A Comparison of Student Hope and Social-Emotional Competence Between General Education and Special Education Settings

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A COMPARISON OF STUDENT HOPE AND SOCIAL-EMOTIONAL
COMPETENCE BETWEEN GENERAL EDUCATION AND SPECIAL EDUCATION
SETTINGS

By
Whitley R. Hettenbaugh

A DISSERTATION

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Abstract

A COMPARISON OF STUDENT HOPE AND SOCIAL-EMOTIONAL COMPETENCE BETWEEN GENERAL EDUCATION AND SPECIAL EDUCATION SETTINGS

Whitley Hettenbaugh, Ed.D.
University of Nebraska, 2021
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Hope, the ability to establish goals, plan for the future, persist in the face of challenges, and motivate oneself throughout the goal cycle, is a social endeavor requiring the collective support and resources of families, school staff, and peers. Schools that teach and reinforce life skills (i.e., hope and social-emotional competence) are able to positively impact student outcomes by teaching the skills necessary to build social support systems, improve the safety of the school by facilitating social-emotional expression, foster collaboration and collective success, and give students meaningful voice and choice. In doing so, schools increase the resources available to students in their goal pursuits. Hope and social-emotional competence are important because they impact every aspect of a child’s development which, in turn, affects the child’s future goals and their ability to motivate themselves, access and utilize resources, problem-solve to overcome barriers, inhibit and facilitate behaviors, and achieve their goals. Students’ backgrounds, the environments in our schools, student risk factors, and the school’s ability to adapt to meet students’ needs have the potential to impact students’ life skills and short- and long-term outcomes. This qualitative study examined the CHS and DESSA-mini scores of 153 students in third through sixth grades to determine whether a
relationship exists between social-emotional competence and students’ levels of hope and whether students receiving special education services have significantly different levels of hope and social-emotional functioning than students in general education. The findings of this study support a relationship between hope and social-emotional functioning and highlight significant differences in hope and social-emotional competence between the two subgroups. The results of this study were used to inform a self-monitoring tool that schools can use to determine whether gaps in life skill development exist for their own populations, address any gaps that exist, and produce equitable outcomes for all students.

Keywords: Hope, Special Education, Social-Emotional Competence, School Climate
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Chapter 1: Statement of the Problem

Annie

Annie is a student enrolled in the fourth grade who has been diagnosed with an anxiety disorder. She demonstrates delays in social-emotional competence and low hope. She struggles with attendance and when she does attend school, she often arrives late. As a result, she misses instruction and has been falling farther and farther behind, academically. Other students have made friends and often work and play in groups. However, Annie’s anxiety symptoms make forming and maintaining friendships difficult. She frequently sits alone at lunch, sits by herself at the side of the playground at recess, and is left without a partner during group work. When she is assigned a partner during learning activities, she has difficulty controlling her emotions and engages in behaviors that allow her to avoid the social interaction; secondarily, she misses out on social and academic learning opportunities.

Annie is falling farther and farther behind academically and other students are beginning to see her as the “wild card” of the classroom. Annie hears students in her class talk about each other’s birthday parties that she wasn’t invited to. She watches as other students make enough progress in reading to graduate out of her reading group, the lowest reading group in the class. Annie wants to go to college and own her own business when she grows up but doesn’t realize the connection between her current and future educational paths and is lacking skills and resources to help her overcome her anxiety. Her lack of relationships and perceptions of failure further lower her motivation to attend school, form friendships, and complete academic work.
Annie’s teacher has given up hope on Annie successfully completing high school or reaching her long-term goal of being a business owner. She strongly feels that Annie is likely to drop out of school and instead of providing her with opportunities for grade-level learning that will prepare her for college, Annie should be taught basic life skills (e.g., managing money) that will help her find employment and successfully run a household after high school. However, the teacher believes that in order to make her efforts worthwhile, Annie needs to begin taking her education seriously by coming to school and doing better social-emotionally and academically. In the meantime, the majority of her time should be spent on students who care more about their education and attend school regularly.

Mary

Mary is also enrolled in the fourth grade but does not have mental or physical health concerns and demonstrates typical development of hope and social-emotional competence. She has average academic skills and has many friends; school is typically a happy place for her and she wakes in the morning excited to go to school. She often arrives at school early to participate in an extracurricular activity and this has been one of several educational activities through which she makes friends. Mary has friends within her classroom that quickly volunteer to help her with work and partner with her on activities. She also has friends in other classrooms that she is able to play with at recess. From year-to-year, Mary has a close group of four or five friends but gets along well with everyone.

Mary arrives at school each day eager and ready to learn. She is on grade-level in all subject areas. Although she struggles with some concepts, she is able to use
resources available to her (e.g., teacher, friends, strategies) and regulate her emotions to maintain self-confidence and learn content. Mary’s behavior and interactions are predictable and she is often called upon to be a role model in the classroom. There are times when Mary requires review of concepts to master them, but also times when concepts are extended. She feels capable and confident, academically and socially. Learning is intrinsically motivating for her and she loves to challenge herself. She hopes to attend college and work as a nurse when she grows up.

Mary’s teacher believes she is capable of learning grade-level content with occasional support and views her as a self-starter. She carefully monitors her progress throughout the year and offers opportunities for interventions and extension of concepts. Mary’s teacher knows she wants to be a nurse when she is older and learns best from life scenarios. She carefully crafts related practice opportunities to make concepts more relevant and memorable. She encourages Mary to participate in extracurricular activities that will develop skills helpful to her future career path, such as language clubs, and nominates Mary for membership in a healthcare club when she transitions to middle school.

Introduction

Hope, social-emotional competence, and perceptions of climate impact all aspects of the student experience, from motivation to academic achievement, the development of social skills to relationships, from physical health to mental health, from student choice and voice to perceptions of safety in the school environment, and from behavior to quality and quantity of learning experiences (Doll, 2010; La Salle et al., 2016; Wang & Degol, 2016). Therefore, it is imperative not only to reactively identify students already
struggling with behavior, social skills, and mental health, but also to proactively identify risk factors that place students at-risk of low hope, social-emotional competence, and perceptions of climate. Awareness of risk factors would allow for earlier identification of students in need of intervention, especially outside of the typical screener window and particularly for children with quickly-changing life circumstances or students who transfer schools between screener windows, which would speed the process of identification and the implementation of interventions. It could also identify subgroups within our schools in need of more frequent screening and subgroups that may not be as responsive to universal interventions compared to the overall school population.

Existing research has examined risk factors for low hope, poor social-emotional competence, and poor perceptions of school climate including family relationships, grade, health status, EL status, and trauma events and history (La Salle et al., 2016). While some research examines various diseases and/or disabilities (e.g., Autism, ADHD, cancer, diabetes) as risk factors and examines various placements (e.g., schools, hospitals, residential treatment facilities, support camps) and intervention programs on these constructs, little-to-no existing research examines educational service level or placement as a potential risk factor or supportive factor (Snyder et al., 1997). Additional research is needed to determine whether students who receive special education services are at a benefit because of the additional resources and targeted interventions available to them within the school environment or a deficit because of the characteristics associated with their disability (or disabilities) that warrant special education services. However, it is crucial to determine whether special education status is a protective or risk factor so that these students, who are already at a significant deficit in one or more academic, social-
emotional, behavioral, language, or motor areas, can receive equitable services that help close the gaps that exist between themselves and same-age peers and prepare them for successful careers and lives.

**Schools, The Guide to Student Success**

Schools are in a unique position of controlling the levers of student success (e.g., curriculum, teaching methods, school and classroom climate) in the school environment, a setting where malleable students spend an average of 1,232 hours each academic year (Doll, 2010; National Center for Education Statistics, n.d.). Over the course of a typical kindergarten through 12th grade education, this equates to just over 16,000 hours that schools are able to control the what, why, how, and when of student learning. Schools take responsibility for students’ learning outcomes in many ways, most notably through state and federal accountability measures. The results of learning are measured by schools, districts, and state and federal government agencies, most often through monitoring of the mastery of academic skills, student academic growth, mastery of social-emotional competencies, college and career readiness, and discipline practices (Every Student Succeeds Act [ESSA], 2015).

A predominant purpose of this monitoring is to identify when gaps occur in learning (both academic and social-emotional) and whether there are patterns of gaps in student learning that impact the likelihood of positive outcomes for subgroups of students (National Education Association [NEA], 2007). If gaps are identified for individual students, schools are responsible for offering various types of support to close the learning gaps. When patterns of gaps are identified between subgroups of students, it necessitates a paradigm shift to avoid disproportionately negative outcomes (e.g.,
academic failure, student absenteeism and drop-out, School to Prison Pipeline) for subgroups of students (NEA, 2007).

Although state and federal departments of education, and thus schools, have historically focused on academic skill development, there is an ongoing social-emotional learning paradigm shift. This shift is driven by ongoing changes in student mental health and social-emotional needs. According to the Centers for Disease Control and Prevention (CDC, 2020), approximately one in five school-age children has been diagnosed with a mental disorder, a term encompassing social, emotional, and behavioral disorders. This statistic is concerning in itself, but even more concerning is the upward trend in the number of children with certain mental disorders characterized by poorer social-emotional competence and hope over time (CDC, 2020). Schools are a logical place where mental disorders can be prevented and addressed because the setting allows for the circumvention of barriers. For example, in the school setting, students miss minimal instruction while receiving on-site, free mental health supports that address the social-emotional and hope gap between themselves and same-age peers without requiring family transportation, parental leave from work, or health insurance.

The federal government’s reauthorization of the ESSA (2015) recognized the prevalence and long-term implications of social-emotional learning gaps and amended budget specifications to allow schools to change funding allocation to address gaps in social-emotional learning. This law has allowed schools to make plans to improve both academic and social-emotional gaps in areas most pertinent to their student population with the goal of improving learning and positive outcomes for all students (ESSA, 2015). Common school-based strategies supporting this goal include preventive and responsive
social-emotional curriculum and supports, school-wide climate initiatives, and preventive and responsive small group and individual counseling services.

**Social-Emotional Competence and Hope for All**

Social-emotional competence and hope are important for students’ short-term behaviors and long-term trajectories. Existing research has shown the benefits of hope, positive school climate, and social-emotional competence on students’ academic achievement, social and emotional functioning, behavior, and physical and mental health (Hopson et al., 2014; La Salle et al., 2016; Preble & Taylor, 2008; Wang & Degol, 2016). These factors also play a role in graduation rate, life satisfaction, ability to cope, college and career readiness, and goal attainment (La Salle et al., 2016; Wang & Degol, 2016). Although these factors are important to development and long-term outcomes and most children begin learning these skills early in life, students do not always arrive at school with these skills established.

Students come from widely varying living situations, experiences, and backgrounds with different knowledge and skill sets. Yet, educational staff are accountable for teaching all students to the same standard, which is creating responsible future citizens and lifelong learners (ESSA, 2015). Deep learning necessitates a level of vulnerability from both students and staff to be able to communicate what is and is not understood, accept and offer help, and partner in the learning process. A positive, welcoming climate, predictability, and supportive relationships are necessary prerequisites for vulnerability. Unfortunately, students with low hope and social-emotional competence have difficulty establishing this foundation for vulnerability, which negatively impacts their ability to build a social support network. In turn, they
have fewer resources available to them when they encounter a problem and their learning may be hindered. Just as students may have different experiences outside of the educational environment, they may have different experiences within the school (Preble & Taylor, 2008). The student and levels of the educational environment act on one another in a bidirectional manner, producing unique experiences for every student (Anderson et al., 2014; Keenan & Evans, 2009; Preble & Taylor, 2008).

**A Range of Student Experiences**

Consider, for example, the environments, experiences, and resources of students enrolled in general education compared to those receiving special education services. It is the goal of the educational system to meet the individual needs of each student, so it is important to note the complexity inherent in attempting to make comparisons and the implausibility of describing the needs, supports, or experiences of all types of students (ESSA, 2015). A typically-developing student in general education may or may not come to school possessing the academic skills necessary for academic success at their grade level but shows adequate growth over time and participates in learning activities. They likely demonstrate proficient enough social skills to initiate and maintain at least a few friendships with same-age children, have a positive relationship with at least one adult at school, and collaborate well with others given guidance. Often, these students are able to regulate their emotions and behaviors with no more than minimal adult guidance. These students are able make progress with exposure to universal academic and social-emotional curriculum and school-wide behavior management systems. They meet the high expectations set by their teachers, families, and themselves. When they experience
success, their feelings of self-esteem and self-competence improve, and they are willing to continue to take risks in learning.

A student in special education with an academic disability has significantly below average academic skills and has difficulty making adequate progress toward learning targets, even when given universal curriculum and additional interventions (Individuals with Disabilities Education Act [IDEA], 2004). Despite giving their best effort, they may experience learned helplessness and the repeated vulnerability in struggling to learn grade-level concepts may take a toll on their self-esteem. This may result in withdrawal from participation or avoidance of tasks they believe will be too difficult, limiting their academic exposure and practice opportunities. If the student’s skill level is far below grade-level, teachers may have difficulty differentiating lessons and supporting their learning in the classroom. This is further complicated by the likelihood that each classroom will have more than one student with a disability and that each student has unique needs, requiring teachers to differentiate the curriculum and offer individualized supports for each student. This may leave teachers feeling dissonant about providing individualized instruction for their lowest students at the same time as grade-level instruction and extension opportunities for the rest of the class.

Similarly, a child with a social, emotional, or behavioral disability demonstrates behavior that is significantly different from same-age peers and may struggle to meet expectations in the school environment (IDEA, 2004). The student may experience any number of behavioral difficulties that impact the learning of themselves and peers and the overall predictability of the classroom environment. This is likely to negatively impact the student’s social support network and make learning more difficult for peers because
this student may have difficulty maintaining attention and distract other students, be
reluctant to work cooperatively on partner or group activities, or struggle to appropriately
express their emotions. These students may compromise the flow and safety of the
learning environment, be resistant to correction and redirection, or may perceive that their
teacher gives them a disproportionate amount of negative attention. Teachers responding
to the misbehavior of one student may have difficulty preventing behaviors for the entire
class and providing quality learning opportunities for all students. Given that teacher
training programs focus largely on instruction and minimally on behavior, the teacher
may feel unprepared to handle the challenges related to behavioral disabilities, may be
unwilling or unable to implement the necessary behavioral processes and
accommodations to support the child, or may believe that another educational placement
is most appropriate for their needs. As a result, students who struggle to establish
relationships may have further limited social support networks and lack feelings of
belongingness.

In these scenarios, even teachers with the best of intentions may question whether
their classroom is the most beneficial place for the child to learn, lower their expectations
for the child, fail to invest time or effort into the student, or experience fatigue in trying
to meet the student’s needs. This not only negatively impacts the wellbeing of the student
but impacts the student’s ability to achieve goals by reducing the adult and peer resources
available, lessening the student’s motivation and belief in themselves that they are
capable of achieving, and externally imposing limits on the child’s ability (Wang &
Degol, 2016). This highlights a precarious situation in which external limitations may be
placed on the paths available to students and the availability of resources needed to
mitigate their learning gaps. Although there is vast research in regard to closing academic
gaps, little research exists on identifying and mitigating gaps in life skills as measured by
hope and social-emotional learning.

**Mitigating the Gaps**

The provision of special education services is one action partly within schools’
control designed to mitigate skill gaps related to medical and educational disabilities
(IDEA, 2004). The special education teacher strengthens the student’s skills by providing
direct instruction and interventions in academic and behavioral areas of deficit. The
special education teacher also collaborates with the classroom teacher to modify the
child’s academic and social settings to meet their individual needs in the general
education classroom, making success in the classroom more likely. Further, the goal-
making processes of the student’s Individualized Education Plan (IEP) elicit the
collaboration of school staff and families and model the goal cycle, thereby potentially
improving students’ hope. This is done by setting long-term goals and short-term
objectives and monitoring students’ progress. At least annually, the team convenes to
review the student’s progress and make adjustments to the plan to further mitigate the
gaps. However, the team may convene more frequently, if necessary, to devise a plan to
overcome barriers the student is experiencing (IDEA, 2004).

This process strengthens students’ below average academic and social-emotional
skills, allowing them to more productively participate in the classroom with peers.
Students are able to access additional resources and build their social support networks.
Theoretically, their hope should improve because they fortify their social support
networks, learn about the goal cycle by setting and monitoring goals, and learn to self-
reflect, problem-solve, and self-advocate for their needs. In the future, these skills will help them lead productive, satisfying adult lives and meaningfully contribute to society.

**Conceptual Framework**

The accountability measures of state and federal governments and the actions of schools strive to provide equitable opportunities to all students. According to Field et al. (2007), equity is defined by “fairness” and “inclusion” in educational experiences (p. 11). When schools fail to provide fairness or inclusion in educational opportunities, limitations are placed on students resulting in disproportionality. Disproportionality is concerning because it culminates in lesser opportunities and outcomes for subgroups of students and, thus, adults (NEA, 2007).

**Fairness**

Fairness means that all students are able to access the same educational opportunities, regardless of demographics, background, or ability; this means that English learners and native English speakers, students from the middle class and those living under the poverty line, and students who are typically-developing and those with disabilities should have access to the same opportunities (Field et al., 2007). Figure 1 is a visual representation of equity. It depicts students of different heights, representing different components of student identities, reaching for apples on a tree, representing educational opportunities. The students’ heights represent the many barriers that may directly or indirectly impact students’ abilities to meet learning expectations, such as socio-economic status, ethnicity, access to education, parental education, beliefs about the importance of education, and educational or medical disability. Without the boxes underfoot (representing supports provided by inclusive classrooms and schools), some
students would be unable to reach the apples. When classrooms are not inclusive, students’ perceptions of climate (e.g., connectedness, belongingness) are impacted and students do not have the firm ground of supports built through school climate to stand on, as depicted by the student standing in the hole; this “otherizing” by teachers and peers may impose yet another barrier to already struggling students, making goal achievement even more difficult.

![Diagram of inclusive and exclusive school climate](image)

**Figure 1**
*A Visual Representation of Equity*

*Inclusion*
Inclusion is the expectation that all students learn to a basic standard regardless of barriers (Field et al., 2007). This does not mean that all students learn exactly the same skills; rather, each student learns the skills that are necessary for their chosen path that allow them to be functioning adults that contribute to society. Inclusion is represented by the apples in Figure 1. Although the apples on the tree are depicted at equal heights, they do not represent the same goals for all students but represent highly individualized goals that are necessary for students’ futures. For example, while one high school student may enroll in advanced placement classes to support their future goals of attending college to become a teacher, another student with a goal of becoming a professional basketball player may place more emphasis on physical health and extracurricular opportunities. Still another student who is lower-functioning may benefit most from focusing on life skills and work skills. The student, family, and school collaborate to establish individualized yet equally high expectations for all students. The information considered in the development of individualized high expectations for students is vast, but may encompass ability, academic skills, social-emotional competence, past performance as measured by grades or test scores, and student and family goals.

For many reasons including illness, social and family stressors, mental health, disability, innate strengths, and workload, nearly all students struggle at one or more times during their educational careers. During these times, the expectations for the students remain constant. What changes is the level of support offered by the school to help students overcome barriers, as represented by the boxes underfoot in Figure 1. The boxes are different in size, representing a range of increasingly intensive services available to boost student success.
To the left of the first person in the figure could be a person standing on the ground, representing success with exposure to the universal curriculum. The person standing on the smallest box needs slightly more support than the person standing on the ground to be successful. This support may be in the form of a study hall, preferential seating, or a classroom teacher-led small group that reviews grade-level concepts. The next box is medium in size, indicating that the student standing on it needs moderate support to meet expectations. This may take the form of a short-term small group reading intervention, a daily check-in with a favorite teacher, or after-school tutoring.

