independent variable scores. A scatterplot with a random display of points, where the spread of residuals appeared fairly constant over the range of values of the independent variables, provided evidence of homogeneity of variance.

Multicollinearity. Tolerance was greater than .1 across all independent variables, and the variance inflation factor for each was less than 3, suggesting that multicollinearity was not an issue (Lomax & Hahs-Vaughn, 2012). The eigenvalues for the predictors were close to 0 (.021 and .012). A review of food insecurity regressed on hope agency produced a multiple R squared of .196, which again suggests noncollinearity.

Hierarchical Regression. Food Insecurity was entered as the first independent variable in the Hierarchical Regression model and accounted for 4% of the variance in Satisfaction with Life, $R^2 = .040$, $F(1, 395) = 16.512$, $p < .001$. Next, Hope Pathways was entered in Block 2 and accounted for 3.5% of the explained variance over and above Food Insecurity, $\Delta R^2 = .035$, $F(1, 394) = 14.911$, $p < .001$. Finally, Hope Agency was entered into the third block of the analysis. The results of the hierarchical linear regression suggested that a significant portion of the total variation in Satisfaction with

Life was explained by Hope Agency over and above Food Insecurity and Hope Pathways, $\Delta R^2 = .057$, $F(1, 393) = 25.972$, $p < .001$.

Table 4

Results of Hierarchical Regression DV: Satisfaction with Life

	Step 1: USDA Raw Score	Step 2: Hope Pathway	Step 3: Hope Agency
F	16.512***	16.002***	20.002***
R ²	.040	.075	.132
ΔF	16.512***	14.911***	25.972***
B	-.163	-.017	.317
95% CI	-.503 - -.175	.146 - .449	.274 - .618

Table 4. * $p < .05$, ** $p < .01$, *** $p < .001$. Effects reported are standardized Betas. DV = SWL

Additionally, I found the following:

1. For Food Insecurity the unstandardized partial slope (-.275) and the standardized partial slope (-.163) were statistically significantly different from 0 ($t = -3.437$, $df = 393$, $p < .001$); indicating that for every one standard deviation increase in Food Insecurity, Satisfaction with Life decreased by approximately one-fourth of one standard deviation.
2. For Hope Agency the unstandardized partial slope (.446) and standardized partial slope (.317) were statistically significantly different from 0 ($t = 5.096$, $df = 393$, $p < .001$); meaning that for every one standard deviation increase in Hope

Agency, Satisfaction with Life increased by approximately one-half of one standard deviation when controlling for Food Insecurity.

3. The Confidence Interval around the unstandardized partial slopes did not include 0 (Food Insecurity -.433, -.118; Hope Agency .274, .618), further confirming that these variables were statistically significant predictors of Satisfaction with Life.
4. The intercept (or average Satisfaction with Life when Food Insecurity was held at 0) was 10.488 and was statistically significantly different from 0 ($t = 4.936$, $df = 393$, $p < .001$).
5. R^2 indicated that approximately 13% of the variation in Satisfaction with Life was predicted by Food Insecurity and Hope Agency. Interpretation according to Cohen (1998) suggested the strength of the relationship had a small effect on Satisfaction with Life.

Also included in the survey was the Scale of Positive and Negative Experience (SPANE). When substituting SPANE Balance as the dependent variable, in place of the Satisfaction with Life as in the previous analysis, the result of the hierarchical linear regression suggested that a significant portion of the total variance in affect was again predicted by Hope Agency over and above Food Insecurity and Hope Pathways.

As in the previous analysis, Food Insecurity was entered as the first independent variable and accounted for roughly 6% of the variance in affect, as measured by the SPANE, $R^2 = .057$, $F(1, 373) = 22.539$, $p < .001$. Next, Hope Pathways was entered

in the second block and accounted for approximately 11% of the variance over and above Food Insecurity, $\Delta R^2 = .113$ $F(1, 371) = 50.811$, $p < .001$. Finally, Hope Agency was entered in the third block and accounted for an additional 10% of the variation over and above Food Insecurity and Hope Pathways, $\Delta R^2 = .103$, $F(1, 371) = 52.452$, $p < .001$. This suggested that a significant proportion of the total variation in the respondent's affect, also a component of well-being as described in chapter 2, was predicted by Food Insecurity and Hope Agency.