The student standing on the largest box represents students needing intensive supports. This would likely encompass students in special education. It is important to note the many layers of support within special education itself, from various therapies (e.g., speech/language, occupational, physical) to academic supports to social-emotional supports. Additionally, supports are administered in many settings depending on student needs. Some students receive support from the special education teacher in the general education classroom while others receive help in the resource room. Some students attend their home school while others are educated in their homes. Some students attend special classrooms, schools, or community placements (e.g., hospitals) specializing in health needs, behavior, or alternate curriculum.

To the far right is a student standing in a hole. This student is a representation of those individuals lacking a positive, supportive school climate and those who have been “otherized” by teachers and peers, removing school-based supportive factors, and further removing the apple from the student’s reach. This portion of the figure is meant to depict the importance of school climate as a foundation to student outcomes in all domains.
Because student needs and barriers vary widely, the levels of support depicted in Figure 1 are highly simplified and overly compartmentalized representations of a spectrum of actions that schools can take to mitigate gaps and provide equitable outcomes for students.

**Summary**

Students come to school with different barriers that may or may not be within the control of the school environment. It is the responsibility of the school to address said barriers to the best of their ability to improve outcomes for all students (ESSA, 2015). By establishing and upholding individualized, high expectations for all students and changing the level of support offered to address barriers, schools are able to mitigate gaps in opportunity and provide equitable educational opportunities for all students.

**Problem Statement**

Existing research has shown that special education students are at higher risk for academic failure, social-emotional and behavioral difficulties, and school drop-out compared to their general education peers (Lombardi et al., 1990). However, there is a rift in the literature examining gaps in life skills. This study will examine whether life skills as measured by hope and social-emotional learning differ between students receiving general education and special education services. Although many variables internal and external to the school contribute to gaps, school-controlled environmental factors will be the sole focus of exploration. If gaps exist, schools will want to be responsive so this study will identify action steps schools can take to mitigate gaps. A self-monitoring tool for school-controlled factors will be created so schools can better identify and address barriers contributing to gaps.
Research Questions

This correlational study will determine the relationship between hope and social-emotional competence and whether students enrolled in general education and students receiving special education supports demonstrate different levels of hope and social-emotional competence. Existing social-emotional data as rated by classroom teachers and hope survey data from the perspectives of students will be used to answer the following questions:

Research Question 1

What is the relationship between elementary students’ hope and social-emotional competence?

Research Question 2

Does the relationship between hope and social-emotional competence vary by educational service (i.e., students receiving general education compared to students receiving special education)?

If gaps exist between subgroups, this study will then require continued exploration around the school-controlled factors that contribute to the development of hope and social-emotional learning. These factors will be investigated using a meta-analytic approach culminating in the creation of a tool that will guide schools in evaluating and improving the development of hope and social-emotional competence for all students.

Operational Definitions

Educational Service: The setting, placement, or level of services the child receives in the school setting; may include general education or special education.
**Student in General Education.** A student who does not meet the verification criteria for one or more of the 13 federal disability categories, as outlined by the IDEA (2004).

**Student in Special Education.** A student who meets the verification criteria for one or more of the 13 federal disability categories, demonstrates an adverse effect on education and a need for special education services, and whose parent has consented to the provision of special education services (IDEA, 2004).

**Hope:** “A type of goal-directed thinking in which the protagonists perceive themselves as being capable of producing routes to desired goals, along with the motivations to initiate and sustain usage of those routes” (Snyder, 2000, p. 25). Hope is the result of interactions between pathways and agency thinking combined with the ability to overcome barriers.

**Pathways Thinking.** The perceived route(s) that exist toward a goal (Snyder, 2000).

**Agency Thinking.** The motivation to choose and remain on a path toward a goal; perseverance in the face of barriers (Snyder, 2000).

**Social-Emotional Competence:** “The ability of children to successfully interact with other children and adults in a way that demonstrates an awareness of, and ability to manage, emotions in an age- and context-appropriate manner” (Naglieri et al., 2014, p. 6).

**Significance of the Study**

This study is significant because it addresses ethical concerns that are related to both academic and educational merit. It is the responsibility of educational leaders to invoke paradigm shifts and to implement and maintain programs that achieve equitable outcomes for all students. The development of hope and social-emotional competence for
all students is imperative to positive long-term outcomes, life satisfaction, and overall physical and mental well-being. In mitigating life skills gaps for all students as measured by social-emotional competence and hope, it is important to identify school-controlled factors that support the development of life skills. If the preliminary results of this study indicate a life skills gap between subgroups of students by service level, school-controlled environmental factors will be further investigated and used to develop a self-evaluation tool for schools.

**Delimitations**

Data was collected from students in grades three through six attending one elementary school in a small urban school district. Thus, the results of this study may not be generalizable to other age groups such as early childhood, primary elementary students (i.e., students in kindergarten through second grade), middle school students, or high school students. The small sample size may increase the likelihood of a Type II error, necessitating replication and/or expansion of the study with a larger sample. Additionally, the location of the district may not allow for generalization to suburban or rural districts and the small size of the district may impede the generalizability of the results to large urban districts. One data source is self-reported and collected at one point in time; the other is a rating scale completed by a teacher about each student in the classroom. Thus, the results may be subject to emotional outliers and may be biased or inaccurate; additionally, caution should always be exercised when making decisions or drawing conclusions based on a single data point.
Chapter 2: Literature Review

This chapter will focus on the existing research related to hope, social-emotional competence, and school climate as independent factors for the overall school population and some subgroups examined in the literature. It is important to note that research does not exist on these factors explicitly combined and there is little existing research on the topics in regard to students who receive special education services in the setting of public schools. First, background information on special education services, placements, and responsibilities will be explained. Then, the individual student environment and the ways environment supports the development of hope and social-emotional competence will be examined. Finally, the development of hope within Snyder’s Hope Theory and the existing research surrounding the development of hope and social-emotional competence will be reviewed.

Special Education

The U.S. Department of Education is responsible for providing policies, regulations, and guidelines to direct the development of state special education policies. The federal law guiding special education is called the IDEA (2004). Each state department of education is required to uphold and enforce the IDEA and to use this law to inform statewide special education policies. The IDEA guarantees all children with educational disabilities ages birth through 21 access to a free and appropriate public education, meaning an education at no cost to families occurring in the least restrictive environment that adequately meets students’ individual needs (IDEA, 2004).

Special education staff are responsible for meeting the unique learning needs of each student identified with an educational disability living within the school’s
attendance area. This is done through the drafting and implementation of an Individualized Education Plan (IEP) that meets the student’s unique academic, social-emotional, behavioral, and mental health needs in the least restrictive environment. This presents a unique challenge in providing targeted interventions and supports in areas of need, while also exposing the student to grade-level instruction and supporting them in learning with same-age peers to the maximum extent appropriate (Florian, 2008).

Educating students with educational disabilities in the general education classroom can be a struggle for teachers due to students’ needs for differentiation of academic concepts, needs for social-emotional support, and behavior needs that may deter the pace and flow of academic instruction.

**Special Education Placements**

Since students have various types and severities of need, there must be different settings in which to serve them. Most students spend the majority of the day in the general education classroom and receive resource support in areas of need. Resource support looks different for every child. Based on their needs, they may receive a combination of direct or consultative resource time, speech/language therapy, occupational therapy, physical therapy, transportation, and counseling services (IDEA, 2004). When receiving resource support, students may learn individually, in small groups, or in large classrooms. Supports may occur outside of the classroom in the resource room, likely providing interventions for below grade-level skills or resource staff may go into the classroom and co-teach with the general education teacher to support grade-level curriculum. Services can also occur in settings other than the student’s home school, such as behavior programs, alternate curriculum programs,

Inclusion, self-contained classroom, and mainstreaming are terms used to describe educational settings and the extent to which students with disabilities receive instruction with general education peers (U.S. Department of Education, 2004). Inclusion occurs when a student remains with their general education peers for most of the day but receives additional support outside of the classroom for a portion of the day. A student who participates in a self-contained classroom spends the majority, if not all, of their day in a special education setting. Mainstreaming is the process of introducing a student who is in a special classroom for the majority of the day into general education activities to promote peer relationship building and skill practice. Often, mainstreaming is the path between self-contained classrooms and inclusion.

Although inclusion can be a term used to describe the educational placement of a student with a disability, it has developed a more modern definition that encompasses all learners but is especially pertinent to at-risk groups of students. The definition of inclusion is expanding to describe learning environments that provide equitable opportunities to all students, support the learning and success of all students, and recognize the value of every person (Anderson et al., 2014). Inclusion has a significant impact on the ecology of the child, the child’s perception of school climate, and the academic and social-emotional learning of the child.

The Importance of Placement and Inclusion

Student placement is important from a legal and ethical standpoint for several reasons. First, schools must consider the equity of educational opportunities they make
available to all students, but particularly students in special education (Anderson et al., 2014; IDEA, 2004). The opportunities available to general education students may be different from those available to students in special education, especially for those in self-contained settings. For example, a parent or general education teacher of a student with a behavioral disability may prevent them from attending a school field trip due to concerns about the student’s ability to regulate their behavior. Similarly, a student with a learning disability may not be selected for a Decathlon team because their math skills are below average.

Second, federal and state laws require schools to carefully balance students’ individual needs with opportunities to learn with same-age, general education peers (ESSA, 2015; IDEA, 2004). On one hand, schools must intervene and teach students the foundational skills necessary to learn more complex concepts and to close achievement or social-emotional gaps. However, the opportunity to learn from peers, build relationships, and practice social-emotional competencies cannot be understated. It is through interactions with other children that students learn the negotiation, conflict resolution, collaboration, and problem-solving skills necessary for successful adult life (Anderson et al., 2014). Additionally, children must establish relationships with one another to build their peer support network which is a necessary resource in goal pursuit.

Finally, student acquisition of academic skills and social-emotional competence has been shown to be affected by program placement with students in more inclusive settings making more gains. For example, a study conducted by Gardner Taylor & Moniz-Tadeo (2012) revealed that children who were enrolled in self-contained special education classrooms tended to make fewer social-emotional gains than peers who were
enrolled in inclusive classrooms. Differences in skill acquisition may be related to several factors: differences in the child’s ecology, classroom climate, access to typically-developing peer models, opportunities to practice skills in natural settings, access to social reinforcement, quality and quantity of instruction, diversity within the classroom, and competition for resources. Regardless of the reason, this is especially concerning because students requiring more intensive services typically have the most significant needs. On the opposite end of the spectrum, students in general education classrooms reported that inclusion was valuable for the development of their own social-emotional competencies including learning to work with and value individuals of all abilities (Anderson et al., 2014). Inclusive environments are not only necessary for the development of social-emotional competence of all students, but also to provide equitable opportunities.

Bronfenbrenner’s Ecological Model and The Ecology of Inclusive Education Framework will be discussed in the next section to explore factors impacting skill acquisition and maintenance, specifically the factors within the school’s control - the individual child and the Microsystem of the student’s ecology (i.e., the school). This will be imperative later when considering factors that could contribute to differences in life skills between subgroups.

**The Ecology of Inclusive Education Model**

The Ecology of Inclusive Education Framework (Figure 2) is a derivative of Bronfenbrenner’s Ecological Model (Figure 3) that describes how an individual and their environments act on one another over time. Both theories recognize that individuals exist in relation to various environments and there are multidirectional interactions between an
individual and their environments. While it is imperative to discuss both theories because of the extent of the environments that impact students and their ability to learn, the Ecology of Inclusive Education Framework will be the primary focus in this study because it accounts for variables within the school’s control and their impact on student learning (Anderson et al., 2014).
Figure 2
The Ecology of Inclusive Education Framework
Figure 3
Bronfenbrenner’s Ecological Model
Adapted from *An Introduction to Child Development* by T. Keenan and S. Evans, 2009, SAGE Publications Ltd. Copyright 2009 by Thomas Keenan and Subhadra Evans.

The child is at the center of both models. At this level, factors that are internal to the child such as skill level, self-esteem, perceptions of belongingness, physical and
mental health, values, and beliefs impact how the child perceives and interacts with their environment (Anderson et al., 2014; Keenan & Evans, 2009). These factors impact the child’s ability and readiness to learn, including foundational skills, learning styles, ability to regulate emotions, and ability to build relationships with others. In turn, these factors impact the student’s ability to learn and determines the quality of their relationships with others.

The next distal system is the Microsystem, or the environments in which the child spends a significant amount of time. Within Bronfenbrenner’s Ecological Theory, this includes home, neighborhood, daycare, and school settings (Keenan & Evans, 2009). Specifically, within the Ecology of Inclusive Education Model, the child’s Microsystem is the within-school variables and key factors in this system that interact with the child include peers, general and special education teachers, paraprofessionals, administrators, and other school staff; additionally, learning processes, procedures, and the physical components of the school are also accounted for by this system (Anderson et al., 2014). The child’s mastery of social-emotional skills and ability to form positive relationships with others will impact their ability to collaborate with others in the educational setting and build their social support network for learning. In turn, this affects their perceptions of self and can support or hinder learning (Anderson et al., 2014).

In both theories, the Mesosystem accounts for the interactions between the components of the Microsystem (Anderson et al., 2014; Keenan & Evans, 2009). In Bronfenbrenner’s Ecological Theory, examples of such interactions include communications and interactions between the child’s parents and the school (e.g., parental participation in a Parent-Teacher Organization or family attendance at a school
event), parents and daycare workers (e.g., the interactions between daycare staff and parents at drop-off or pick-up), or parents and the neighborhood (e.g., relationships with neighbors, participation in neighborhood events; Keenan & Evans, 2009). Similarly, the Ecology of Inclusive Education Model would encompass interactions between the child’s parents and the school but would also account for relationships between administrators and teachers, teacher perceptions of new curricula, and collaboration between general and special education teachers (Anderson et al., 2014).

The next distal level, the Exosystem, consists of the indirect influences of environments with which the child has indirect contact. Bronfenbrenner’s Ecological Model encompasses interactions that directly impact the components of the Microsystem and indirectly impact the student, such as a parent’s work environment and job satisfaction (Keenan & Evans, 2009). In regard to schools, the Ecology of Inclusive Education model accounts for the quality of professional development opportunities available for staff, individual and collective perceptions of school climate, and school improvement initiatives (Anderson et al., 2014).

The Macrosystem consists of the underlying cultural and societal norms, values, customs, and laws of the environment in which the individual lives (Keenan & Evans, 2009). This includes the area in which the family lives, the laws and customs the family abides by, and the family’s culture. This system may impact the family’s perceptions about available resources, perceptions of safety, beliefs about the value of education, and gender norms and roles (Keenan & Evans, 2009). In an educational setting, the Macrosystem consists of educational laws and accountability requirements, the values and norms of the district, trends in education, and state education standards (Anderson et
al., 2014). The Macrosystem demands conformity and compliance from the school, child, and family, yet is ever-changing.

The final level of these models, the Chronosystem, accounts for changes in the systems over time (Anderson et al., 2014; Keenan & Evans, 2009). An example of the Chronosystem in schools is an examination of a child’s progress toward meeting goals or a school’s efforts to become more inclusive over time. An individual’s ecology at any given point in time exists as a snapshot or photograph, meaning that individuals are able to examine environments as they exist at that moment and through comparison to past environments. It is through the Chronosystem that the influences of levels over one another become apparent, as environments change in response to pressure, demands, and interactions over time.

Factors in all systems impact the resources available to students, the learning opportunities available to students, student achievement, and the school’s ability to mitigate gaps in learning. In the school setting, the ways children act on and are acted on by their environments over time impact their perceptions of school climate. In turn, the child’s presence and interactions in the school environment play a hand in modification of the school climate, thereby impacting the perceptions and experiences of others (Allodi, 2002). It is imperative to consider students’ levels of educational service when examining gaps in learning. Differences in students’ ecologies may account for differences in resources and perceptions of climate that are foundational to the establishment of support networks and opportunities for learning.

**School Climate**
School climate is a factor within the direct control of schools that has the potential to impact all aspects of student learning (Wang & Degol, 2016). School climate is defined as the overall feelings and perceptions about a school from the perspective of students, teachers, and parents (National School Climate Center, 2017a). These perceptions are formed through first- and second-hand experiences in the school environment. The theoretical foundations of the school (e.g., norms, values, inclusion), as well as the physical environment (e.g., perceptions of safety, appearance of the physical environment) and educational materials (e.g., curriculum, instruction, resources) impact perceptions of the environment (National School Climate Center, 2017b). In other words, the climate is the “brand” or “way of life” of the school. Individual perceptions of climate have an effect on attitudes and behaviors within the school environment including feelings of belongingness, establishment of relationships, and vulnerable participation in learning opportunities (Preble & Taylor, 2008).

Curriculum materials, instructional strategies, quality teachers, and school climate are the pillars of student success in learning (Doll, 2010; La Salle et al., 2016). Within the pillar of school climate, there are four core components (i.e., safety, relationships, teaching and learning, and environment) that interact with one another to support student success (Figure 4; The National School Climate Center, 2017a; The National School Climate Center, 2017b). Without any one of these four components, learning conditions would be suboptimal and gaps in academic or social-emotional learning may occur.
Figure 4

*Dimensions of School Climate (The National School Climate Center, 2017a; The National School Climate Center, 2017b)*

**The Importance of Relationships**

Interpersonal relationships are arguably the most important dimension of school climate because they are the foundation for vulnerable learning and are protective factors for mental health (Back et al., 2016; Cornell & Huang, 2016; Doll, 2010; Ysseldyke et al., 2012). In schools with positive climates, teachers are welcoming, positive, and happy to see students. They are proactive in addressing needs, offer individualized support, uphold high expectations for all students, and help students establish a social network of resources to promote academic and social-emotional development. The presence of positive, supportive relationships both prevents and addresses problem behaviors, as students and staff receive social reinforcement and strive to engage in behaviors that
maintain relationships (Allodi, 2002; Hopson et al., 2014; Kearney & Peters, 2013; La Salle et al., 2016).

In positive classrooms there is less competition between students resulting in less relational stress. Students feel comfortable and are willing to be vulnerable in the learning process, share resources, help one another to achieve learning targets, and work collaboratively on learning opportunities (Doll, 2010). Classes with positive climates are more cohesive, focus on collective well-being, and express satisfaction with learning opportunities (Allodi, 2002; Kearney & Peters, 2013). In these environments, students are able to fully enter into the learning process without reservations with the ultimate goal of mastery (Stornes et al., 2008). Students assume leadership roles and strengthen their own understanding concurrently with peers’. In the end, the classroom becomes a larger support system in which students empower one another and find success together. By working together, students are able to achieve more than they could independently; in other words, when one student does well, all students do well (Jacobs, 2005).

**Teaching and Learning**

Schools with positive climate are more likely to hire and retain qualified and committed staff which impacts the classroom environment, development of academic and social-emotional competence, relationships, and resources available to students (Toren & Seginer, 2015). Learning opportunities improve because the classroom environment is more predictable and organized, allowing for more order in the classroom, higher quality lessons, better instruction, and more content covered in greater depth (Gillen et al., 2011; Toren & Seginer, 2015). In these classrooms, the educational focus is on mastery which focuses on deep and thorough understanding of concepts, instead of performance, which
prioritizes work completion over understanding (Shim & Kiefer, 2013; Stornes et al., 2008). When students have a mastery orientation, they are more engaged in learning, demonstrate behaviors conducive to learning, are more vulnerable in learning, and seek help from others; the student’s inner desire to learn is strengthened and the value they place on learning increases (Doll, 2010; Shim & Kiefer, 2013; Stornes et al., 2008).

Strong teachers provide more interactive learning opportunities to students instead of teaching in a lecture format or giving busywork; because learning opportunities are interactive and engaging, students are motivated to learn and give more attention to learning, and teachers spend less time dealing with misbehavior (Ratcliff et al., 2010; Toren and Seginer, 2015; Wang and Degol, 2016). When misbehavior does occur, strong teachers utilize classwide and individual behavior management strategies to quickly respond to behavior and return to the learning task. Students are more collaborative in their learning experiences because there is more instructional time, more opportunities for collaboration, and less competition for resources (Doll, 2010; Toren and Seginer, 2015; Wang and Degol, 2016). Positive climate has a direct relationship with attendance, math and reading achievement, work completion, graduation rates, and college and career readiness (Doll, 2010; La Salle et al., 2016; Preble & Taylor, 2008; Wang and Degol, 2016). School climate is important to the success of all students but is believed to be a preventive and protective factor for the academic achievement of certain subgroups of students, impacting their attitudes and beliefs about education and pursuit of future education and career opportunities (Doll, 2010; La Salle et al., 2016).