Table 5

Results of Hierarchical Regression DV: SPANE Balance

	Step 1: USDA Raw Score	Step 2: Hope Pathway	Step 3: Hope Agency
F	22.539***	38.180***	46.458***
R ²	.057	.170	.273
ΔF	22.539***	50.811***	52.452***
B	-.239	-.213	.438
95% CI	-.649 - -.269	.432 - .761	.506 - .883

Table 5. * p < .05, ** p < .01, *** p < .001. Effects reported are standardized Betas. DV = SPANE Balance

Additionally, I found the following for this second analysis:

1. For Food Insecurity the unstandardized partial slope (-.336) and the standardized partial slope (-.175) were statistically significantly different from 0 ($t = -3.906$, $df = 371$, $p < .001$).

2. For Hope Agency the unstandardized partial slope (.742) and the standardized partial slope (.468) were statistically significantly different from 0 ($t = 10.660$).
3. The Confidence Interval around the unstandardized partial slopes did not include 0 (Food Insecurity -.505, -.176; Hope Agency .506, .883), further confirming that these variables were statistically significant predictors of affect.
4. The intercept (or average SPANE Balance when Food Insecurity was held at 0) was -9.778 and was statistically significantly different from 0 ($t = -4.373$, $df = 388$, $p < .001$).
5. R^2 indicated that approximately 27% of the variation in affect was predicated by Food Insecurity and Hope Agency. Interpreted according to Cohen (1988) suggests a small effect on affect as measured by the SPANE.

Chapter Five: Discussion

In 1954, Abraham H. Maslow articulated his famous theory commonly referred to as the Hierarchy of Human Needs (Maslow, 1954). Comprised of five levels of need, visually arranged in the form of a pyramid (see Figure 3), this hierarchy starts with basic, physiological requirements and builds upward toward the apex of self-actualization (Goodman, 1968). Maslow categorizes the lowest four levels as deficiency needs, meaning the absence of such items causes stress in the individual attempting to fulfill the requirement (Litwack, 2007). Food is considered to be among the lowest-level, most primal needs in the hierarchy.

Some social stigma has long existed regarding the efficacy of emergency relief programs such as those that provide food assistance (Piven & Cloward, 1993). Skeptics commonly cite two primary concerns: this type of basic-needs assistance encourages recipients to become dependent on the “system,” and recipients often abuse resources to obtain lavish or non-food items (Neubeck & Cazenave, 2001). The Iron Rule, a basic tenet of social work and community organizing, cautions us to “never, ever, do for people what they can do for themselves” (Rubin & Rubin, 2008, p. 182).

The general goal of philanthropy is to empower individuals so that they are able to move up Maslow’s hierarchy toward self-actualization -- where it is believed they can flourish. As we know, this will remain difficult until basic biological requirements, such as nutritious food, are satisfied. As a new generation of decision-makers move into philanthropic leadership roles, it will be important for them to understand the extent

to which charitable food-providing programs support individual movement for clients to become self-sustaining individuals.

The purpose of this study was to examine hope theory as it contributes to well-being for clients receiving emergency food assistance from nonprofit organizations in Tulsa, Oklahoma. A review of the current literature on hope theory informed this research and suggested that individuals with higher levels of agency specific hope would report higher levels of well-being even when facing the challenges that stem from food insecurity. This is significant because human-service nonprofit organizations exist with a mission to improve client well-being and an increasing demand from philanthropic supporters to demonstrate the impact of their work beyond number of meals provided, pounds of food distributed, etc.

Figure 3

Maslow's Hierarchy of Human Needs

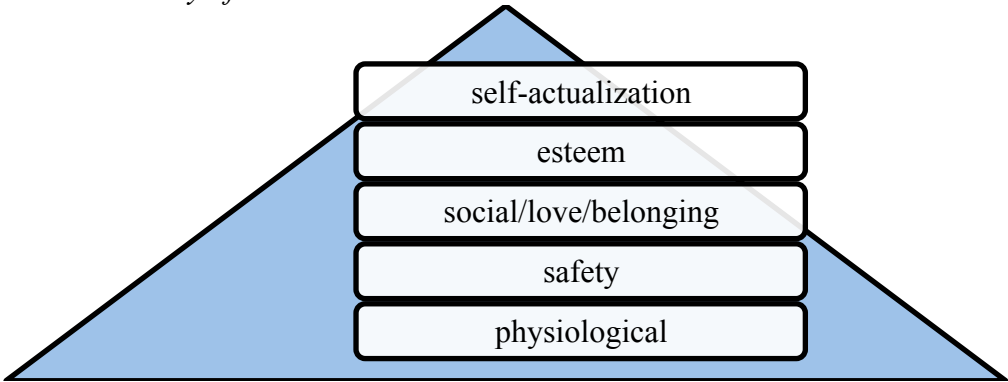


Figure 3. Visual representation of Abraham Maslow's Hierarchy of Human Needs.

Adapted from Maslow, 1954.

Conclusions Related to the Hypotheses

The zero-order correlation matrix (see Table 3) suggests support for the first two hypotheses delineated for this study. Among the respondents, food insecure individuals reported negative levels of life satisfaction (H_1) while also reporting higher levels of negative affect and lower levels of positive affect (H_2). Together these two hypotheses empirically support a common assumption held in the philanthropic sector: individuals struggling with food insecurity (aka hunger) generally perceive themselves to have a lower quality of life (aka well-being). With respect to Maslow's Hierarchy of Human Needs, these individuals spend a majority of their energy struggling to satisfy their most basic physiological needs (the lowest tier in the hierarchy).

The third hypothesis (H_3) stated *individuals living in food insecure homes that receive food assistance from nonprofit organizations will report high, positive levels of agency-specific hope*. The resulting correlation coefficient between Food Insecurity and Hope Agency was found to be small and negative ($r = -.119; p < .05$). By design, all respondents in this study were living in food insecure homes and receiving support from nonprofit organizations. Therefore, it is not possible to know how this correlation would compare to those living in food insecure homes but not receiving assistance from food-providing nonprofit organizations. This will be later addressed as a limitation to this study.

A hierarchical linear regression was computed to test the fourth hypothesis (H_4) for this study: *hope will account for significant variance in well-being over and above food insecurity*. Two dependent variables were individually analyzed in the regression

model along with the consistent independent variables of Food Insecurity, Hope Pathways, and Hope Agency. When Satisfaction with Life was used as the dependent variable, Hope Agency was found to explain approximately 13% of the variance over and above Food Insecurity and Hope Pathways. When the Scale of Positive and Negative Experience (SPANE) was substituted as the dependent variable, Hope Agency accounted for 27% of the variance over and above Food Insecurity and Hope Pathways. In both cases, Hope Agency – an individual’s intrinsic motivation – was found to be a significant component of her or his well-being.

Implications to Nonprofit Organizations

As the nonprofit sector continues to work with individual clients to promote the highest-possible levels of well-being and self-sufficiency, it is becoming increasingly necessary for the organizations to speak to their results in more sophisticated terms. Nonprofit organizations charged with satisfying basic needs have long relied on outputs such as number of meals served or pounds of food provided during a given time frame. Grantmaking foundations in Tulsa, Oklahoma, should continue to explore the application of hope theory as an outcome measure for the nonprofit organizations they support – in particular those that provide basic needs support such as food and shelter.

Using the language of hope theory, local grantmakers and nonprofit professionals understand that the nonprofit organizations are themselves the *pathways* to goal attainment for the individuals they serve. In this context the work of each individual nonprofit organization becomes to foster hope by increasing levels of *agency*

in those they serve. By doing so, the clients become empowered to persevere toward their individual goals in spite of such challenges as hunger, homelessness, etc.

Implications to Research

This research marks an early attempt to apply hope theory to the work of nonprofit organizations providing basic-needs services in Tulsa, Oklahoma. The agency component of hope theory seems to be a good predictor of individual well-being, even among individuals facing primary challenges such as hunger. As the body of literature continues to emerge, it is promising to know that hope theory may have continued application in the context of nonprofit and philanthropic work. Future research could examine the application of hope theory to nonprofit organizations seeking to improve client well-being for those facing homelessness as well as those organizations that strive to prevent a given condition from occurring (e.g., dropping out of school, child abuse/neglect, etc.). With regard to the academic literature, this study advances our understanding of hope theory as it applies to goal attainment for those facing significant life stressors such as hunger. Findings from this study build upon prior work and suggest that Hope Agency may account for variance distinct from Hope Pathways in predicting well-being. Additionally, the use of the SPANE as an outcome measure of affect supports earlier work that suggests high-hope individuals may deal with stressful events in more positive ways (e.g., Chang, 1998; Chang & DeSimone, 2001).