*Environment and Safety*
As discussed in a previous section, positive classroom climates foster collaborative and supportive relationships. These relationships are foundational for perceptions of safety and the social learning and reinforcement of social-emotional competence. When students have relationships, they feel as if they belong in the learning environment. They experience positive attitudes about themselves, their relationships with others, and learning, which results in improved self-esteem and mental health (Ysseldyke et al., 2012). Because relationships are valuable to students, they demonstrate respect for themselves and others and refrain from antisocial behaviors, thereby building trusting relationships, predictability, and perceptions of safety (Doll, 2010; Hopson et al., 2014; Toren & Segerin, 2015; Wang & Degol, 2016).

Positive school climate is foundational for the development and reinforcement of social-emotional competence (The National School Climate Center, 2017a; The National School Climate Center, 2017b). Social-emotional competencies, such as problem-solving, emotion regulation, and negotiation are likely to be taught and reinforced in positive settings (Parris et al., 2016). These students are able to more independently prevent and address problems and effectively solve problems in ways that are mutually beneficial (Doll, 2010). These students are more likely to problem-solve collaboratively, accept responsibility and apologize, and prosocially move past resolved conflicts (Doll, 2010). Students know prosocial ways of getting their needs met, have access to social resources to develop social-emotional competencies, and are less tolerant of bullying (Hopson et al., 2014; Parris et al., 2016). Students have access to more social-emotional and behavior supports and are more responsive to social learning. This results in fewer instances of
bullying and victimization, physically and verbally aggressive behaviors, and discipline referrals, and overall greater perceptions of safety (Doll, 2010; Wang & Degol, 2016).

Research on school climate reveals a cyclical, interrelated relationship between climate, feelings of belonging, social-emotional competence, mental health, and academic achievement (Wang & Degol, 2016). Altogether, these factors predict success by reducing the frequency and severity of disruptions to the learning environment and giving students a safe, supportive place in which to explore, make mistakes, support one another, and learn (Hopson et al., 2014; Toren & Seginer, 2015). The problem-solving strategies practiced, and the social resources developed by students in these settings make schools the ideal setting in which to develop student hope and social-emotional competence.

Factors Impacting Perceptions of Climate

It is imperative to determine factors that impact perceptions of climate so potential gaps in learning can be identified and mediated. Perceptions of climate can be affected by student demographics, such as gender, ethnicity, and grade; specifically, males, minority students, and students in higher grades tend to report poorer perceptions of climate (La Salle et al., 2016). This may be related to the types of behaviors typically exhibited by individuals of different genders, the different qualities of schools available to students living in different areas, or the differences in cultures or languages between students and their teachers.

Classroom climate can also be impacted by support structures and teacher beliefs. Classroom climate is higher in challenging settings with high expectations and support that encourage interest, motivation, and achievement (La Salle et al., 2016; Moos &
Moos, 1978). In these settings, students earn high grades because they are pushed to achieve mastery of concepts and are given more control over their learning experiences, voice, and choice. Students experience high satisfaction and morale, which contribute to high attendance, engagement, and graduation rates (Moos & Moos, 1978).

Student voice and choice in the classroom also contribute to high ratings of climate (Preble & Taylor, 2008). A collaborative approach to setting consistent expectations, processes, and routines results in a high level of structure that is a foundation to the development of academic and social-emotional competencies. The resultant student buy-in reduces the friction between students and teachers as students see the purpose of behavior management and are able and willing to self-regulate. As the environment becomes more predictable and the quality of instructional opportunities improves, students are more engaged in learning, instruction is continuous, and teachers are able to provide more diverse learning opportunities, leading to better climate and higher academic achievement (Morrison, 1979).

**Climate and Special Education**

Inclusive classrooms are viewed positively, both by students who are typically-developing and those with disabilities. Inclusive classrooms are perceived as promoting diversity, acceptance, and respect for others by helping students learn to accommodate individuals with needs that are different than their own and by teaching prosocial attitudes about individuals with all types of abilities (Allodi, 2002). Learners who participate in inclusive general education classrooms perceive classroom climate as being most affected by voice and choice in educational and social elements, physical environment and accessibility, relationships, and instructional quality; teacher beliefs
about the importance of peer relationships play a key role in the development of
respectful, responsive peer relationships (Gillen et al., 2011). Thus, social-emotional
competence and the peer support network necessary for high hope are directly under the
influence of classroom staff.

Although students in general education settings express a desire to have
relationships with students with disabilities, the ability to form relationships may be
negatively impacted by the nature of the child’s disability. For example, a student with an
Emotional/Behavioral Disturbance, Specific Learning Disability, or severe
developmental disorder may have more difficulty forming relationships with peers.
Research confirms that this difficulty is related to the different behaviors exhibited by
students with disabilities and typically-developing peers’ lack of experiences with
students with disabilities (Litvack et al., 2011). Typically-developing students may avoid
relationships with students with disabilities if they are unsure of how to respond to the
symptoms of the disability or how to socially interact with the student (Litvack et al.,
2011).

This highlights the importance of positive, supportive classroom climates in
which the development of social-emotional competence is intentional and supported for
all learners. Because students may have a negative view of students with disabilities due
to inexperience, misperceptions, or different and/or conflicting needs, it is important to
equitable learning opportunities to include students with all types of abilities in general
education classrooms to the maximum extent possible. Teachers should provide support
to make learning opportunities more valuable and help students appreciate the diversity in
the population.
Students with disabilities report overall positive perceptions of inclusive classroom environments, including feelings of active participation, high rates of learning, positive self-concepts, feelings of safety, and positive relationships with peers; however, a barrier to skill development is that students with disabilities report poorer voice and choice than their general education counterparts, including lack of recognition from teachers, fewer choices, and lack of participation in decisions about their social lives (Tetler & Baltzer, 2011). This may place limitations on the types of social-emotional competence that students are able to develop, opportunities for skill practice, or diversity in experiences. Students may struggle to generalize prosocial behaviors to more independent settings when given more choice. This lack of voice and choice may limit equity in opportunity, impeding students’ ability to develop hope and social-emotional competence.

Inclusive settings with positive classroom climates have been shown to improve social-emotional competence in early childhood, reduce symptoms of anxiety and depression within the classroom, and improve overall student well-being and mental health (Allodi, 2010; Avant et al., 2011; Gardner Taylor & Moniz-Tadeo, 2012). As social-emotional competence improves, aggressive and unsafe behaviors decrease, which results in fewer instances of elective or emergency seclusion for students with disabilities, relating to more productive learning time within the classroom (Avant et al., 2011).

Considering school climate in regard to students with disabilities is imperative because negative classroom climate has more significant, negative long-term impacts on students with poor mental health and behavioral problems than their typically-developing
peers (Somersalo et al., 2002). Students with social/emotional and behavioral problems who learn in negative climates often lack feelings of belongingness and safety, adding to their perceptions of uncertainty in the school environment. These students may demonstrate outbursts in order to establish feelings of safety which further damages the reputation of the student. Further, these students may be at greater risk of suspension, truancy, and eventually dropout, which further reduces the student’s feelings of belonging and contributes to inequity in educational opportunities.

Overall, previous research indicates that greater academic and social-emotional gains can be made in positive, inclusive environments for all students. It is in these safe, supportive contexts that students are able to learn, master, and utilize social-emotional competencies to construct and pursue individual and collective goals. It is imperative for schools to proactively establish positive climates because it is only under these circumstances that students will feel safe enough to show their vulnerability, engage in the learning environment with the goal of mastery, develop academic and life skills, and become college and career ready.

**Hope**

Snyder (2000) defined hope as “a type of goal-directed thinking in which the protagonists perceive themselves as being capable of producing routes to desired goals, along with the motivations to initiate and sustain usage of those routes” (p. 25). Hope is both a state and a trait, meaning that individuals can be hopeful about certain situations or may be hopeful as a stable personality trait (Rand & Cheavens, 2005; Snyder et al., 1991). This assumption gives importance to the implementation of interventions because it recognizes that internal hope levels can be altered through the implementation of
external supports and interventions, which is a necessary assumption underlying the function of interventions.

Snyder’s Hope Theory posits that positive, meaningful, goal-directed behavior is the result of interactions between pathways and agency thinking (Snyder, 1995; Snyder, 2000; Snyder, 2002); hope “is conceptualized as an iterative process between an efficacy expectancy (a self-belief based on past experience that one can achieve one’s goals [i.e., agency]), and an outcome expectancy (the perception that one or more strategies can be implemented in order to achieve one’s goals [i.e., pathways])” (Snyder et al., 1991, p. 289). Pathways thinking is the ability to mentally construct one or more pathway(s) to a desired outcome and agency thinking is the motivational component, perseverance and resilience in the face of barriers (Snyder, 2002); in other words, pathways thinking is the strategy behind goal pursuit and agency is the passion, desire, and personal relevance behind goal pursuit (Snyder et al., 1991).

**Hope Compared to Other Theories**

In defining what hope is, it is also necessary to define what hope is not by distinguishing Hope Theory from similar, preceding theories, such as optimism, self-efficacy, helplessness, resourcefulness, and grit. Optimism and hope are similar theories in that both expect for good things to happen to the individual, but optimism fails to account for the pathways and agency thinking explained by the hope theory and overly relies on luck (Snyder et al., 1991). In other words, optimistic individuals believe that good things will happen to them without the need for planning or effort.

Self-efficacy focuses on the internal traits of a person and how those traits make it more or less likely that a person will achieve a goal; however, it fails to consider the
external forces and interactions between internal and external forces that are accounted for in the Hope Theory (Rand & Cheavens, 2005; Snyder et al., 1991). For example, the theory of self-efficacy implies that an individual can reach positive outcomes independently and without external supports or resources, regardless of their circumstances, if only they are determined and believe in themselves. It further posits that internal traits are stable over time and resistant to disappointments, failures, and adverse life experiences (Snyder et al., 1991).

The theory of helplessness places a significant amount of emphasis on the effects of external forces on the individual’s outcomes and accounts very little for the influence of the individual’s internal locus of control; this theory asserts that there is only so much that the individual can do to improve the likelihood of a positive outcome and that most of the outcome is attributable to external forces (Snyder et al., 1991). For example, the theory of helplessness would indicate that an individual should not study for an exam, because their performance will be determined not by the amount of time they spend studying or the amount of information they are able to cover (which falls within the internal locus of control), but instead will be determined by the questions the teacher chooses to include on the test (which is an external locus of control). By contrast, Hope Theory attempts to balance and account for both internal and external forces and encourages individuals to self-reflect throughout the goal cycle, celebrate successes, and make adjustments in response to results that are contrary to expectations (Snyder et al., 1991).

The theory of resourcefulness accounts for the individual’s ability to control internal and external resources (e.g., thoughts, feelings, executive function, impulse control,
social supports) in the pursuit of goals; while it accounts for the agency component of
Hope Theory, it does not account for the pathways component (Snyder et al., 1991). In
this theory, the individual is aware of and can gain motivation from personality traits,
meaningful goals, and social support networks, but has difficulty generating a linear path
from the present reality to the future goal. Finally, grit accounts for the agency or
motivational aspect of Hope Theory but fails to account for the pathways that students
can use to reach their goals (Curran & Reivich, 2011). In this theory, the individual is
very motivated to accomplish a goal, but lacks the “how” to pursue the goal and navigate
barriers.

Overall, Hope Theory is different from other existing and preceding theories because
it accounts for both the “how” and the “why” (i.e., pathways and agency) of goal making,
as well as external and internal resources available to individuals to help them on their
journey. It also empowers the individual by stressing an internal locus of control while
accounting for the external forces acting upon the individual.

The Development of Hope Throughout Childhood

The development of hope begins immediately after birth (Figure 5). Infants
develop agency and pathways thinking through observation, mainly noting sensations and
perceptions, learning patterns in routines, the responsiveness of parents and/or caregivers,
and learning how to act in ways that meet their needs (Rand & Cheavens, 2005; Snyder,
2000). Both internal and external variables impact the infant’s ability to learn during this
stage including the predictability of the child’s environment (e.g., parenting techniques
and mental health) and the ability of the infant to express their needs and learn routines.
Toddlers become aware of themselves as an individual and their role in causation. They
begin to learn problem-solving skills through parental guidance and storytelling, thereby improving their pathways thinking (Snyder, 2000). During this time span, parental attachment and parenting style, traumatic events, language and literacy, and parent or child disability may hinder the development of hope.

**Figure 5**
The Ages and Stages of the Development of Hope

In preschool, children become more aware of others and begin forming relationships in accordance with their attachment style. They further develop their problem-solving skills, taking on a more collaborative learning approach as they learn negotiation and collaboration. This often occurs though child- and adult-led interactions,
problem-solving opportunities, stories, and play (Snyder, 2002). During this time, children develop pretend play skills and explore adult roles and careers through play. Through these actions, children think about their futures and take the first step in planning long-term goals for their lives and careers (Peila-Shuster, 2018). Available adult models and their identities, beliefs, values, and self-expression influence the roles and identities children believe they are capable of assuming in the future and, thus, the goals that children make for themselves (Peila-Shuster, 2018). Additional factors that may impact the development of problem-solving skills and hope during this stage include the quality of childcare, social-emotional competence of caregivers, literacy and language skills of caregivers, traumatic events, lack of exposure to same-age peers, or the presence of a disability (Peila-Shuster, 2018). Attachment style, family structure, predictability, support, and involvement impact the child’s self-esteem and ability to form secure relationships with others (Sharabi et al., 2012).

Because early learning experiences are so important to the development of the child and because children are most malleable during the early childhood timeframe, the implementation of prevention and early intervention services that address actual or suspected disabilities are imperative to the future development of the child. It is necessary to support children during these times of self-, social, and societal exploration and to encourage curiosity, age-appropriate independence, and social and educational risk-taking. These skills are necessary to build the child’s feelings of self-efficacy, learn hope (including agency and pathways) and social-emotional competence, and develop the child’s individual identity (Peila-Shuster, 2018).
Hope continues to develop during the middle years, during which time relationships take on increasingly more importance, children develop theory of mind and the ability to take others’ perspectives, and improve their knowledge of academic and life skills (Snyder, 2002). It is important to note that hope is not only reinforced, but taught during these late elementary/early middle school years through adult- and peer-interactions and reading; this is an ideal time for teaching these skills because students are developing abstract thought, are beginning to think about long-term goals for their futures, and are able to recognize the value of collective success (Akos & Shields Kurz, 2016). Strengthening hope during this time is beneficial for the student’s mental health and overall wellbeing because high-hopers experience more ease during the transitions into and out of middle school which are typically difficult times of adjustment (Akos & Shields Kurz, 2016). These students are able to prosocially adjust to the demands of their new environment, quickly learning the expectations and routines of their new environment and establishing a social support network. The development of hope continues throughout adolescence but development during this stage will not be discussed due to the focus of the current study.

It is important to note that the development of hope can be disrupted, halted, or reversed at any developmental state by a variety of factors and/or events including insecure attachment style, traumatic events, absent or multiple styles of parenting, or the presence of a medical or educational disability. Thus, it may be argued that medical or educational disabilities (e.g., learning disability, physical disability, social-emotional disability) that may qualify a student for special education services may delay or hinder
the development of one or more components of hope and require the implementation of interventions.

**The Hope Cycle**

Hope is “a vehicle to encourage progress toward goals” (Carrington, 2018, p. 42). It is a psychological trait in which an individual identifies a meaningful goal, constructs direct and alternate pathways to the goal, motivates themselves to take action, and uses social-emotional competence to problem-solve barriers (Bashant, 2016; Snyder, 1995). The hope cycle (Figure 6) is a continuous feedback loop through which individuals establish, appraise, and pursue goals (Snyder, 2002). Individuals’ goals may be conscious or subconscious and may be expressed in a variety of ways (Rand & Cheavens, 2005). The two main components of the goal cycle are agency and pathways thinking. Agency is the motivational component of goal pursuit, while pathways is the plan the individual makes to achieve the goal (Snyder, 2002).
Figure 6
The Hope Cycle

In the learning history stage, the individual considers their emotions about their current path and the outcomes of past goal pursuits. This determines the emotions they feel about the pending goal, making them more or less likely to pursue and achieve the goal (Snyder 2002). Individuals will tend to avoid goals that seem unlikely or cause emotional distress and pursue goals they believe will bring them happiness or are associated with previous successes (Rand & Cheavens, 2005). The emotion set is fluid throughout the hope cycle in response to agency, pathways, barriers, and the goal outcome (Rand & Cheavens, 2005; Snyder, 2002).

In the pre-event stage, individuals consider goal pursuit and their pathways (routes) and agency (motivation) thoughts interact to determine the outcome value, or the importance of the goal to the individual (Snyder, 2002). During this appraisal process,
hope is especially salient when key information is unknown, such as the duration of the
goal process, resource availability, or the probability of achieving the goal (Snyder et al.,
1991). Also important during this stage is the individual’s beliefs about their ability to
achieve the goal; when an individual believes they are capable of goal attainment, they
have greater outcome expectations, demonstrate more persistence during goal pursuit,
and are more likely to reach a successful outcome (Snyder et al., 1991).

If a goal is determined to be of high enough value and is believed to be achievable,
the individual proceeds to the event sequence. During this phase, the individual continues
to devote attention to the goal and subsequent rounds of pathways and agency thinking
commence as the individual selects their route and begins working. Barriers, labelled
stressors in the figure, can occur at any point in the goal cycle. When they occur, they
cause another round of valuation and additional consideration of the pathways and
agency that can be used to reach the goal (Bashant, 2016; Snyder, 2002).

During these rounds of appraisal, the value of the goal may change, depending upon
the pathways available, the individual’s agency, the magnitude of barriers encountered,
and the individual’s emotions and mindset (Rand & Cheavens, 2005; Snyder, 2002;
Snyder et al., 1991). For example, individuals who have a positive view of barriers,
seeing them as puzzles or challenges, take actions that result in the overcoming of
barriers and the individual continuing on the path to goal achievement (Snyder et al.,
1991). Ultimately, the outcome of the second round of appraisal is either modification of
the current path or inaction.

The individual will cycle through the appraisal-pathways/agencies thoughts-barrier
cycle several times before reaching an outcome. The outcome of the goal cycle, whether
success or failure, will impact the individual’s self-efficacy and emotions, weigh in on future calculations of outcome value, and determine which goals the individual pursues in the future (Snyder, 2002). In the setting of schools, students who are taught to make meaningful goals, access a resource network, and receive feedback about their hope cycle experience optimal agency thoughts that are supportive of pathways and impact their future goal valuations (Curran & Reivich, 2011).

Agency and pathways, although reciprocal and interacting components of hope, can develop to different degrees depending on the individual’s life experiences and previous experiences in the goal cycle (Snyder, 2002). A person may visualize a goal for their future and plan paths to address barriers (i.e., pathways) but lack motivation to begin the journey or may become discouraged at the first barrier they encounter and quit (i.e., agency). Alternatively, an individual may have motivation to achieve a future career goal (agency) but lack an understanding of an effective way to get there or face an insurmountable barrier for which they have inadequate resources (pathways). Both agency and pathways are necessary to achieve optimal outcomes (Snyder et al., 1991).

**High-Hopers and Low-Hopers**

A person may be a full high-hoper, meaning that they have high agency and pathways thinking; these individuals can visualize clear routes to their goals, are able to anticipate and plan for barriers, and are motivated to achieve their goals (Snyder, 2002). These individuals make better and quicker decisions, set specific and measurable goals, are flexible and creative in their plans, demonstrate self-efficacy and positive self-talk, are more efficient in their efforts, and more quickly achieve their goals (Snyder, 2002). On the other hand, a person may be a full low-hoper, meaning they have low agency and
Developing high hope skills in all students is imperative to their self-identity and short-term and long-term life satisfaction (Snyder, 2002). High-hopers have better relationships with others and are less lonely than their low-hope counterparts (Sharabi et al., 2012; Snyder, 2002). They experience better perceptions of self, physical and mental health, and social-emotional competence (Marques & Lopez, 2011; Snyder, 2002). In regard to social-emotional competence, high-hope individuals demonstrate higher self-esteem, more advanced problem-solving skills, and resilience, compared to their low hope counterparts (Snyder et al., 1991). Within the hope cycle, high-hopers focus more on the pursuit of success than avoidance of failure, recover quickly and maintain motivation after experiencing failure, and are more motivated to persist in the face of challenges (Snyder, 2002). Higher hope is related to better self-perceptions of one’s
ability to attain goals, which positively impacts motivation and makes goal achievement more likely, a kind of self-fulfilling prophecy (Feldman et al., 2009; Snyder et al., 1991).

**Types of Goals**

According to Snyder, (2002) there are two types of goals. The first is an approach goal; this term describes an individual moving toward an expected positive outcome. An example of an approach goal is a high school student setting a long-term goal to have a certain career as an adult and mapping the pathways that would lead to that goal. The second type of goal, a negative outcome avoidance goal, describes an individual engaging in behaviors to avoid or delay an expected negative outcome (Snyder, 2002). An example of this type of goal would be a student making a goal to not fail a class. Individuals who are high-hopers are likely to engage in approach goals, positively pursuing future circumstances that they perceive as beneficial to themselves and that require intrinsic motivation. They are likely to avoid negative outcome avoidance goals that focus more on doing just enough to avoid negative outcomes and avoid extrinsic punitive outcomes (Snyder, 2002).

However, the National Association of School Psychologists asserts that there are three types of goals (Curran & Reivich, 2011). Achievement goals are goals about achieving a certain outcome, such as earning an A on a test or running a mile in under eight minutes. Process goals are short-term objectives that lead to the attainment of long-term goals, such as studying for 20 minutes every day for a month to prepare for a test. Finally, strength goals are goals about development of personal traits or characteristics, such as improving responsibility by completing and turning in homework on time with acceptable quality of work (Curran & Reivich, 2011).
Regardless of the type of goal being pursued, the individual must first reflect upon previous goal pursuits and outcomes (i.e., successes and failures) and their feelings in the hope cycle. Then, students must set well-defined SMART goals with defined steps. SMART goals are specific, measurable, attainable, relevant, and time-bound. These goals encourage agency and pathways thinking, are motivational to the individual, enable progress monitoring throughout the goal cycle, and allow for clear self-reflection. Students must then anticipate barriers and plan for potential adjustments. Finally, students must monitor their progress throughout the process, access resources and modify their plans as necessary in response to barriers, and reflect upon their progress at the end of the cycle (Curran & Reivich, 2011).

Overall, this process shows similarity to the goal-making process utilized and taught by special education in which teams draft IEPs for students with disabilities. In both of these processes, a comparison is made between where the student is currently functioning and where they need to be in the future compared to same-age peers, grade-level expectations, and personal goals (Curran & Reivich, 2011; IDEA, 2004). Then a plan, including long-term goals and short-term objectives, is drafted and implemented in an attempt to catch a child up to where they should be. Along the way, the child’s progress is monitored and adjustments are made to the plan in response to barriers, such as lack of progress, regression, or additional needs that are identified. Then, at least once a year, the team reconvenes to review how well the process has worked, whether the goal was achieved, and to determine next steps for the education of the child (Curran & Reivich, 2011; IDEA, 2004).

The Importance of Hope
Hope is important because high hopers experience better outcomes than low hopers in all domains including academic performance, social acceptance, physical appearance and aptitude, and social-emotional competence (Sharabi et al., 2012; Snyder et al., 1997). Hope is positively and significantly correlated with self-perceptions of academic performance and can result in an almost self-fulfilling prophecy, academically; when high-hope students expect good grades, they achieve good grades (Levi et al., 2014; Snyder et al. 1997). High-hope students put better effort into academic tasks and are more engaged, creative, and productive as measured by attendance, academic achievement (i.e., GPA, test scores), and graduation rates (Curran & Reivich, 2011; Cuskley, 2014; Dixson et al., 2017; Marques & Lopez, 2011; Snyder, 2002).

Students with high levels of hope are more likely to be intrinsically motivated (i.e., they are able to motivate themselves using internal forces), demonstrate more agency thinking, and attribute successes to internal factors such as intelligence, ability, and effort (Cuskley, 2014; Snyder et al., 1997). These individuals use successes to drive future academic goals and feel hopeful about their abilities, growth, and future outcomes (Bashant, 2016; Cuskley, 2014). High-hope students experience more satisfaction in school, perceive the school climate more positively, and have access to more social supports within the school building (Bashant, 2016; Cuskley, 2014; Feldman et al., 2018). High-hopers contribute to the collective achievement of their peers and recognize that individuals are able to achieve more with collaboration; their willingness to support others further builds their social support networks (Snyder, 2002).

Social-emotionally, hope improves effort, self-efficacy, social-emotional competence, and sense of coherence (i.e., sense of control over one’s life); students who
develop these skills perform better academically and mentally (Feldman et al., 2018; Levi et al., 2014; Sharabi, 2012). These individuals are confident in their social-emotional competence, believe they are able to achieve success, demonstrate a more positive outlook, and are more persistent; these attitudes are important to goal achievement because the more positive feelings an individual holds, the more likely they are to achieve their goals (Snyder et al., 1991). The individual experiences greater success because they are able to predict more potential barriers and proactively generate more solutions to overcome barriers (Curran & Reivich, 2011).

High-hope students experience better physical and mental health. These individuals regularly exercise, consume a healthy diet, preventively and responsively access healthcare, have better prognosis when ill, and are more compliant with treatments (Marques & Lopez, 2011; Snyder, 2002). They are better athletes, engage in fewer risky behaviors, are better able to tolerate pain, and live longer, more satisfied lives (Marques & Lopez, 2011). Mentally, they exhibit more positive attitudes, better self-esteem, adaptability to life changes, and knowledge and use of social-emotional competencies (Marques & Lopez, 2011; Sharabi et al., 2012; Snyder, 2002). They are likely to perform well in sports and are unlikely to quit activities, thereby remaining connected to social resources (Curran & Reivich, 2011). They report lower stress levels, positive perceptions of self, less risk of suicidal ideation, mental flexibility, feelings of meaning and purpose in life, and better life satisfaction (Grewal & Porter, 2007; Marques & Lopez, 2011; Snyder, 2002). They expect success for themselves in the future and have faith and self-confidence that they can achieve their goals (Lopez, 2010).
Socially, high-hopers are more competent than their low-hope counterparts. They demonstrate better social-emotional skills and are focused on the collective well-being and success of themselves and their peer group (Cuskley, 2014; Sharabi et al., 2012; Snyder, 2002). They establish and maintain relationships that are mutually-beneficial and assist them in the hope cycle. Emotionally, high-hopers externalize failures, tending to focus more on the pursuit of future success and how future goal attainment could change their lives; they perceive a feeling of control over their lives, resulting in a significant inverse correlation between hope and helplessness and hope and depression, as well as a significant positive correlation between hope and feelings of self-worth (Snyder et al., 1997).

High-hopers demonstrate better social-emotional competence and seek resources that address their needs (Morales, 2008; Snyder et al., 1991). Students with higher social-emotional competence tend to have more resources at their disposal than students who lack social-emotional competence (Morales, 2008). Once these students experience success and are able to identify strategies contributing to their success, they continue to build their bank of resources. By reflecting on the hope cycle, maintaining an internal locus of control, and believing in the power of hard work, individuals can increase their chances of future success (Morales, 2008).

**Risk Factors**

As established in the previous section, high-hopers are likely to experience positive outcomes in all areas while low-hopers are less likely to experience similar beneficial outcomes. While factors across the student’s ecology impact the development of hope, in order for schools to provide equitable opportunities, it is necessary to identify
factors that place students at-risk of low hope. Schools must then take actionable steps to address areas of need to mitigate gaps in life skill development.

Firstly, factors internal to the student, such as mental health and trauma history, are risk factors. Children who have experienced unpredictable relationships as a result of neglect, physical abuse, or sexual abuse are at-risk of low hope. These individuals may have had restricted learning opportunities for life skills, have insecure attachment styles, and may lack social resources in the home. Students who have experienced traumatic events and/or have received mental health diagnoses such as Post-Traumatic Stress Disorder (PTSD) report higher anxiety and lower hope (Munoz et al., 2018). These events are internalized by the student, changing their perceptions and interactions with others, and altering their perceptions of control over their lives (Snyder, 2002). Additionally, students who lack social supports struggle with social anxiety and experience lower levels of hope (Sahranç et al., 2018). This is especially true of children who are bullying victims, perpetrators, or both (Carney et al., 2019). Existing research has eliminated gender, race, and SES as risk-factors (Dixson et al., 2017; Feldman et al., 2009).

Secondly, factors external to the school, such as family dynamics, parenting style, and climate of the home, are risk factors that may affect the development of hope. Students who have experienced the loss of a parent through migration, divorce, remarriage, or death may be at-risk (Snyder, 2002). This may be related to disrupted routines, fewer available social supports, or fewer opportunities. Students from highly supportive families with high expectations experience different levels of hope and different hope level trajectories across time than students from families with lower
expectations and/or supports (Jiang et al., 2013). Finally, students may be at-risk of low hope if they lack parental boundaries, consistency, or have few choices, which results in a student’s failure to progress through the life skill learning process in a meaningful way (Snyder, 2002).

Thirdly, some school factors are risk factors for low hope. Poor school climate, large class size, student grade level, and repeated poor outcomes in the school environment are risk factors (Bashant, 2016; Carrington, 2018; Dixson et al., 2017; Lopez, 2010). In schools with poor climate or large class sizes, there is more competition for resources among students resulting in more tension and less collaborative behaviors; thus, students’ tangible and social resources are limited. Starting in middle school and continuing throughout high school, hope declines with girls’ ratings declining faster than boys’; however, this effect is mediated by baseline hope levels with individuals with high hope at baseline experiencing less decline over time (Heaven & Ciarrochi, 2008). This highlights the importance of identifying students with low-hope as early as possible and providing quality interventions that mitigate risk factors.

Hope isn’t innate or a trait resistant to change; rather it is taught over the course of childhood which means that it is amenable to intervention in the school environment (Bashant, 2016; Snyder, 1995). Schools have an important part to play in teaching hope by providing students with the academic, behavioral, physical, and social-emotional supports necessary to build life skills including hope and social-emotional competence. By providing programming or interventions that help all students master life skills, school staff, families, and students can partner to improve the success rates of students (Curran & Reivich, 2011).
Protective Factors and School Efforts

Bashant (2016) provides a case study of a high school in New York that underwent targeted schoolwide changes to improve students’ hope, social-emotional competence, and perceptions of school climate (with a focus on student-staff relationships). The school implemented the following for all students: repetition of daily positive affirmations, high expectations, frequent recognition of successes, small class sizes, focus on mastery, models of success, and hope-related activities. At baseline the class in question experienced significant economic and family hardship and the district projected that only 33% of students in the class would graduate; however, 100% of students in the class graduated (Bashant, 2016).

When researchers interviewed students in an attempt to identify contributing factors, several patterns emerged. Some students reported self-identified trait protective factors such as agency, sense of obligation to family, high self-esteem, or internal locus of control. Others cited supportive environmental factors or resources such as supportive and involved school staff, supportive peer relationships, and high expectations set by teachers. Yet others indicated the importance of family protective factors such as authoritative parenting style, high parental expectations, and models of hardworking adults. Reports from students in this study and the impressive gains made by students indicate the importance of establishing and maintaining a positive school climate from the perspectives of students, teaching and reinforcing social-emotional competence, and partnering with and empowering families in supporting their students (Bashant, 2016).

Similarly, Carrington (2018) conducted a qualitative study to determine the factors contributing to high hope in at-risk students. In this study, “at-risk” was defined as
having one or more of the following life barriers: high-mobility, family income below the poverty line, exposure to traumatic event(s), single-parent households, being a first-generation immigrant in the United States, being a member of a minority group, and being an English Language Learner. Intrinsically, these students tended to be motivated by actual past failure and potential future failure, to focus more on the future than on the past, and to find drive in the pursuit of a better life for themselves and their families. When confronted with failure, they demonstrated creativity and flexibility in their problem-solving skills (i.e., social-emotional competence) and generated alternative paths toward their goals (Carrington, 2018).

Extrinsically, time after time, examination of the individuals’ stories emphasized the importance of having a social support network consisting of the student’s family, peers, and/or one or more school staff members (Carrington, 2018). The findings in this study were further supported and explained by Jacobs (2005) and Sharabi et al. (2012), specifically that having close, supportive relationships improves individuals’ hope. Students who were close with their families and had families that were inflexible and highly structured had higher perceptions of support, security, and hope. Students with highly flexible, less close families reported lower levels of family support, hope, and academic involvement, along with more mental health concerns. Finally, students with very close, flexible families reported higher hope, academic involvement, family support, effort investment, and mental health (Sharabi et al., 2012). For these children, families, school staff, and friends served as a social support network, human resources to which the individual could turn for encouragement, motivation, and reinforcement of life skills.
These findings were further supported by a study conducted by Feldman et al. (2018). In this study, the authors found that family closeness and climate have an impact on the development of life skills and academic achievement; specifically, students belonging to close, supportive families evidenced better hope and social-emotional competence (Feldman et al., 2018). Together, these studies indicate that belonging to a close-knit, flexible family improves hope and social-emotional competence (Sharabi et al., 2012). Children who belong to close-knit families and have secure attachments to their parents tend to have better social-emotional competence that extends into the school setting. However, in the case of students who lack caring, supportive families, research has shown the benefits of a caring, supportive school family.

Revisiting the Carrington (2018) study, students perceived the school environment as an escape from their home and life circumstances that were less predictable and controllable than the school environment. They described welcoming, encouraging school environments, feelings of safety and security with school staff, and the value and potential that staff saw in them. Students told stories about learning and life opportunities provided by staff who believed in them, the high expectations set by staff, development of social-emotional competence (e.g., coping strategies, problem-solving), access to resources (e.g., food, shelter, rides), and collaboration in goal realization and future planning (Carrington, 2018). The school staff in this study were partners with the students, working alongside them and encouraging them while providing models of prosocial life skills. The adults believed in the students’ natural strengths and abilities to overcome adversity and barriers at times when the students themselves were discouraged or unsure of how to move forward. In partnering with other students and staff and being
accepting of assistance, resources, and encouragement, students were able to collaboratively and collectively meet their goals (Carrington, 2018).

**Hope and Special Education**

According to a study conducted by Ringl (2000), high school students receiving special education services with high hope as a personality trait also tend to exhibit high situational hope regardless of race or grade, with males more likely to exhibit high hope as a personality trait than females and students in lower grades demonstrating higher situational or state hope than students in upper grades. Further, males demonstrated similar-to-better ability to set long-term goals and make short-term objectives toward long-term goal completion than females, although they also tended to make goals that were less realistic. Females tended to self-select employment and extracurricular activities that directly supported their long-term career goals. Both genders lacked the pathways, or the ability to formulate strategies to meet their goals and the results of the study indicated no correlation between state and dispositional hope or hope and locus of control. Overall, students enrolled in special education demonstrated better state agency and pathways than dispositional agency and pathways, indicating a better ability to plan for and achieve short-term goals than long-term goals (Ringl, 2000).

Two additional studies examined hope in special education or similar populations. Westburg and Martin (2003) extended an invitation for a university-based reading and writing program to students ages eight to 15 and their parents. During the program, students worked with adults leading the program to write a plan to improve their reading and writing skills, made plans to meet their goals, and problem-solved around barriers that they encountered. Despite the short treatment course of the program, students
experienced a slight but not significant gain in overall hope and agency scores and significant gains in pathways thinking (Westburg & Martin, 2003).

One could argue that the individual plans and intense services offered to participants in this study somewhat resembled special education services, assuming that students who elected to participate experienced delays in the areas of reading and writing. Further, the skill and individualized plan development, problem solving skills, and progress monitoring involved in the program mirrored that typically conducted by special education staff. Therefore, this study serves as a preliminary investigation into the hope skills of students who require additional services to be educationally successful and suggests that these individuals would benefit from additional services to improve hope. This study also suggests that it is worthwhile to determine whether students receiving special education services also experience gains in pathways thinking and whether the more long-term, intensive services provided by special education are associated with significant improvements in the student’s overall hope scores.

Rosenstreich et al. (2015) conducted a study examining the correlation between hope, optimism, and loneliness among Israeli college-age students with known learning disabilities. During the study, students attended a one-day workshop focusing on hope-related skills, such as setting goals, examining different pathways, accessing sources of agency, predicting barriers, and brainstorming strategies for circumventing barriers. The hope, optimism, and loneliness scores of students with learning disabilities and typically-developing students were compared before the workshop, immediately following completion of the workshop, and one month after the workshop ended. The findings of the study suggested that students with learning disabilities made short-term gains in hope
and decreases in feelings of loneliness, but that gains were not maintained over time and were insignificant between pretest and posttest. On the other hand, typically-developing students experienced gains in hope and reductions in ratings of loneliness that were maintained over time. Overall, students with learning disabilities were lonelier and less hopeful and optimistic than their counterparts without learning disabilities and did not experience long-term benefits from the one-day workshop (Rosenstreich et al., 2015).

Although college students with learning disabilities in this study did not demonstrate gains in skill and improvements in perceptions of hope, loneliness, and optimism that were maintained over time, they did report short-term improvements after only one day. This begs the question of the long-term impact of occasional universal social-emotional interventions on students with disabilities and further supports the assertion that these individuals should be identified and provided frequent, intensive interventions with repetition over time to maintain skills and progress. The results also suggest the importance of intensive social-emotional supports and services over the course of several years for all students, but particularly for younger students when they are most malleable and when skills can be taught, modeled, and reinforced over time in a range of contexts.

One other study, Madden et al. (2011), did not specifically focus on students enrolled in special education, but implemented a pilot program with general education students that mirrored the special education goal-setting process. In this study, teachers coached students in making SMART goals, accessing resources to promote goal achievement, problem-solving to overcome barriers, measuring progress, and learning about the goal cycle. This program resulted in self-reported increases in student hope and
engagement. Teachers reported feelings of improved relationships with students, students being more vocal about others’ strengths and praising peers for their strengths, improvements in relationships, an improvement in collaboration and mutual support in the hope cycle, improved engagement and enthusiasm about learning, increased positive peer recognition and feedback, and improved classroom climate (Madden et al., 2011). The results of this study suggest a direct relationship between hope, classroom climate, and social-emotional competence. It also demonstrates that students’ levels of hope can be improved by providing an intervention and that improvements in life skills can vastly impact a student’s education.

**Summary**

Existing research suggests, but rarely directly examines, a link between social-emotional competence and hope. The findings of the Carrington (2018) study are supported by Snyder (1995), particularly that students are best able to achieve goals and exhibit hope in environments that are supportive, resourceful, collaborative, and mutually beneficial. Although not explicitly stated, descriptions of the environments in the Carrington (2018) and Snyder (1995) studies fit the description of positive school climate. School climate and the development of life skills are within the control of schools. It can be hypothesized that school climate serves as a foundation for all types of learning in the school environment and impacts students’ abilities to develop life skills.