Limitations

Several limitations regarding this study should be noted. As a cross-sectional, self-report design, the data produced from this research provide only a snapshot of the conditions perceived by the respondents at the time they were reported. Also, it is important to remember that food insecurity in Tulsa may look different than in other cities because of Tulsa's robust response system supported by our generous and abundant philanthropic community. Additionally, a convenience sampling approach was used with food-providing nonprofit organizations affiliated with the Food Bank of Eastern Oklahoma. These organizations self-selected to participate in this research project after attending a workshop on hope theory sponsored by one of the larger grantmaking foundations in Tulsa. Although it was heavily stressed that clients should be made aware their participation in this study was voluntary, and refusal to participate would not impact their ability to receive food assistance from the nonprofit organization, the researcher cannot guarantee the data were not influenced by inherent social desirability. As previously mentioned, the design of this study limited participation to those individuals residing in food insecure households and seeking assistance from food providing nonprofit organizations in the Tulsa community. This limited the researcher's ability to compare findings against those who did not seek such assistance. Future research should be designed in such a way to mitigate these limitations.

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Appendix A: Survey

Section 1: Tell us about yourself

- 1 Are you Female Male
- 2 In what month and year were you born? Month _____ Year _____
- 3 What is your current zip code? _____
- 4 What is your race/ethnicity?
 African American Caucasian American Indian
 Asian American Hispanic or Latino Other

- 5 What is your employment?
 Full Time Part Time Retired
 Unemployed Disabled Student
- 6 Are you currently
 Single Married/Partnered Divorced
 Cohabiting Widowed Other

- 7 For how many dependents do you currently provide food? _____
- 8 In the past 12 months, how many times have you sought assistance from a food-providing nonprofit organization in the Tulsa area? _____

Section 2: Food Security (*Food Security Survey, USDA*)

9. *I/we worried whether our food would run out before I/we got money to buy more.*

In this last 12 months, was this statement:

- Often True Sometimes True Never True

10. *The food that I/we bought just didn't last and I/we didn't have money to get more.*

In this last 12 months, was this statement:

- Often True Sometimes True Never True

11. *We couldn't afford to eat nutritious meals.*

In this last 12 months, was this statement:

- Often True Sometimes True Never True

12. In the last 12 months, did you or other adults in the household ever cut the size of your meals or skip meals because there wasn't enough money for food?

- No Yes

If yes, how often did this happen?

- Almost every month
 Some months but not every month
 Only 1 or 2 months

13. In the last 12 months, did you ever eat less than you felt you should because there wasn't enough money for food?

- No Yes

14. In the last 12 months, were you ever hungry but didn't eat because there wasn't enough money for food?

No Yes

15. In the last 12 months, did you lose weight because there wasn't enough money for food?

No Yes

16. In the last 12 months, did you or other adults in your household ever not eat for a whole day because there wasn't enough money for food?

No Yes

If yes, how often did this happen?

- Almost every month
- Some months but not every month
- Only 1 or 2 months

17. During the past 12 months, did you have any children age 0 to 17 living in your household?

No (*skip to Q.24*) Yes (*proceed with Q.18*)

18. *We relied on only a few kinds of low-cost food to feed our children because we were running out of money to buy food.*

In this last 12 months, was this statement:

Often True Sometimes True Never True

19. *We couldn't feed our children a nutritious meal because we couldn't afford that.*

In this last 12 months, was this statement:

Often True Sometimes True Never True

20. *The children were not eating enough because we just couldn't afford enough food.*

In this last 12 months, was this statement:

- Often True Sometimes True Never True

21. In the last 12 months, did you ever cut the size of any of the children's meals or because there wasn't enough money for food?

- No Yes

If yes, how often did this happen?

- Almost every month
 Some months but not every month
 Only 1 or 2 months

22. In the last 12 months, did any of the children in your household ever skip a meal because there wasn't enough money for food?

- No Yes

If yes, how often did this happen?

- Almost every month
 Some months but not every month
 Only 1 or 2 months

23. In the last 12 months, did any of the children in your household ever not eat for a whole day because there wasn't enough money for food?

- No Yes

If yes, how often did this happen?

- Almost every month
 Some months but not every month
 Only 1 or 2 months

Section 3: Hope Future Scale (Snyder et al., 1991)

Please respond to each of the following 12 items using the scale provided.