Review of existing research also appears to reveal a potential link between social-emotional competence and hope within the school setting. Schools with positive climate focus heavily on relationships and high expectations for all learners. Students respond to the social expectations of the setting by engaging in prosocial behaviors and putting
effort into collective achievement. As a result, educational experiences, achievement scores, and social-emotional competencies improve. Despite positive effects for the overall school population, life skills are not compared in the research at different levels of educational support. This study investigated the school’s complex role in fostering the development of hope and social-emotional competence within the school environment.
Chapter 3: Methods

This correlational study determined the relationship between hope and social-emotional competence at the elementary level and whether students enrolled in general education and students receiving special education supports demonstrated different levels of hope and social-emotional competence. First, a quantitative approach determined whether a relationship existed between students’ self-reported hope levels and social-emotional competence, as reported by teachers. Then, this study compared students’ self-reported hope and teacher-reported social-emotional competence to determine whether significant differences existed between students participating in general education and special education programs. Finally, an exploratory meta-analytic approach was used to determine the school-controlled actions that may mitigate the gaps in hope and social-emotional competence between these two populations. Studies have not examined similar topics in combination or in depth; therefore, this study was a preliminary investigation of whether these constructs are related, whether gaps exist between student groups within schools in regard to these constructs, and what factors within the school’s control have the potential to mitigate gaps.

To protect the participants involved in the study, data was de-identified by the district and the study was approved by the school district providing the data, the University of Nebraska at Omaha, and the Institutional Review Board (IRB) at the University of Nebraska Medical Center (UNMC).

Participants

Existing data was examined from a small, urban, public school district in the Midwest serving approximately 3,400 students in grades pre-kindergarten through 12th
grade. The district consists of six elementary schools, one middle school, and one high school. All elementary schools serve grades pre-kindergarten through sixth grade. The middle school serves students in grades seven and eight and the high school serves grades nine-12. Approximately 30% of the district is option enrollment, meaning 30% of the attending students live outside of the district’s borders and choose to attend the school over the school in whose attendance zone they live. English Learners account for 11% of the district population, 55% of students qualify for free/reduced lunch, and 17% receive special education services (Nebraska Department of Education, n.d.).

The two research questions were answered using 153 matched pairs of CHS and DESSA-mini scores. After the data points were matched, demographic data (i.e., age, grade, gender, and educational service) were recorded, obsolete data points (i.e., unmatched data, duplicate data, and participants in Level 2 placements) were deleted, and data was deidentified. Demographic information including grade, gender, age, and special education status was requested from the district and will be discussed in Chapter 4. Due to the small sample size, information about race, English Learner status, and disability category were not requested from the district to further protect the identities and privacy of participants. The school was selected for participation in the current study because it piloted a new universal social-emotional screener (the Devereux Student Strengths Assessment-mini or the DESSA-mini) during the 2019-2020 school year. One classroom was excluded because it was a self-contained behavior skills program, meaning that students who attended this classroom had a disability requiring more intensive social-emotional and behavioral supports in the school environment than other students. Students in self-contained classrooms have such significantly different, highly
individualized experiences in the school setting that their environment often no longer resembles a typical school setting. Students with two DESSA-mini scores were removed unless the two scores were identical and then that student was represented only once, not twice, in the data.

Existing hope and social-emotional data were reviewed from the 2019-2020 school year. The Children’s Hope Survey (CHS) was administered to students in grades three through six from August 2019 to October 2019. The DESSA-mini was completed by teachers of students in grades three through six in December 2019 and April 2020. The December 2019 results were used in the quantitative analyses because they were collected before pandemic-induced remote learning began later that spring 2020. The April 2020 administration was completed approximately one month after the closure of schools related to the COVID-19 pandemic; exposure to the learning environment during this time was infrequent and varied widely by student, so the April 2020 administration was not determined to be a reliable source of data.

**Measures for Data Collection**

Data from the following measures was examined in the current study. Each measure will be described and the reliability and validity of each measure will be discussed in this section.

*Children’s Hope Scale (CHS)*

The CHS is a 6-item self-report survey that evaluates children’s goals and how they think about themselves and their abilities. Students responded to statements by choosing one of six Likert-style responses (i.e., none of the time, a little of the time, some of the time, a lot of the time, most of the time, or all of the time) indicating how well they
believed each statement described themselves. Surveys were independently completed on iPads using a survey on Google Forms. This measure is copyrighted and due to the author’s overly-respectful and cautious approach, the measure was not included in the appendix of this study. However, interested readers can find a copy of the CHS in Snyder et al. (1997). The district that participated in this study had rights to use this measure.

The survey yields pathways and agency subscale scores based on 3 items each and a total score based on all 6 items. Subscale scores range from 3-18 with an average of 12.5; a score greater than 15 indicates above average levels of hope while a score less than 10 indicates below average hope. Pathways and agency subscale scores are typically approximately equivalent but differ at times. Although both pathways and agency scores are provided, the overall score is the most representative measure of a student’s hope. Overall scores range from 6-36 with an average score of 25; scores greater than 29 indicate high levels of hope and scores less than 21 indicate low hope. Overall quartile scores are also provided with scores below 3 being significantly below average, scores 3-4.67 being at-risk, and scores above 4.67 being average or typical (Snyder et al., 1997). Quartile scores were used for data analyses in this study.

The CHS was normed on five samples of 800 children total in a variety of settings (e.g., hospitals, public schools) with a range of health conditions (e.g., healthy/typically-developing, ADHD, cancer and in recovery, arthritis, sickle cell anemia). The researchers found no significant differences in ratings based on gender, age, or racial differences between the African American, Caucasian, and Hispanic groups, which were the only racial groups significantly large enough to compare (Snyder et al., 1997).
Snyder et al. (1997) established acceptable internal consistency ($\alpha_{median} = .77$, $\alpha_{range} = .72-.86, ps < .01$) and test-retest reliability [$r(359) = .71, p < .001$; $r(89) = .73, p < .001$], indicating an acceptable interrelatedness between items meant to measure the same construct and acceptable ability to give similar scores over time, respectively. Additionally, Snyder et al. (1997) examined this measure’s validity, including convergent, discriminant, predictive, and incremental validity.

Convergent validity indicates a significant positive correlation between parent- and child-reported ratings on the CHS [$r(89) = .50-.53, ps < .01$], a significant positive correlation between the CHS and the Self-Perception Profile for Children (SPP-C; which examines children’s perceptions of their abilities in regard to academics, social acceptance, athletic abilities, physical appearance, and behavioral conduct), a significant negative correlation between the CHS and the Children’s Attributional Style Questionnaire [$r(164, 72) = .32-.52$ for Total Positive Events; $r(164, 72) = -.20$ to -.19 for Total Negative Events; indicates a positive correlation between hope and internal locus of control and places more emphasis on positive outcomes than failures], a significant positive correlation between hope and the global self-worth index of the SPP-C [$r(164, 320) = .23-.55, p < .01-.001$, depending on group], and a significant negative correlation between hope and depression as measured using the Child Depression Inventory [$r(162, 345) = -.27$ to -.48, $p<.001$, depending on the group; Snyder et al., 1997].

Snyder et al. (1997) determined that hope, as measured by the CHS, is a construct separate from intelligence by comparing the CHS to two common cognitive tests, the Wechsler Intelligence Scale for Children-Revised (WISC-R) and the Wechsler Intelligence Scale for Children-Third Edition (WISC-III) [$r(159) = .03-.04$, depending on
the WISC-R or WISC-III score selected for comparison]. By examining the relationship between the CHS and the Iowa Test of Basic Skills, which is a common achievement test for students in grades preschool through 12, Snyder et al. (1997) found a moderate positive correlation between the two measures, indicating a moderate relationship between CHS ratings and academic achievement \( r(100) = .50, p < .001 \) and an examination of the predictive power of the CHS indicated some use in predicting future academic performance \( R^2 = .02, p = .05 \). Overall, the CHS is believed to be a reliable and valid measure. Existing data from the Fall 2019 administration was considered in this study.

**Devereux Student Strengths Assessment-mini (DESSA-mini)**

According to Naglieri et al. (2014), the DESSA-mini is a social-emotional skill screening and progress monitoring tool that does not require specialized training and can be completed by any adult in the school environment that has known the target student for at least four weeks. It seeks to identify social-emotional strengths, at-risk skills, and areas of social-emotional need to identify students with adequate protective factors and social-emotional competence and those who are actively experiencing or at-risk of experiencing future social, emotional, behavioral, or mental health problems and may be in need of additional prevention or intervention services. This measure can also be used to progress monitor students’ skills as they receive social-emotional interventions (Naglieri et al., 2014).

The DESSA-mini consists of four 8-item interchangeable screeners (Apperson, Inc., 2014). The items measure the student’s social-emotional protective factors including decision-making skills, relationship skills, optimistic thinking, self-management, social
awareness, self-awareness, personal responsibility, and goal-directed behavior. Teachers use a five-point Likert response scale (i.e., never, rarely, occasionally, frequently, very frequently) to indicate the frequency with which the child exhibited positively-phrased behaviors in the past four weeks including work habits, persistence, social supports, goal-oriented behaviors, attention, school involvement, engagement, and self-esteem. Each response is assigned a point value of zero through four (with “never” assigned zero points and “very frequently” assigned four points) that are summed to yield a total raw score (0-32). The raw score is then converted into a modified, parameterized T-score (range=28-72, $M=50$, $SD=10$) and percentile rank with scores ultimately sorted into three groups based on the T-score (Strength: T-score >60; Typical: 41<T<59; Need for Instruction: T-score<40; Naglieri et al., 2014). The higher the score, the better the student’s social-emotional competence.

The items selected for the DESSA-mini forms were selected from the DESSA full form using a national screening and piloting process involving a representative student sample. The items of the DESSA full form were rank ordered in terms of their relatedness to the overall Social Emotional Competency score and the highest-ranking 32 items were selected and organized into the different DESSA-mini forms. The DESSA-mini was normed on 1,250 primary and intermediate elementary and middle school students that were a representative sample of the United States population in terms of gender, grade, race, region, Hispanic ethnicity, and socioeconomic status (Naglieri et al., 2014).

According to Naglieri et al. (2014), the internal reliability ($r = .912-.924$, depending on the form), alternate form reliability ($r = .90-.93$, $p < .01$), test-retest reliability ($r = .88-.94$, $p < .01$), and inter-rater reliability ($r(51) = .70-.81$, $p < .01$) were
adequate. Validity statistics indicate a significant, strong correlation between the DESSA full form and the DESSA-mini forms \( r = .95-.96, p < .01 \), strong agreement between the results of each of the DESSA-mini forms and the DESSA full form (94.5%-95.3% agreement), significant disagreement between the scores of general education and special education subgroups \( d\text{-ratio}=1.17-1.39, p < .001 \), and high consistency of identification based on race between the DESSA-mini forms and the DESSA full scale (80.7-85.1% average agreement) with similar rates of identification between the races examined (Naglieri et al., 2014). Overall, these results indicate that the individual DESSA-mini forms give similar ratings, the DESSA-mini forms give comparable ratings to the DESSA full form, the form is able to distinguish children with atypically-developing social competence within a population of students and is able to differentiate students with typically- from atypically-developing social-emotional competence, and is culturally-sensitive meaning that it does not disproportionately identify or overlook students from certain races as in need of intervention.

Overall, the DESSA-mini demonstrates adequate reliability and validity for identifying students with typically-developing social-emotional competence, as well as identifying students who are at-risk of experiencing or are currently experiencing mental health, social-emotional, or behavioral disorders who would benefit from additional interventions. The DESSA-mini may also be used over time to monitor the progress of students with identified mental health disorders, or social, emotional, or behavioral difficulties in the implementation of the Response to Intervention framework. Existing data from the Winter 2019/2020 (December 2019-January 2020) administration was
considered in this study. Teachers completed the DESSA-mini Form 1 for all students during the administration period.

Data Analysis

Research Question 1

What is the relationship between elementary students’ hope and social-emotional competence?

This quantitative question was explored using existing CHS quartile scores and DESSA-mini T-scores to determine whether a relationship exists between hope and social-emotional competence and, if so, the strength and magnitude of the relationship. A scatterplot comparing the CHS and DESSA-mini scores with a linear trendline was examined and the coefficient of determination (R^2) was calculated. In interpreting the scatterplot of the data, the direction (i.e., positive or negative), form (i.e., linear or curvilinear), and strength of the slope were considered. The R^2 was calculated to isolate the amount of one variable’s variance that can be explained by the other variable. Deidentified, matched data was entered into a password-protected Google Sheets spreadsheet under the University of Nebraska-Omaha (UNO) domain to calculate the Pearson Correlation Coefficient and p-value. The magnitude and strength of the coefficient were interpreted. This analysis was selected because the data was continuous and normally distributed without outliers.

A t-test of correlation was performed to further examine the relationship between hope and social-emotional competence, particularly to determine whether there was a significant correlation between the variables in the population, as well as in the study sample. Following are the null and alternative hypotheses of this research question:
$H_0$: The correlation between hope and social-emotional competence for the overall population is not significantly different from zero; there is not a significant relationship between hope (as measured by the CHS) and social-emotional competence (as measured by the DESSA-mini) for the overall population.

$H_1$: The correlation between hope and social-emotional competence for the overall population is significantly different from zero; there is a significant relationship between hope (as measured by the CHS) and social-emotional competence (as measured by the DESSA-mini) for the overall population.

**Research Question 2**

Does the relationship between hope and social-emotional competence vary by educational service (i.e., students receiving general education compared to students receiving special education)?

Two scatterplots were created comparing the CHS and DESSA-mini scores for the general education and special education subgroups. The trendlines were examined and the coefficients of determination ($R^2$) were calculated. The directions (i.e., positive or negative), forms (i.e., linear or curvilinear), and strengths of the slopes were considered. Data outliers were examined. The $R^2$ were calculated to isolate the amount of one variable’s variance that can be explained by the other variable and were compared between the general education and special education subgroups.

Independent, two-tailed t-tests compared the general education and special education groups to determine if differences existed between the groups’ mean hope and social-emotional competence scores. This test was selected because the data was matched, the independent variable had two levels (i.e., general education and special education).
education), the dependent variables (i.e., CHS and DESSA-mini score) were continuous, and comparison of the group means would determine whether differences exist. Group hope and social-emotional competence means were used to calculate \( p \)-values, quantifying the likelihood of finding at least the calculated difference coincidentally. Following are the null and alternative hypotheses for this research question:

\( H_0 \) Hope: There is not a significant difference between the means of the general education and special education groups on the measure of hope (as measured by the CHS quartile score).

\( H_1 \) Hope: There is a significant difference between the means of the general education and special education groups on the measure of hope (as measured by the CHS quartile score).

\( H_0 \) Social-Emotional Competence: There is not a significant difference between the means of the general education and special education groups on the measure of social-emotional competence (as measured by the DESSA-mini).

\( H_1 \) Social-Emotional Competence: There is a significant difference between the means of the general education and special education groups on the measure of social-emotional competence (as measured by the DESSA-mini).

**Summary**

This quantitative research study determined (1) the relationship between elementary students’ hope and social-emotional competence and (2) whether this relationship varies by educational service, namely general education compared to special education. The results of these analyses will be discussed in Chapters 4 and 5.
Chapter 4: Results

This quantitative study sought to understand the impact of special education status on students’ development of life skills (i.e., social-emotional competence and hope) and to determine whether a relationship exists between these two variables. Existing data was utilized from students in grades three through six in one elementary school in a small, urban, public school district in the Midwest. Password-protected Google Sheets under the UNO domain was used to analyze descriptive (i.e., gender, age, and grade) and inferential (i.e., CHS and DESSA-mini) data in order to answer the research questions. Scatterplots of the data were examined and Pearson Correlation Coefficients and t-tests were calculated to examine each of the research questions. The data was supportive of a significant relationship between social-emotional competence and hope and indicated significantly different levels of social-emotional competence and hope between students receiving general education and special education services. Therefore, a school-wide self-monitoring tool (Appendix) was created to assist schools in determining whether differences exist in the educational environments and opportunities of students receiving general and special education services. In this chapter, demographic statistics and ancillary analytics will first be discussed, followed by answers to the two research questions. The self-monitoring tool will be discussed in depth in Chapter 5.

Demographic Statistics and Ancillary Analytics

Paired data was collected and analyzed from 153 participants including 42 third graders (27.5%), 47 fourth graders (30.7%), 24 fifth graders (15.7%), and 40 sixth graders (26.1%). It should be noted that the number of students in each grade is not an indication of class size, as the number of classrooms in each grade varied. Some data
were excluded from analyses because they were not paired data, likely indicating that the
student transferred out of the building after the CHS was administered or moved into the
building between the CHS and DESSA-mini administrations, the CHS was administered
twice within a one-day period and yielded different results, the student entered their name
in a way that the data points were unable to be matched between measures, or because a
student was enrolled in a special program (e.g., a behavior skills program/classroom) that
did not mirror the general education environment. When differences in demographic data
occurred (e.g., different grades were reported on the DESSA-mini and CHS data), the
district-generated data based on enrollment paperwork (as opposed to the student-
reported data) was used in data analysis and reporting. Paired data was used to minimize
the differences within the sample, which had the potential to skew the data and introduce
an unmeasured variable.

The sample consisted of 87 males (56.9%) and 66 females (43.1%). Further
breakdown of gender at the grade level can be found in Table 1. Grade samples were
approximately equal with the exception of fifth grade, which was significantly lower. The
male sample was larger than the female sample, with more males than females in the fifth
and sixth grades.
Table 1
Sample Composition by Grade and Gender

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Males</th>
<th></th>
<th>Females</th>
<th></th>
<th>Total (by grade)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>n</td>
<td>%</td>
<td>n</td>
<td>%</td>
</tr>
<tr>
<td>3rd grade</td>
<td>20</td>
<td>47.6</td>
<td>22</td>
<td>52.4</td>
<td>42</td>
<td>27.5</td>
</tr>
<tr>
<td>4th grade</td>
<td>24</td>
<td>51.1</td>
<td>23</td>
<td>48.9</td>
<td>47</td>
<td>30.7</td>
</tr>
<tr>
<td>5th grade</td>
<td>16</td>
<td>66.7</td>
<td>8</td>
<td>33.3</td>
<td>24</td>
<td>15.7</td>
</tr>
<tr>
<td>6th grade</td>
<td>27</td>
<td>67.5</td>
<td>13</td>
<td>32.5</td>
<td>40</td>
<td>26.1</td>
</tr>
<tr>
<td>Total (by gender)</td>
<td>87</td>
<td>56.9</td>
<td>66</td>
<td>43.1</td>
<td>153</td>
<td>100</td>
</tr>
</tbody>
</table>

The average age of the participants was 9.75 years with a range of eight-12 years. In regard to special education status, 28 (18.3%) students in the sample received special education services during the 2019-2020 school year, which included students that were eligible under any of the 13 federal disability categories for any portion of the school year. This potentially includes students who were initially evaluated during the school year and received special education services for a latter part of the year, as well as students who received services for part of the year and were dismissed; the number of students who fell within this category is expected to be extremely small, if they existed at all, and are unlikely to have a significant effect on the results of this study. The reasoning for including these potential students is (1) simplifying managing timelines of special education eligibility and DESSA-mini and CHS administrations, and (2) students oftentimes receive interventions and supports through the intervention teams and processes prior to referral for evaluation and after dismissal from services, which are services more than general education curriculum that are supportive of the student and their individual needs. Students who received interventions but were not evaluated and
did not receive special education services during the 2019-2020 school year were combined with the general education subgroup.

There were more students receiving general education (81.7%) than special education services (18.3%) during the 2019-2020 school year. Three-quarters of the students who were eligible for special education were males. There was an increase in the percent of students receiving special education as grades increased, with approximately twice as many fifth and sixth graders receiving special education than third and fourth graders. Table 2 breaks down the percent of students in each service level by grade and reports the overall percent of students in each educational service.

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>General education</th>
<th>Special education</th>
<th>Total (by grade)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$n$</td>
<td>%</td>
<td>$n$</td>
</tr>
<tr>
<td>3rd grade</td>
<td>37</td>
<td>88.1</td>
<td>5</td>
</tr>
<tr>
<td>4th grade</td>
<td>41</td>
<td>87.2</td>
<td>6</td>
</tr>
<tr>
<td>5th grade</td>
<td>18</td>
<td>75</td>
<td>6</td>
</tr>
<tr>
<td>6th grade</td>
<td>29</td>
<td>72.5</td>
<td>11</td>
</tr>
<tr>
<td>Total (by service)</td>
<td>125</td>
<td>81.7</td>
<td>28</td>
</tr>
</tbody>
</table>

**Children’s Hope Scale (CHS)**

CHS scores were reported by quartile score ($M$=4.15, $SD$=0.98) and descriptive hope level (Significantly Below Average [0, 3], At-Risk [3, 4.67], and Typical [4.67, 6]). The distribution of the overall scores (Figure 7), upon visual examination, was bimodal and skewed left with no outliers. The range of scores was 1.17-6.00 with a median and
mode of 4.17. This indicates that more students earned higher scores on the CHS than
would be expected based on the predicted unimodal bell curve distribution of the
population and two groups with different means were included in the data set.

![CHS Quartile Distribution](image)

**Figure 7**
*CHS Quartile Distribution*

When considering descriptive category, most students scored in the At-Risk
range, overall, as well as when considering groups by grade (with the exception of
students in fifth grade), gender, and educational service (Table 3). Approximately equal
percentages of males and females scored in each of the ranges with the majority of both
males and females scoring in the At-Risk range, indicating similar development of hope
across genders. When considering hope development by grade, the majority of students
across grades (with the exception of students in fifth grade who mostly reported Typical
hope) reported At-Risk hope with more students reporting Significantly Below Average
hope as grade level increased. When comparing the scores of the general education and special education groups, it is important to note that the sample for general education was larger than the sample for the special education subgroup, so comparing percentages of students in each descriptive category is the best approach. Across the general education and special education subgroups, most students scored in the At-Risk range followed by the Typical range and then the Significantly Below Average range for both groups (Table 4). Although the majority of students with disabilities scored in the At-Risk range, similar percentages reported Significantly Below Average and Typical levels of hope. However, when examining general education data, most students reported At-Risk hope followed by Typical levels of hope and, finally, Significantly Below Average hope. Overall, students with disabilities were more likely to report Significantly Below Average hope and less likely to report Typical hope than their typically-developing peers. This indicates poorer development of hope in students with disabilities despite receiving additional educational supports and interventions.
Table 3
Number and Percent of Students in Each CHS Descriptive Category by Grade, Gender, and Educational Service

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Significantly Below Average</th>
<th>At-Risk</th>
<th>Typical</th>
<th>Total (by characteristic)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><strong>n</strong></td>
<td><strong>%</strong></td>
<td><strong>n</strong></td>
<td><strong>%</strong></td>
</tr>
<tr>
<td>Grade</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3rd</td>
<td>4</td>
<td>9.5</td>
<td>29</td>
<td>69</td>
</tr>
<tr>
<td>4th</td>
<td>5</td>
<td>10.6</td>
<td>25</td>
<td>53.2</td>
</tr>
<tr>
<td>5th</td>
<td>3</td>
<td>12.5</td>
<td>10</td>
<td>41.7</td>
</tr>
<tr>
<td>6th</td>
<td>5</td>
<td>12.5</td>
<td>26</td>
<td>65</td>
</tr>
<tr>
<td>Gender</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>8</td>
<td>9.2</td>
<td>55</td>
<td>63.2</td>
</tr>
<tr>
<td>Female</td>
<td>9</td>
<td>13.6</td>
<td>35</td>
<td>53</td>
</tr>
<tr>
<td>Educational service</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>General education</td>
<td>12</td>
<td>9.6</td>
<td>73</td>
<td>58.4</td>
</tr>
<tr>
<td>Special education</td>
<td>5</td>
<td>17.9</td>
<td>17</td>
<td>60.7</td>
</tr>
<tr>
<td>Total (by descriptive category)</td>
<td>17</td>
<td>11.1</td>
<td>90</td>
<td>58.8</td>
</tr>
</tbody>
</table>

Devereux Student Strengths Assessment-mini (DESSA-mini)

DESSA-mini scores were reported as adjusted T-scores ($M=53.05$, $SD=12.13$) and categories (Need for Instruction [28, 40], Typical [41, 59], and Strength [60, 71]; Naglieri et al., 2014). The range of scores was 28-71 with a mode of 71 and a median of 53. The distribution of scores was asymmetrical and bimodal with a mild right skew and
no outliers. One of the modes occurred at the maximum limit of the range. This bimodal distribution is an indication that the two groups considered in this study (i.e., general education and special education) were likely to have different score distribution patterns and group means, indicating differences in the mastery of social-emotional competence.

![Histogram of DESSA-mini T-scores](image)

**Figure 8**
*Distribution of DESSA-mini T-scores*

When considering overall scores, most students’ scores fell within the Typical range, followed by Strength and then Needs Instruction (Table 4). The same pattern was observed when examining categorical scores by gender and grade (with the exception of students in fifth grade) with distinct differences in the percent of students who scored in these ranges. More males were perceived as having social-emotional skills in need of instruction and more females’ social-emotional skills were rated as strengths. When comparing the scores of students in general education and special education, most
students in both subgroups scored in the Typical range. However, the social-emotional skills of students with disabilities were equally likely to be rated as needs instruction and Typical, and less likely to be an area of Strength. By far, students in the special education subgroup were rated as having poorer social-emotional competence than students in the general education subgroup.

Table 4
DESSA-mini Category Scores by Grade, Gender, and Educational Service

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Need for Instruction</th>
<th>Typical</th>
<th>Strength</th>
<th>Total (by characteristic)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>n</td>
<td>%</td>
</tr>
<tr>
<td>Grade</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3rd</td>
<td>4</td>
<td>9.5</td>
<td>27</td>
<td>64.3</td>
</tr>
<tr>
<td>4th</td>
<td>7</td>
<td>14.9</td>
<td>27</td>
<td>57.4</td>
</tr>
<tr>
<td>5th</td>
<td>4</td>
<td>16.7</td>
<td>7</td>
<td>29.2</td>
</tr>
<tr>
<td>6th</td>
<td>7</td>
<td>17.5</td>
<td>20</td>
<td>50</td>
</tr>
<tr>
<td>Gender</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>17</td>
<td>19.5</td>
<td>45</td>
<td>51.7</td>
</tr>
<tr>
<td>Female</td>
<td>5</td>
<td>7.6</td>
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<td>54.5</td>
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<td>Educational service</td>
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<td></td>
</tr>
<tr>
<td>General education</td>
<td>9</td>
<td>7.2</td>
<td>67</td>
<td>53.6</td>
</tr>
<tr>
<td>Special education</td>
<td>13</td>
<td>46.4</td>
<td>14</td>
<td>50</td>
</tr>
<tr>
<td>Total (by descriptive category)</td>
<td>22</td>
<td>14.4</td>
<td>81</td>
<td>52.9</td>
</tr>
</tbody>
</table>
Research Questions and Data Analysis

The two research questions were answered using 153 matched pairs of CHS and DESSA-mini scores. After the data points were matched, demographic data (i.e., age, grade, gender, and educational service) were recorded, obsolete data points (i.e., unmatched data, duplicate data, and participants in Level 2 placements) were deleted, and data was deidentified. Password-protected Google Sheets under the UNO domain was used to perform the statistical calculations necessary to answer the research questions as described in the Methods section. Following are the results of the data analyses.

Research Question 1

What is the relationship between elementary students’ hope and social-emotional competence?

$H_0$: There is not a significant relationship between hope (as measured by the CHS) and social-emotional competence (as measured by the DESSA-mini).

$H_1$: There is a significant relationship between hope (as measured by the CHS) and social-emotional competence (as measured by the DESSA-mini).

When examining the scatterplot (Figure 9), the trendline was linear and positive in slope, indicating that the CHS quartile score increased as the DESSA-mini T-score increased; by visual inspection, the relationship between the two variables appeared to be moderately strong and direct. This preliminary examination of data was supportive of a relationship between hope and social-emotional competence. According to this model, 7.8% of variation in hope (as measured by the CHS quartile score) could be explained by changes in social-emotional competence (as measured by the DESSA-mini T-score; $R^2 = .078$), which left 92.2% of hope variance unexplained solely by social-emotional
competence. This seemingly small coefficient of determination may be explained by being a measurement of human behavior, which tends to be lower than more stable and predictable concepts, and because only two variables were considered in this calculation. There were no data outliers.

![Graph showing scatterplot of CHS Quartile Scores and DESSA-mini T-scores.](image)

**Figure 9**
Scatterplot of CHS Quartile Scores and DESSA-mini T-scores

The Pearson Correlation Coefficient indicated a negligent, direct relationship between hope and social-emotional competence for the overall population of the study \([r(151) = .28; p = .78]\). This test alone was not supportive of a significant relationship between hope and social-emotional competence, but this result was not unexpected due to the small sample examined in the study. A t-test of correlation was performed to take into account this small sample size. The t-test of correlation indicated a strong, direct relationship between hope and social-emotional competence \((p = 4.055)\). This indicates that a correlation of .28 for 151 matched pairs is 4.055 standard deviations above the
mean. The chance of ending up with this correlation by chance is small, less than 1/100th percent. Although the Pearson Correlation Coefficient of .28 seems small compared to established strength ranges typically used in data interpretation, the significant t-test of correlation supports that the Pearson Correlation Coefficient is significant in regard to this data set. Overall, the results of these statistical analyses are supportive of rejecting the null hypothesis \(H_0\) and accepting the alternative hypothesis \(H_1\) that there is a significant relationship between hope as measured by the CHS and social-emotional competence as measured by the DESSA-mini for the overall study population.

**Research Question 2**

Does the relationship between hope and social-emotional competence vary by educational service (i.e., students receiving general education compared to students receiving special education)?

\(H_0\) Hope: There is not a significant difference between the means of the general education and special education groups on the measure of hope (as measured by the CHS quartile score).

\(H_1\) Hope: There is a significant difference between the means of the general education and special education groups on the measure of hope (as measured by the CHS quartile score).

\(H_0\) Social-Emotional Competence: There is not a significant difference between the means of the general education and special education groups on the measure of social-emotional competence (as measured by the DESSA-mini).
$H_1$ Social-Emotional Competence: There is a significant difference between the means of the general education and special education groups on the measure of social-emotional competence (as measured by the DESSA-mini).

When visually comparing CHS and DESSA-mini scores by subgroup using scatterplots (Figures 10 and 11), both correlations appear to be direct with a moderately strong strength for the special education subgroup and a weak-to-moderate strength for the general education subgroup. This was preliminarily supportive of a stronger relationship between hope and social-emotional competence for students with disabilities. The coefficient of determination for the special education group ($R^2 = .136$) was much higher than that of the general education group ($R^2 = .036$) indicating a higher percent of variation in hope and social-emotional competence was explained within the special education subgroup (13.8%) than the general education subgroup (3.6%). In other words, hope and social-emotional competence were more closely related variables for students with disabilities than their typically-developing peers.
Comparison of CHS and DESSA-mini Scores for the Special Education Subgroup

Figure 10
Comparison of CHS and DESSA-mini Scores for the General Education Subgroup

Figure 11
Comparison of the CHS and DESSA-mini Scores for the General Education Subgroup
Independent, two-tailed t-tests revealed significant differences in both hope ($p = 0.012$) and social emotional competence ($p < 0.0001$) between the general education and special education subgroups. The results of these analyses support rejection of the null hypotheses ($H_0$), which state that there are no significant differences in hope and social-emotional competence between the subgroups and support the alternate hypotheses ($H_1$) that there are differences in hope and social-emotional competence between the subgroups. When considering the demographic and ancillary data discussed previously in this chapter, the data is supportive of gaps in life skill development between the subgroups, with students in special education demonstrating poorer life skills.

**Summary**

The statistical analyses revealed a significant relationship between hope and social-emotional competence for the overall population of the study. When comparing the hope and social-emotional competence scores of students in general education and special education programs, there were significant differences, indicating that students receiving general education supports and special education supports experience significantly different levels of hope and social-emotional competence. These results will be discussed and explored more in the context of current research in Chapter 5.
Chapter 5: Conclusions and Discussion

Social-emotional competence and hope were two life skills examined in the current study. Social-emotional competence is a self-awareness and control of feelings and behaviors that enables individuals to successfully form relationships and interact with others in prosocial ways (Naglieri et al., 2014). Hope is the process of goal pursuit including pathways thinking (i.e., the many potential ways to achieve a goal) and agency thinking (i.e., the feelings and emotions surrounding goals that either spur or hinder action; Snyder, 2000). Adequate development of these life skills is crucial to positive short- and long-term outcomes in the areas of physical and mental health, life satisfaction, self-identity, social support, educational and career attainment, academic skills, and behavioral skills (Doll, 2010; La Salle et al., 2016; Snyder, 2002; Wang & Degol, 2016). Individuals with high hope and social-emotional competence have superior skills and access to resources, including social support networks, that activate a positive feedback loop that encourages and enables them to successfully pursue and achieve goals throughout their lifetimes.

While hope and social-emotional competence are frequently naturally learned through interactions with caregivers, peers, and teachers throughout childhood and into adolescence, some children are at risk of delayed or hindered development of life skills related to quality of family relationships, chronological age, physical and mental health conditions, and trauma history and events (La Salle et al., 2016; Munoz et al., 2018; Snyder, 2000). In regard to school-related risk factors, negative climate, large class size, grade, and repeated failure have been shown to inhibit hope (Bashant, 2016; Carrington, 2018; Dixson et al., 2017; Lopez, 2010). General versus special education status has not
previously been examined as a potential risk or protective factor for the development of life skills and has only been hinted at in the existing literature.

However, students with disabilities, due to the characteristics of their disability(ies), may have difficulty developing components of social-emotional learning and/or hope and may have needs that make them appear as an “other” in the general education classroom, further hindering their development of life skills. As a result, these students are at higher risk of academic failure, social-emotional delays, behavioral problems, and drop-out, and may experience learned helplessness, poor self-esteem, and reduced opportunities both within and outside of the classroom (Lombardi et al., 1990). Addressing all students’ individual needs, especially students with disabilities, is imperative in mitigating gaps in all domains of learning, providing equitable educational and life opportunities, and reducing disproportionality (NEA, 2007).

Despite risk factors, life skills are able to be taught and it is the responsibility of schools to identify students who have, or are at-risk of having, atypical development of life skills and provide interventions to address students’ needs (Bashant, 2016; ESSA, 2015; Snyder, 1995). Currently, the educational system is undergoing a paradigm shift toward schools providing increasing mental health and behavioral supports in a time when mental health concerns are increasingly more prevalent and barriers stand in the way of some students accessing community supports (CDC, 2020). Schools are in a unique position to impact life skill acquisition. Schools are able to support the development of life skills for all students by teaching universal life skills curriculum, providing counseling services, and helping provide targeted interventions for at-risk or struggling students. Further, schools support students with disabilities by providing an
IEP through special education that targets the students’ delayed skills. These students are afforded intensive social and/or learning supports through special education to accommodate their unique needs in the educational environment, mitigate skill gaps, and provide equitable opportunities (ESSA, 2015; IDEA, 2004).

Students are best able to achieve their goals in environments that are supportive, resourceful, and collaborative and schools are in the unique position of having control over variables within their buildings and interacting with students for an average of 1,232 hours each school year (Carrington, 2018; National Center for Education Statistics, n.d.; Snyder, 1995). During these hours, teachers learn about students and their lives, attempt to build and maintain positive relationships with students, teach and encourage students to achieve to high degrees, meet students’ holistic needs, and aid students in finding success in all domains. Existing research does not explore whether hope and social-emotional competence are related constructs in the elementary setting, which has the potential to change how social-emotional skills and hope are taught within schools; specifically, answering this question would indicate whether separate interventions should be implemented for each of these life skills or whether an intervention in one area may have the potential to strengthen skills in the other. Existing research also has not examined whether there are gaps in the development of life skills between students in general education and special education, which is an indicator of whether special education, in its current form, is successful at mitigating gaps and promoting equitable outcomes.

These questions were answered in the current study using a quantitative approach that examined existing CHS quartile scores and DESSA-mini T-scores from 153 students
in grades three through six at one elementary school in a small, urban, public school district in the Midwest. In this study, students were considered within the special education subgroup if they received special education services for any portion of the 2019-2020 school year. Students receiving other types of support (e.g., 504 Plan, intervention plan, English Learner program) between the general education and special education levels who were not eligible for special education during the 2019-2020 school year were considered within the general education subgroup. The results of this study supported the hypotheses that hope and social-emotional competence are related constructs and there are significant differences in hope and social-emotional competence between students receiving general education and special education services. The findings of this study necessitated the creation of a self-evaluation and monitoring tool that schools can use to compare life skills between general education and special education subgroups to detect whether gaps exist and identify ways to mitigate any found gaps; this tool can be found in the Appendix and this tool, as well as the underlying research, will be discussed in this chapter.

**Discussion of the Demographic Data and Ancillary Analytics**

The percent of students receiving special education in this study is unsurprising and comparable to the average of the district (18%), comparable districts (15%), and the state (16%; NDE, n.d.). Also, unsurprisingly, the percent of students receiving special education increased as grade level increased, with twice as many students in upper grades receiving services than students in grades three and four. This is logical given that students in fifth and sixth grades have been in the educational setting for longer so these students are known by more staff members, have worked through intervention processes,
their progress has been monitored over time, and any existing disabilities have likely
made themselves known. In contrast, students in third and fourth grades have not been in
the school for quite as long and are just on the brink of shifting to deeper skills (e.g.,
reading to learn instead of learning to read, abstract thinking and concepts), at which time
shaky or missing foundational skills may become more apparent.

What is surprising, however, is that three-quarters of the students receiving
special education services in this study were male when males accounted for only 56.9%
of the study population. One explanation is that males are traditionally more likely to be
identified as having an educational disability, possibly related to higher rates of medical
diagnoses, tendencies to demonstrate more externalizing behaviors than females, or a
range of biases in the educational and identification systems. However, recently,
derrepresentation of females in special education, which would misleadingly inflate the
percent of male representation in special education, has been an explanation argued by
Wehmeyer and Schwartz (2001). Another explanation is that males tend to have poorer
perceptions of climate, which is the foundation upon which all learning occurs in the
educational environment (La Salle et al., 2016). If males do, in fact, perceive school
climate in a more negative light, they may have more difficulty establishing relationships,
working collaboratively with peers, or vulnerably engaging in the learning process,
setting them apart from their female classmates. Finally, gender disproportionality may
be related to students being high mobility, transferring into the district with eligibility,
differences within teachers’ interpretation of intervention processes and fidelity of
program implementation, or more parents of male students requesting special education
evaluations (Carrington, 2018).
**CHS Discussion**

On the CHS, a similar percent of males and females scored in each of the descriptive categories. This is aligned with existing literature that found no evidence that gender is a risk factor for low hope (Dixson et al., 2017; Feldman et al., 2009). Overall, most scores fell within the at-risk range and this trend was consistent for all grades with the exception of fifth grade which had the most scores in the typical range. Further, when examining trends across grades, a similar percent of students in all grades scored in the significantly below average range. More third and sixth graders scored in the at-risk range while more fourth and fifth graders scored in the typical range. This data is somewhat in agreement with existing research, as the literature is inconclusive on the effects of grade level on hope. Lopez (2010) asserted that grade level has little effect on hope while Heaven and Ciarrochi (2008) discovered declining hope beginning in middle school and Dixson et al. (2017) found significant differences between high school grade level groups when considering percent of students in each hope cluster.

The results of this study are most closely aligned with the findings reported in Dixson et al. (2017) that there are differences between grade levels, although different grade levels (i.e., elementary versus high school) were explored in this study and in different ways (i.e., hope cluster versus overall hope score category). More fourth and fifth graders in this study may have scored in the Typical range because they have been in the educational system longer than third graders, have had more exposure to the social-emotional universal curriculum and Tier 2 and 3 interventions, and have a more developed social support network of peers and school staff, thereby having access to more social and tangible resources. Additionally, the district that participated in this study
administers the CHS individually, with no adult assistance. It is a possibility that fourth and fifth grade teachers read the survey to their students, thereby giving their students an advantage over younger students who were expected to read the measure themselves. Another explanation is that fourth and fifth graders are likely to have higher reading levels than third graders, which means they may have been able to more accurately read and comprehend the CHS measure.