Definitely True
Mostly True
Somewhat True
Slightly True
Slightly False
Somewhat False
Mostly False
Definitely False

24. I can think of many ways to get out of a jam.....	①	②	③	④	⑤	⑥	⑦	⑧
25. I energetically pursue my goals	①	②	③	④	⑤	⑥	⑦	⑧
26. I feel tired most of the time.....	①	②	③	④	⑤	⑥	⑦	⑧
27. There are lots of ways around my problem	①	②	③	④	⑤	⑥	⑦	⑧
28. I am easily downed in an argument	①	②	③	④	⑤	⑥	⑦	⑧
29. I can think of many ways to get the things in life that are most important to me	①	②	③	④	⑤	⑥	⑦	⑧
30. I worry about my health.....	①	②	③	④	⑤	⑥	⑦	⑧
31. Even when others get discouraged, I know I can find a way to solve the problem.....	①	②	③	④	⑤	⑥	⑦	⑧
32. My past experiences have prepared me well for my future....	①	②	③	④	⑤	⑥	⑦	⑧
33. I've been pretty successful in life	①	②	③	④	⑤	⑥	⑦	⑧
34. I usually find myself worrying about something.....	①	②	③	④	⑤	⑥	⑦	⑧
35. I meet the goals that I set for myself.....	①	②	③	④	⑤	⑥	⑦	⑧

Section 4: Satisfaction With Life Scale (*Diener, Emmons, Larsen, & Griffin, 1985*)

Please respond to each of the following 5 items using the scale provided.

Strongly Agree
Agree
Slightly Agree
Neither Agree nor Disagree
Slightly Disagree
Disagree
Strongly Disagree

- | | | | | | | | |
|---|---|---|---|---|---|---|---|
| 36. In most ways my life is close to my ideal..... | ① | ② | ③ | ④ | ⑤ | ⑥ | ⑦ |
| 37. The conditions of my life are excellent | ① | ② | ③ | ④ | ⑤ | ⑥ | ⑦ |
| 38. I am satisfied with my life | ① | ② | ③ | ④ | ⑤ | ⑥ | ⑦ |
| 39. So far I have gotten the important things I want in life | ① | ② | ③ | ④ | ⑤ | ⑥ | ⑦ |
| 40. If I could live my life over, I would change almost nothing | ① | ② | ③ | ④ | ⑤ | ⑥ | ⑦ |

Section 5: Flourishing Scale (*Diener & Biswas-Diener, 2009*)

Please respond to each of the following 8 items using the scale provided.

Strongly Agree
Agree
Slightly Agree
Neither Agree nor Disagree
Slightly Disagree
Disagree
Strongly Disagree

- | | | | | | | | |
|---|---|---|---|---|---|---|---|
| 41. I lead a purposeful and meaningful life | ① | ② | ③ | ④ | ⑤ | ⑥ | ⑦ |
| 42. My social relationships are supportive and rewarding | ① | ② | ③ | ④ | ⑤ | ⑥ | ⑦ |
| 43. I am engaged and interested in my daily activities | ① | ② | ③ | ④ | ⑤ | ⑥ | ⑦ |
| 44. I actively contribute to the happiness and well-being of others | ① | ② | ③ | ④ | ⑤ | ⑥ | ⑦ |
| 45. I am competent and capable in the activities that are important to me | ① | ② | ③ | ④ | ⑤ | ⑥ | ⑦ |
| 46. I am a good person and live a good life | ① | ② | ③ | ④ | ⑤ | ⑥ | ⑦ |
| 47. I am optimistic about my future..... | ① | ② | ③ | ④ | ⑤ | ⑥ | ⑦ |
| 48. People respect me | ① | ② | ③ | ④ | ⑤ | ⑥ | ⑦ |

Section 6: Scale of Positive and Negative Experience (Diener & Biswas-Diener, 2009)

Please think about what you have been doing and experiencing during the past 4 weeks. Use the scale provided to indicate how much you experienced each of the following feelings.