However, by extension of these very same explanations, more sixth graders should have scored in the Typical range than other ranges, but this is not a true statement. Heaven and Ciarrochi (2008) found that hope begins declining in middle school, which is consistent with the results of this study. Sixth grade is typically housed in middle schools, contrary to the district in this study that houses sixth grade within elementary buildings. Fewer sixth grade students may have scored in the Typical range related to the interpersonal conflict, physical development (e.g., hormonal changes and emotional lability), and identity searching (e.g., exploring careers and planning for the future, increased independence and responsibility) typically experienced by preteens. As there is a correlation between relationships and hope, this time of relational struggle may help explain the results of this study (Jacobs, 2005; Sharabi et al., 2012). Further, whereas teachers and families are more willing to give intensive guidance and feedback to younger children, by the middle childhood years, parents and teachers expect students to function more independently and self-advocate for their needs and their futures; this distancing from students who may not yet feel ready to function independently or abrupt distancing, as opposed to more of a gradual release, may impact student perceptions of family and school climate and hope. Perhaps coincidentally, sixth grade had the highest
percent of students receiving special education services. This may be supportive of the above theories or may be indicative of deficits in hope related to disability.

When considering general education versus special education scores on the CHS, an approximately equal percent of students in each subgroup scored in the At-Risk range; however, more students in special education scored in the Significantly Below Average range while more students in general education scored in the Typical range. This result can be expected knowing that mental health and trauma, two factors which may be related to an educational disability, are risk factors for low hope (Munoz et al., 2018). These factors have the potential to impact all aspects of functioning such as perceptions of climate and belongingness, perceptions of safety, ability to establish and maintain relationships, and life skills. Given that student interactions with their environments are bidirectional, students with trauma or mental health conditions who lack social supports may, in turn, experience anxiety and lower levels of hope, further complicating their development of life skills (Sahranç et al., 2018). Additionally, social issues have been documented for students with both behavioral and academic disabilities, as these students often behave differently than their general education peers, creating uncertainty in interactions (Litvack et al., 2011).

**DESSA-mini Discussion**

Most students’ DESSA-mini scores were within the Typical or Strengths range, overall and by gender, with more males scoring in the Needs Instruction range and more females scoring in the Strength range. This may be related to males being at higher risk of educational or medical disability diagnosis, differences in behavior between males and females, various biases, or underrepresentation of females either in this score category
and/or in social-emotional interventions. Again, males’ tendencies to more negatively perceive school climate may be a contributing factor, impacting their ability to establish relationships and respond positively to social reinforcement (La Salle et al., 2016).

Similar patterns observed by grade in the CHS data were examined in the DESSA-mini data. Specifically, all grades reported the most students in the Typical range and reported similar percentages of students in each score category with the exception of fifth grade which had more students in the Strength range. This may be because fifth grade is one of the grades that has been in the school the longest and, thus, students have been exposed to the universal social-emotional curriculum for years, are some of the students most familiar with schoolwide expectations, have relationships with peers and adults who they may have attended school with for years, and have an established perception of the school climate. These findings may also be explained by class size, as fifth grade had the smallest class size in this study. Previous research indicates that small class size is associated with high levels of hope, reduced interpersonal tension and competition for resources, and more collaboration (Carrington, 2018).

Additionally, third grade students reported fewer students in the Needs Instruction range than other grades. This is surprising given that third grade had the largest class size in this study. However, these results may be because behavioral expectations are more explicitly taught and frequently reviewed in younger grades and a behavior reinforcement system is more likely to be utilized to encourage desirable behaviors, as opposed to relying on social reinforcement or generalizability of earlier learning opportunities.

When comparing the DESSA-mini category scores between general education and special education subgroups, results revealed similar numbers of students with
Typical social-emotional skills. However, approximately equal percentages of special education students scored in the Needs Instruction and Typical ranges, which were both considerably higher than the percent in the Strength range. Additionally, over six times as many students in special education scored in the Needs Improvement range and over 13 times more general education students scored in the Strength range, by percent. This indicates that students in general education and special education may not respond similarly to universal social-emotional curricula, which is designed to meet the superficial needs of all students, not necessarily the deep and varying needs of a few students. This also begs the question of what supports are available to students in general education that are unavailable or less accessible to students in special education.

Although the “why” of these trends must be explored further, this data is supportive of the special education population’s need for additional supports to learn social-emotional skills.

Another explanation for these results could be related to the findings of La Salle et al. (2016) and Litvack et al. (2011), namely that students with disabilities are at higher risk for social-emotional delays than their general education peers and students with both academic and behavioral disabilities may behave in the classroom in ways different than general education peers. These behaviors could be related to the characteristics associated with behavioral disabilities, such as emotional outbursts or withdrawn behaviors of students with Emotional/Behavioral Disorders or inattentive and distracting behaviors of students with Other Health Impairments such as ADHD. However, different behaviors and atypical social-emotional skills may also be observed for students with learning disabilities, as they attempt to cope with the frustration of delayed academic skills,
altered self-esteem, and learned helplessness associated with repeated failure (Bashant, 2016; Dixson et al., 2017; Lombardi et al., 1990). Whereas students in general education may have occasional academic struggles, they are more likely to have the social-emotional skills and social supports to successfully cope with the struggle and persevere to learning.

Additionally, students in special education may have a more negative perception of school climate, complicating the development of social-emotional skills (National School Climate Center, 2017b; Preble & Taylor, 2008). Logically-speaking, students with disabilities, who often need additional instruction and more frequent feedback, may feel singled-out by staff members and students attempting to offer help. These feelings would be harmful to the development of relationships and these feelings, along with actual struggles in goal attainment, may create aversive feelings in the student toward the educational environment. This, in turn, may result in avoidance or withdrawn behaviors, complicating the development of relationships with peers and adults which are necessary for learning. These students may also engage in behaviors to avoid tasks they perceive as hard, which would contribute to the unpredictability of the classroom environment and their behavior and further “othering” of the student.

The number of students with disabilities with below average social-emotional competence was surprising. It can be expected that students with social-emotional disabilities have delayed social-emotional skills and need instruction in these areas. Although information about eligibility category was not collected or considered in this study, it can be reasoned that it’s unlikely that the 46% of students who scored in the Needs Instruction range all were diagnosed with social-emotional disabilities. Given the
research of La Salle et al. (2016) and Litvack et al. (2011) indicating that social-
emotional needs may permeate throughout all types of disabilities, this may indicate a
need for additional social-emotional supports for all students with disabilities. Typically,
social-emotional supports are only provided by special education when data exists that
supports a need; social-emotional needs are evaluated, at most, every three years during
triennial re-evaluations using formal rating scales and only if teacher or parent concerns
exist. This begs the question of what types of data should be considered when evaluating
needs and whether universal screener data may be of use not only in identifying students
with disabilities who have social-emotional needs, but also progress monitoring over time
as skills are taught.

**Discussion of the Relationship Between Hope and Social-Emotional Competence**

The first research question attempted to determine whether a relationship exists
between hope and social-emotional competence. Examination of CHS quartile scores and
DESSA-mini T-scores revealed a significant, direct relationship between hope and social-
emotional functioning for the study participants, overall. Further, scatterplots and
coefficients of determination indicate a stronger correlation between these two variables
for the special education subgroup with more variance in hope scores accounted for by
variance in social-emotional scores for students in special education. The results of this
study are supported by and expand upon previous research indicating a relationship
between these constructs for older students and young adults (Levi et al., 2014; Morales,
2008; Sahranç et al., 2018; Snyder et al., 1991).

Specifically, existing research has shown that high-hopers are more likely to
demonstrate at least average social-emotional skills, are more proactive in seeking
beneficial relationships which requires social-emotional skills, are motivated to achieve mutually-beneficial outcomes with their peers, and are more likely to have healthy perceptions about factors within and outside of their control that contributed to their goal outcome (Cuskley, 2014; Morales, 2008; Snyder et al., 1991; Snyder et al., 1997).

This carefully balanced distribution of responsibility between factors within and outside of the individual’s control results in more perseverance in the goal process, healthier reflection at the end of the goal process, and more positive emotions in the goal valuation stage of the next goal cycle (Snyder 2002). Letting go of external factors releases the individual of responsibility for factors outside of their control, while being honest with oneself about criticisms requires a social-emotional maturity that both holds the individual responsible for the part they played in the outcome while refusing to become bogged down by failures. This sense of responsibility is imperative in promoting positive feelings about the goal process and one’s self-efficacy and maintaining agency in future goal pursuits.

Logically thinking, hope and social-emotional competence would be related, perhaps interdependent, constructs. Social-emotional competence encompasses skills such as emotion recognition and regulation and social skills, which are necessary to form and maintain relationships (Naglieri et al., 2014). Supportive relationships are a key component of hope, as students are better able to set and pursue goals with the assistance of a social support network and the social and tangible resources their social supports are able to offer and engage in behaviors (e.g., motivation, task initiation, perseverance, problem-solving) that are supportive of goal pursuit (Morales, 2008). As students develop relationships with others, they come to know each other better and are able to offer
deeper, more meaningful encouragement and support to one another. In turn, through the
process of learning to work together and support one another in the goal process, both
social-emotional skills and hope improve.

On the other hand, students who lack social-emotional skills have difficulty
forming relationships and may have more negative perceptions of the classroom and
school climate. Because they lack relationships, they are less likely to respond to social
reinforcement, accept help from others, and struggle more academically and behaviorally,
therefore appearing as more of an “other” to peers and adults and further propagating a
negative feedback loop in the educational environment. Students without social support
networks must be more self-sufficient in the goal cycle, relying more on themselves for
problem-solving, finding resources, and maintaining motivation. However, by lacking
relationships, they will automatically have fewer social and tangible resources available
to them which will make goal acquisition less likely and hinder the development of hope.
Repeatedly stalling or failing in the goal cycle has the potential to change the student’s
self-esteem and behavior, possibly resulting in social withdrawal, learned helplessness,
and decreased effort, thereby resulting in gaps in learning and suboptimal outcomes, both
in the short- and long-term (Bashant, 2016; Lombardi et al., 1990).

However, what’s interesting is that despite the significant relationship between
hope and social-emotional competence, just under 8% of the variation in hope can be
explained by changes in social-emotional competence, meaning approximately 92% of
the variance in these concepts is explained by other factors not examined in the current
study. Psychologically-speaking, human behavior is extremely unpredictable and is
impacted by infinite factors in the individual’s environment, made even more complex by
the interaction between external factors and the individual’s internal traits. In addition, this introductory study attempted to account for very few, specific factors that could contribute to the relationship between hope and social-emotional competence. Therefore, the low amount of variance accounted for in this study is unsurprising, but provides a starting point for investigation in future studies. Factors that have been shown in previous research to impact hope and/or social-emotional competence that may mediate this relationship and should be examined in the elementary population in future studies include student factors (e.g., mental health, trauma, baseline hope and social-emotional competence levels, mobility, EL status), home and family factors (e.g., number of caregivers, parenting style, family climate), and school factors (e.g., school and classroom climate, class size, grade; Bashant, 2016; Carrington, 2018; Dixson et al., 2017; Feldman et al., 2018; Heaven & Ciarrochi, 2008; Jiang et al., 2013; Lopez, 2010; Munoz et al., 2018; Snyder, 2002). The effect of educational disability on the development of life skills was explored in this study and will be discussed in the next section.

Discussion of Differences Between Educational Subgroups

The second research question attempted to determine whether there are gaps in hope and social-emotional competence between students receiving general education and special education. The data considered in this study did indicate significant differences in both hope and social-emotional competence between the general education and special education subgroups. Existing research has not explicitly compared life skills between these two subgroups, especially in the context of elementary students. Rosenstreich et al. (2015) examined hope levels between college-age students with learning disabilities and
typically-developing peers and found that not only did students with learning disabilities have lower hope, but they did not experience the same long-term gains as typically-developing peers in response to a short-term hope intervention. The results of the Rosenstreich et al. (2015) study are supportive of the results found in the current study; specifically, students in special education reported less hope than their peers and teachers rated their social-emotional competence as less developed, despite universal life skills interventions, a variety of special education academic and/or behavioral interventions, and access to additional social supports.

However, the findings of this study are surprising in the context of other existing research, such as Westburg and Martin (2003) which found students who participated in a reading and writing workshop with life skills components showed a slight increase in hope and Madden et al. (2011) which found that students reported increases in hope after being coached on SMART goals and other hope-related skills. Neither of these studies explicitly examined special education or encouraged the participation of students with disabilities, but both showed at least some student gains in hope in response to teaching about life skills. These studies relate to the current study in that both of them focused on teaching students about the goal making process, similar to the goal making process used within special education.

Where these studies and the current study differ is the level of student involvement in making goals for their future. In special education, students are not required to participate in the development of their individualized education plan until they are 14 years of age (Nebraska Department of Education, 2017). Prior to that, whether students are invited to participate in eligibility meetings and plan development is
largely at the discretion of the family, but secondarily of the school team, and finally at
the choice the student. Further, whether students are informed of the purpose of eligibility
testing, the results of their testing and eligibility determination, and are invited to
participate in this discussion and decision-making about their future is at the discretion of
the family and school team. Oftentimes, students are excluded from these meetings and
are not educated about their strengths and weaknesses because adults think they will fail
to understand the information and/or proceedings of the meetings or that the results will
be upsetting to the child. This failure to invite students into a process that is meant to
empower and advocate for them may lead students to believe adults in their lives think
they are “stupid” or are unable to live up to the same high expectations as their peers,
when in reality adults believe they are intelligent and at least as capable as their peers.
This failure to invite students into a problem-solving process to help them understand
themselves better and to take ownership over their learning has the potential to backfire,
resulting in poorer skills, disengagement, poorer perceptions of climate, less supportive
relationships, and an external locus of control.

This may be a reasonable explanation for differences in outcomes between the
Westburg and Martin (2003) and Madden et al. (2011) studies as well as the current study
and suggests that students in special education may benefit from earlier and more
frequent participation in decision-making and goal-making processes about their own
educational paths. General education students may be better able to learn about the goal
making process through everyday interactions, curriculum, and less intensive
interventions and generalize these skills to other settings, whereas students in special
education may benefit from more frequent practice, modeling, and/or guidance to
maintain skills. Further, students in general education may be able to independently practice life skills sooner than students with disabilities, improving their self-esteem and eagerness in the goal pursuit process, whereas students with disabilities may need additional practice, resulting in delays in their ability to independently practice skills, further impacting their self-esteem, and potentially further negatively influencing the development of their life skills.

Also surprising is that the Westburg and Martin (2003) and Madden et al. (2011) studies indicated gains in hope after students received interventions, while the results of the current study indicated that significant gaps in life skills persist between the general education and special education subgroups. One explanation is that despite the skill gaps uncovered in the current study, perhaps the skills of students in the special education subgroup have improved over time, although not enough to close the gaps between students with disabilities and their general education peers. Another explanation is that more intensive life skills interventions in schools are most often provided only to students who demonstrate a significant need, namely students with behavior-related disabilities. However, the results of the La Salle et al. (2016) and Litvack et al. (2011) studies indicate that students with all types of disabilities may benefit from additional interventions to teach life skills. In terms of the current study, it is unlikely that a majority of students in the special education subgroup have been diagnosed with a behavior-related disability, and it is entirely plausible that some of the students demonstrating below average life skills have disabilities related to academics or language, categories under which behavioral supports typically are not provided. Thus, the gaps in life skills discovered in the current study may be explained by misunderstandings about life skills
deficits in students with academic, behavioral, and other types of disabilities and unaddressed or underaddressed life skills intervention needs across special education programming, especially disability categories unrelated to behavior and social skills.

**Discussion of the Results in the Context of the Ecology of Inclusive Education Framework**

Due to the widely varying educational environments and supports experienced by students in general education and special education, the results of the current study will be further discussed within the context of the Ecology of Inclusive Education Framework to consider different factors impacting students in each educational group at all levels of the student’s environment (Anderson et al., 2014). Failure to dig deeper into each level of the environment in order to consider factors that may contribute to life skill development or delay, especially in the context of students who are typically-developing versus atypically-developing, would be an oversimplification of the complexity of students and the environments in which they live and learn, as differences in the child’s ecology help to holistically explain skill strengths and gaps. Specifically of interest in the current study are factors under the control of schools and school districts, explicitly the Learner, Microsystem, Mesosystem, and Exosystem, as well as the interactions between these levels and the bidirectional influences they have on one another.

**The Learner**

The ESSA (2015) and the IDEA (2004) tasks schools with teaching all students to be productive citizens and lifelong learners who are ready for college and/or careers. Schools’ ability to successfully perform this task is firstly impacted by the internal traits, experiences, and skills of the individual student. Students are born with different genetic
profiles and are exposed to different environments and experiences throughout their early childhood, prior to enrolling in school, that impact their gene expressions, internal traits, external behaviors, and the skills they have been able to master. Students do not all arrive at school ready to learn and schools must be able to identify each student’s unique strengths and needs in order to teach them to the same high standards and achieve equitable outcomes.

Beginning at birth and continuing throughout early childhood, children’s relationships with their primary caregivers impact their perceptions of the predictability of their environment, their ability to establish healthy relationships with others, and their ability to learn and engage in appropriate life skills (Snyder, 2000). Family relationships and child development may be interrupted by absent caregivers, unpredictable caregivers, and physical and mental health disorders (Carrington, 2018; Munoz et al., 2018). These students are at-risk of delayed life skills. The development of life skills requires secure attachments with caregivers, predictability, and security in exploration. It requires the modeling of self-regulation skills, perseverance, and guidance in the goal cycle. In cases with physically or mentally absent, abusive, or neglectful caregivers, children lack the necessary guidance to develop life skills. In turn, children may not have developed age-appropriate life skills by the time they enter school, may have difficulty learning and adjusting to the highly-structured, rigorous environment, may have altered perceptions of events (i.e., may have overly-negative perceptions of events or have difficulty distinguishing between truths and facts), and may experience inconsistencies in expectations at home versus at school, leading to confusion and uncertainty. Due to underlying factors such as genetic components and environmental factors, these students
may demonstrate skill delays that contribute to their identification as a student with a disability. It then becomes the responsibility of the school to create environments and plans to address learning gaps in all educational domains.

When considering students with disabilities, there are many internal factors (e.g., neurological, genetic, modeled and reinforced behaviors, medical diagnoses, traumas and re-traumatizing events) that may be related to their educational disability (Carrington, 2018). These factors likely play a role in the differences in life skills between the general education and special education populations. Keeping in mind the overly simplified arbitrary lines drawn between the general education and special education subgroups and recognizing that there is some undefined intermixing of the groups (e.g., some students who have disabilities may not be identified and are served in general education and some students in special education have met their goals and are awaiting their return to the general education population), students with social-emotional disabilities may have more difficulty identifying and expressing their emotions, following behavioral expectations, adapting to different environments, establishing relationships, focusing, and engaging in goal-directed behavior than their general education counterparts related to their disabilities. Students with language or motor disabilities may have difficulty engaging verbally or physically with other students and may experience limited opportunities for interaction or frustration in response to tasks requiring communication or certain movements. Students with academic disabilities may experience frustration, external locus of control, learned helplessness, feelings of “otherness”, or lower self-esteem when they repeatedly fail to grasp concepts or when the achievements of others are celebrated (Bashant, 2016; Lombardi et al., 1990). All types of disabilities are likely to have an
impact on how students with disabilities perceive and interact with their environment, how others in the environment perceive and interact with students with disabilities, and the quantity and quality of social and tangible resources available to help all students collectively develop life skills (Anderson et al., 2014; Keenan & Evans, 2009).