Very Often or Always					
Often					
Sometimes					
Rarely					
Very Rarely or Never					

49.	Positive.....	①	②	③	④	⑤
50.	Negative.....	①	②	③	④	⑤
51.	Good.....	①	②	③	④	⑤
52.	Bad.....	①	②	③	④	⑤
53.	Pleasant.....	①	②	③	④	⑤
54.	Unpleasant.....	①	②	③	④	⑤
55.	Happy.....	①	②	③	④	⑤
56.	Sad.....	①	②	③	④	⑤
57.	Afraid.....	①	②	③	④	⑤
58.	Joyful.....	①	②	③	④	⑤
59.	Angry.....	①	②	③	④	⑤
60.	Contented.....	①	②	③	④	⑤

Appendix B: Information Sheet for Consent to Participate in a Research Study

My name is Randy K. Macon and I am a doctoral candidate at the University of the Oklahoma. I am requesting that you volunteer to participate in a project titled Feeding hope: An examination of hope theory among food-providing NGOs in Tulsa. You were selected as a possible participant because you are currently receiving assistance from a nonprofit organization that has a relationship with the Community Food Bank of Eastern Oklahoma. Please read this information sheet and contact me to ask any questions that you may have before agreeing to take part in this study.

Purpose of the Research Study: The purpose of this project is to assess perceived well-being among individuals receiving assistance from food-providing nonprofit organizations in eastern Oklahoma.

Procedures: If you agree to be in this study, you will be asked to complete an anonymous, paper-based questionnaire which will require between 15 to 25 minutes of your time.

Risks and Benefits of Being in the Study: There are no risks or benefits associated with participating in this study.

Compensation: You will not be compensated for your time and participation in this study. Further, please know that your ability to obtain assistance from the nonprofit organization will in no way be dependent upon your participation in this research study.

Voluntary Nature of the Study: Participation in this study is voluntary. Your decision whether or not to participate will not result in penalty or loss of benefits to which you are otherwise entitled. If you decide to participate, you are free not to answer any question or discontinue participation at any time without penalty or loss of benefits to which you are otherwise entitled.

Length of Participation: Completion of the questionnaire should require between 15 to 25 minutes.

Confidentiality: The records of this study will be kept private. In published reports, there will be no information included that will make it possible to identify you as a research participant. Research records will be stored securely in locked files and online servers that are password protected. Resulting data will be kept for six months after the completion of the project. Only approved researchers will have access to the records.

Contacts and Questions: If you have concerns or complaints about the research, the researchers conducting this study can be contacted as follows: Chan Hellman, PhD: (918) 660-3484, chellman@ou.edu; Randy Macon, MHR: (918) 660-3473, rmacon@ou.edu. In the event of a research-related injury, please contact one of the researchers. If you have any questions, concerns, or complaints about the research and wish to talk to someone other than the individuals on the research team, or if you cannot reach the research team, you may contact the University of Oklahoma – Norman Campus Institutional Review Board (OU-NC IRB) at (405) 325-8110 or irb@ou.edu.

Statement of Consent: By completing the accompanying survey you agree to participate in this research study. If you do not wish to participate, please do not complete the survey.

Appendix C: Institutional Review Board Letter of Approval



Institutional Review Board for the Protection of Human Subjects Approval of Initial Submission – Exempt from IRB Review – AP01

Date: July 03, 2013

IRB#: 3327

Principal Investigator: Randy Kirk Macon

Approval Date: 07/03/2013

Exempt Category: 2

Study Title: Feeding Hope: An examination of hope theory among food-providing NGOs in Tulsa

On behalf of the Institutional Review Board (IRB), I have reviewed the above-referenced research study and determined that it meets the criteria for exemption from IRB review. To view the documents approved for this submission, open this study from the *My Studies* option, go to *Submission History*, go to *Completed Submissions* tab and then click the *Details* icon.

As principal investigator of this research study, you are responsible to:

- Conduct the research study in a manner consistent with the requirements of the IRB and federal regulations 45 CFR 46.
- Request approval from the IRB prior to implementing any/all modifications as changes could affect the exempt status determination.
- Maintain accurate and complete study records for evaluation by the HRPP Quality Improvement Program and, if applicable, inspection by regulatory agencies and/or the study sponsor.
- Notify the IRB at the completion of the project.

If you have questions about this notification or using iRIS, contact the IRB @ 405-325-8110 or irb@ou.edu.

Cordially,

A handwritten signature in black ink that reads 'Lara Mayeux'.

Lara Mayeux, Ph.D.
Chair, Institutional Review Board

Appendix D: Map of Respondent Zip Codes