Students living these scenarios daily for extended periods of time may develop negative associations with the educational environment and may not have the life skills necessary to overcome these adversities such as knowing how to efficiently access and use resources available to them, having difficulty predicting and overcoming barriers, or failing to manage emotions and muster the motivation or perseverance necessary. Perceptions of school climate, belongingness, and self-esteem impact how students perceive events and interact within the classroom (Anderson et al., 2014; Keenan & Evans, 2009; Preble and Taylor, 2008); if these students feel like an “other” in the general education classroom or have fewer resources and supports at their disposal, they may engage in behaviors (e.g., withdrawn behaviors, externalizing behaviors) that further hinder the acquisition of supports required for the development of life skills, contributing to the maintenance of life skill gaps between the two subgroups.

When considering the development of life skills, it is imperative that all students, especially those with disabilities who are arguably more vulnerable in the learning process, feel that they belong within the classroom and school environments. Feelings of belongingness are a necessary prerequisite for vulnerability in establishing and maintaining relationships with peers and adults, fully engaging in educational opportunities, self-exploration, and taking prosocial educational and personal risks that are key to skill development (Preble & Taylor, 2008). Any feelings of social withdrawal
or low self-esteem may be a barrier to goal pursuit, as social support networks and the tangible and intangible resources they provide are crucial to hope. When students are socially detached from the classroom social support network, they are less motivated by social reinforcement and may have difficulty learning and engaging in expected behavior norms (i.e., social-emotional competence deficits), which further deters the development of the social supports necessary for hope.

The Microsystem

The results of this study may be explained by the unique experiences that students have within the walls of our schools (Preble & Taylor, 2008). Within the Microsystem, the child’s interactions with school staff and peers, physical components of the environment, and the learning process itself may impact their life skills and explain the results of this study (Anderson et al., 2014; Carrington, 2018; Doll, 2010; Jacobs, 2005; Sharabi et al., 2012). To find success in the educational setting, students must be able to form relationships and collaborate, which requires social-emotional skills (Anderson et al., 2014). Students are offered direct instruction and reinforcement of life skills, social skills, and relationships through the universal curriculum provided to all students, the small-group supports provided to at-risk groups, and the individualized supports provided by special education. Through these levels of support, school staff work to help students manage their emotions and behaviors, strengthen their relationships with peers and teachers, increase feelings of belongingness, and promote self-confidence and self-esteem. Since hope and social-emotional competence were found to be related constructs and special education students were more likely to have life skill delays, it is necessary to
compare the immediate and extended environments of these two subgroups to identify where breakdowns and differences may occur.

Theoretically, all students should have access to both the academic and social-emotional universal curriculum. Although this assertion is a consistently enforced expectation in the school and across the district in which the current study was conducted, which rules out limited or restricted access to universal social-emotional curriculum as a contributing factor, this assertion should be examined as a foundational contributing factor whenever skill gaps are identified. Although the students in special education within this study regularly participated in the delivery of universal curriculum, they were likely to receive supplemental instruction in areas of need (i.e., reteaching grade-level concepts, instruction on missing foundational skills) during group and independent work opportunities. This begs the question of whether students in special education are afforded the same social learning opportunities within the general education classroom that foster prosocial relationships, social-emotional competence, and hope.

In theory, students who receive special education services have a larger team responsible for their learning, which means that more adults are involved in the day-to-day education of the child. This equates to more social and tangible resources in the goal process for activities such as problem-solving, collaborating, motivating, and meeting basic and higher-level needs. The results of this study suggest that placement in special education and having a larger team of adults supporting education is not sufficient for improving life skills. However, relationships are necessary for the development of life skills and if students have difficulty establishing relationships or are not afforded
adequate opportunities to establish relationships with school staff and same-aged peers, their perceptions of self may be altered and their learning hindered in multiple areas (Anderson et al., 2014).

Access to the typically-developing peer models, naturally-occurring opportunities for skill practice, and adult guidance and feedback that occur during small group and independent activities in the general education classroom may impact life skill development (Anderson et al., 2014). During these learning opportunities, life skills (e.g., social skills, emotion regulation, collaboration, cooperation, negotiation) are practiced and social supports are strengthened as students build relationships and are encouraged to behave in a prosocial manner to maintain said relationships. However, if students with disabilities are removed from the classroom during these times and are provided teacher-led instruction and practice opportunities in the resource classroom that minimize peer interactions, they may not have as many student-led opportunities to develop life skills as their general education peers. Under these assumed circumstances, students with disabilities are again missing out on social learning opportunities, this time with other struggling students in the resource setting. Accessing social supports from other struggling students may be beneficial for students with disabilities in forming empathetic and supportive relationships with peers who are also struggling, reducing feelings of “otherness”, modeling resilience, and further normalizing disability if opportunities for student-led and teacher-supported interaction are provided.

If students with disabilities are not afforded time to interact with peers in the general education or special education classrooms, lunch and recess become their primary time to interact with peers. During these largely unstructured times when life skills are
more moderated than taught or taught in response to an interpersonal conflict, students with disabilities may be at a disadvantage for several reasons. Firstly, students without disabilities have had partner and group work time within the classroom to initially build relationships, which are foundational to social interactions outside of the classroom, whereas students with disabilities have had less access to social times within the classroom and lack the foundational relationships for unstructured times. Secondly, students are allowed to guide their actions during these unstructured times with most teacher interaction occurring in the form of redirection and responsive teaching, at the point which relational damage may have already occurred. Finally, general education students likely received guidance and feedback on life skills during classroom-based learning activities that are then practiced and reinforced during unstructured times, while students with disabilities participated in fewer socially-based learning opportunities or received different socially-based learning opportunities and may be receiving instruction in skills for the first time during these unstructured times. Overall, social learning activities in the classroom are fundamental to guided development of life skills that are independently practiced and reinforced during unstructured times. When students are provided with different learning opportunities, they may learn different skills, learn skills to different levels of proficiency, or have difficulty generalizing learned skills to other contexts.

Returning to the classroom learning environment, students in special education may experience repeated academic and/or social-emotional struggles, which can result in poor self-esteem and social withdrawal, impacting their vulnerability in forming relationships with others and learning (Ysseldyke et al., 2012). These students may feel
less supported by teachers and peers and be less willing to admit poor understanding, ask for assistance, and accept help from others. When offered help, students with disabilities may present with feelings of embarrassment or frustration that feel out of place to other students who are simply trying to assist a struggling peer. This is especially a concern for students, both general education and special education, who have not yet developed theory of mind and, therefore, lack an understanding of the struggling student’s reaction. Therefore, the struggling student’s social network, possibly limited to begin with, is even more restricted and more difficulty ensues.

Further, the types of behaviors demonstrated by students with disabilities, most notably those with Emotional/Behavioral Disturbances, Specific Learning Disabilities, or developmental disorders, may complicate relationship-building with peers as these students demonstrate different behaviors than their general education peers that their peers are unsure how to handle (Litvack et al., 2011). Due to differences in skills, students in general education may feel indifferent towards, uncomfortable around, or have negative perceptions of their peers receiving special education, which becomes a barrier to inclusion and relationship-building. This points even more to the improbability of asking students in these two subgroups to independently establish relationships with one another largely during unstructured times with little-to-no proactive adult support. If adult guidance is not given in forming relationships and promoting skill building and practice around relationship development, students within these two groups will continue to lack the skills necessary to know how to successfully interact. These two groups will remain separate, life skill gaps will remain, and opportunities and outcomes will continue to be inequitable.
Within the special education classroom, where students may have formed relationships based on availability and common struggle and all students within the classroom have significant needs, the level of relational stress and competition for resources must be considered. High competition for resources stresses the interpersonal relationships that are necessary for life skill development, and competition for resources is arguably highest in special education classrooms where students have the most intensive needs (Doll, 2010). Whereas the purpose of special education classrooms is to explicitly teach and reinforce academic and life skills, the inherent needs of individuals with disabilities may result in higher competition for limited resources in these settings, producing interstudent conflict instead of camaraderie and creating a barrier to the formation of relationships, which are necessary for vulnerability and learning. Students may be more withdrawn, less engaged, and less vulnerable in these high-conflict, low-support learning experiences, hindering mastery of life skills (Stornes et al., 2008).

To the contrary, when relationships are established and students are motivated by social reinforcement, the classroom becomes a more predictable and safer place and learning opportunities are more abundant (Carrington, 2018; Doll, 2010; Gillen et al., 2011; Morrison, 1979; Toren & Seger, 2015; Wang & Degol, 2016). However, students with disabilities who demonstrate behaviors secondary to life skill delays may not have access to as many resources, relationships, and instruction as their general education peers because they are likely to spend more time outside of the classroom due to academic and behavioral needs. This is especially important in regard to the Carrington (2018) study that found that supportive relationships with school staff were an adequate stand-in for positive, supportive home relationships; as discussed previously in this
chapter, students with disabilities may have suboptimal home conditions, placing additional emphasis on the importance of school-based relationships as a foundation for life skills.

In terms of the learning process and curriculum, all students are able to access grade-level curriculum but because of the nature of students’ disabilities, they may not be able to access grade-level content as in-depth as other students. This is because students with disabilities oftentimes demonstrate a need for supplemental instruction on concepts that are below grade-level in addition to having the right to access grade-level curriculum. Additionally, students with disabilities oftentimes require more intensive adult assistance to complete grade-level work. Teachers may be tempted to give students with disabilities more busywork, as opposed to interactive learning opportunities that explore the content in-depth, that can either be completed independently or that can be completed with the assistance of the special education teacher, both of which allow the general education teacher more time to work with and balance the needs of all students. In this regard, practice opportunities in the general education classroom given to students with disabilities tend to focus more on work completion than true understanding, skill development, and skill extension, resulting in less engagement, devaluation of learning, and decreased vulnerability in the learning process (Doll, 2010; Shim & Kiefer, 2013; Stornes et al., 2008).

In positive, inclusive settings, student learning objectives focus more on mastery of concepts, students are given control over their learning, and are given voice and choice (Moos & Moos, 1978; Preble & Taylor, 2008). However, in a study completed by Tetler and Baltzer (2011), students receiving special education reported that their teachers
afforded them less control in their academic and social learning experiences, fewer recognitions of their successes, and poorer voice and choice than their general education peers. These limitations make schools and classrooms less inclusive for students with disabilities and have the potential to impact student self-concept, engagement in the learning process, ability to independently demonstrate skills, generalizability of skills, and overall learning outcomes (Moos & Moos, 1978). Giving students voice and choice is an act of confidence, partnering with students, and expressing confidence in the student’s decision-making potential and ability to metaphorically “take the helm” in advocating for their needs. When students are unable to participate in directing their learning path via voice and choice, they are afforded fewer adult-guided opportunities to learn and practice life skills.

Discussion of the study results thus far has centered on the premise that the students in this study have been in the current district for the entire duration of their educational careers. However, over one-third of the students in the district are enrolled through option enrollment, meaning that they live outside the borders of the district. This, combined with mobility which is considered a risk factor, points to the possibility that these students attended at least one other school in their educational careers and nothing is known about the climates of these earlier experiences (Carrington, 2018). This must be taken into consideration as the results of Somersalo et al. (2012) indicate that students with disabilities are more sensitive to negative climates and experience more long-term effects of negative climates than their general education peers. If the students with disabilities in this study were exposed to a negative climate early in their educational careers, a time that is instrumental in building a foundation for education and providing
essential early interventions in a malleable time of development, the effects of those experiences may have created an unstable foundation upon which students stand, contributed to life skills delays, and may hinder student response to current interventions. The mobility rates and enrollment dates of the students in this study are unknown but it must be considered that these may be factors contributing at least somewhat to the results of this study for at least some of the participants.

Finally, when considering the impact of the environment on skill gains, inclusion is a key factor and must be considered in the context of the current study. Gardner Taylor & Moniz-Tadeo (2012) found that students in inclusive classrooms tended to make more life skill and academic gains than students in self-contained classrooms. All students in the current study were in inclusive settings and students with more significant behavioral disabilities who were educated in mainly exclusive settings were excluded. Despite this, there continued to be a significant gap in life skills between students receiving general education and special education. Although this study didn’t explicitly determine whether the scores of special education students were higher or lower than those of their general education peers, a visual examination of the data suggests the skills of students with disabilities were at a deficit.

Although this study did not examine why these trends emerged, existing literature suggests some potential explanations. Anderson et al. (2014) found that students in general education reported that including students with disabilities in the general education classroom fostered the development of their own life skills, which may explain why the scores of students in general education were higher than the scores of students in special education. Between the findings of Anderson et al. (2014) and Gardner Taylor &
Moniz-Tadeo (2012), it may be possible that students with disabilities benefit from inclusion more than exclusion, but that students without disabilities benefit more from inclusion than students with disabilities. It is also possible that the students with disabilities in the current study have, in fact, benefitted from inclusive general education and special education services and have made gains in life skills over time or from pre-intervention to post-intervention; however, support for this assertion is beyond the scope of this study and would be beneficial to study in the future.

**The Mesosystem**

The Mesosystem accounts for relationships and communication between school staff and families (Anderson et al., 2014; Keenan & Evans, 2009). Special education, by definition, fosters communication between parents and the school as they work together to establish common goals for the student’s future and make plans to meet the student’s needs. It also expands the student’s support network to include administrators, special education teachers, and various support personnel (e.g., Occupational Therapists, Physical Therapists, Speech Language Pathologists, School Psychologists). Logically speaking, this collaboration and the process of targeted goal development and instruction should lead to better life skills outcomes. However, the results of this study support continued gaps in the development of life skills, contrary to this line of thought. This may be due to life skill deficits that make relationship-building more difficult, teams often excluding students from the collaboration and goal-making process, poor school-family collaboration, or family disengagement from the educational process for a variety of reasons (e.g., cultural beliefs about education, difficulty with scheduling, beliefs about the importance of education).
Factors outside of the consideration of this study (e.g., family climate, parenting style, parent physical and mental health, family attitudes about education, high versus low family expectations) may impact the student’s perception about the importance of learning through taught and modeled values (e.g., parental willingness to attend school-based events such as home visits, Multidisciplinary Team meetings, IEP meetings, Parent-Teacher Conferences), the student’s behavioral growth if expectations are vastly different, and hope if families are disengaged or do not have high expectations for the student (Bashant, 2016; Feldman et al., 2018; Jiang et al., 2013; Sharabi et al., 2012; Snyder, 2002). Further, if parents fail to attend school events, even if they are vocal about the importance of school, this could undermine collaborative processes and their verbal endorsement of the importance of education. Additional factors to consider include the quality of relationships between the school and families, student and parent perceptions of school climate and belongingness, and parent experiences and preconceived notions about special education and its impact. For example, parents may act differently within the special education process if they themselves received special education as children and were self-contained, perceived they were othered, or failed to benefit. Any indication that families do not buy into education, especially in the face of student hardship, may contribute to student disengagement and reduce the positive outcomes of special education.

The results of this study may indicate that more work is needed in partnering with, supporting, and teaching families in supporting students’ individual needs, particularly students receiving special education supports. The school district in the current study goes above and beyond traditional methods of partnering with families and
eliciting collaboration such as parent-teacher conferences and frequent communication. All school staff schedule home visits prior to the beginning of the school year to meet all students and their families in person and proactively form positive relationships, so that when students or families express needs, a working relationship is already established and support can swiftly be offered. Home visit data was not considered in the current study, but it would be worth determining in a follow-up study whether parental participation in home visits is a contributing factor to the results; namely, if parents of students receiving special education participated in home visits at similar rates as parents in general education and whether these parents rated the value of the experience similarly.

Returning to factors within the control of the school, the Mesosystem also encompasses relationships and interactions between administrators and teachers, teachers and the curriculum, and collaboration between teachers (Anderson et al., 2014). Other explanations for the gaps discovered by this study are staff misperceptions of special education, quality of staff relationships, and teacher mastery of the curriculum. Staff misperceptions of special education may include expectations about who should teach which skills (e.g., the classroom teacher is responsible only for teaching grade-level skills and the resource teacher should teach all other skills), the child’s placement or services (e.g., students with disabilities do not belong in the general education classroom), or that special education status is a cure-all for disabilities (e.g., students who receive special education supports will struggle less in the general education classroom). Misperceptions may result in frustration and conflict amongst administrators, general education teachers, and special education staff, creating an unstable team and foundation upon which life
skills can be taught. Such collaboration is necessary when determining how the
curriculum can and should be differentiated to meet the needs of all learners. Further,
misperceptions amongst staff may incidentally impact the school and classroom cultures,
thereby impacting students’ beliefs about the rights and value of students with
disabilities, the opportunities afforded to them by peers and staff, and skill acquisition
(Allodi, 2002).

The Exosystem

The Exosystem of the Ecology of Inclusive Education Model accounts for the
professional development opportunities provided to staff, school culture and values, and
resource allocation (Anderson et al., 2014). In regard to the results of this study, teachers
may be in need of additional professional development opportunities to assist in fostering
the development of life skills in both general and special education settings. As
professional development opportunities are provided and paradigm shifts focus educator
sights more on life skills, school cultures and values and classroom climates by extension
may change in response to be more inclusive of students with disabilities. Ideally,
additional resources would be allocated to support teaching students with disabilities in
meaningful ways within the general education classroom so they could both receive the
individualized instruction they need to master foundational and grade-level concepts
while also having equitable access to the social and life skill learning opportunities that
naturally occur in the general education setting. Accommodating individual students’
academic and social-emotional needs in the general education classroom is imperative to
inclusion and positive, equitable outcomes in all domains. Teachers should be provided
with learning opportunities during college-level training, professional development
throughout their careers, and collaborative support networks to determine feasible ways to accommodate students of all needs within their classrooms. Failure to provide support to teachers and opportunities for collaboration further undermines meaningful learning opportunities for students with disabilities and contributes to gaps in learning.

**Next Steps on the Path Toward Equity**

The results of the current study indicating a relationship between hope and social-emotional competence and life skill gaps for students in special education along with a review of existing literature highlight the necessary long-term, repeated efforts that schools must make to teach and reinforce life skills for all students, but especially those with disabilities. The results of the current study are aligned with Rosenstreich et al.’s (2015) study indicating that students without disabilities are not only more likely to start at a higher baseline in regard to the development of life skills, but are also more likely to make greater, sustained gains in life skills in response to interventions when compared to their special education counterparts. In other words, exposing students to a universal life skill curriculum helps the students who are already ahead developmentally continue to grow and widen the gap between themselves and students with poorer life skills, while students with poorer life skills make slower, more inconsistent growth. This stresses that universal life skills interventions, while useful for strengthening skills for the general education population, will likely not be enough to mitigate gaps between students receiving general and special education services and achieve equitable outcomes for all students. The results of this study indicate a continued gap in life skills between these two subgroups, despite the provision of intensive services through special education programming for students with disabilities.
This first begs the question of how schools can identify whether gaps occur in their own students’ learning and, second, what can be done to mitigate gaps. Prior to this study, a school-level measure for identifying gaps in student life skills has not existed. Implementation of the Life Skills Learning Mitigation Tool (Appendix), which will be discussed in the next section, is a good first step in identifying factors that may be contributing to inequitable outcomes. This measure is designed to not only identify gaps, but also to point schools toward valuable and efficient action steps. Suggestions for supporting the development of life skills for students with disabilities will be discussed later in this chapter.

The Life Skills Learning Mitigation Tool

The Life Skills Learning Mitigation Tool (Appendix) is a 16-item comparison tool that was created to directly compare aspects of the learning environment for the general education and special education subgroups, identifying potential gaps in the educational experience and identifying areas in need of improvement to mitigate gaps and produce more equitable outcomes. This tool was informed by existing research discussed previously in this study; the articles informing each of the areas is noted on the form so that interested schools know where to look for further information. It should be completed at least annually by a knowledgeable building-level, representative team consisting of administrators, teachers, and other school staff. Comparisons take place in the categories of academic learning, life skills, learning environment, and school/classroom climate with three to five questions to be examined within each category. The categories and questions have been informed by existing research
examining student-reported factors related to their academic, social-emotional, and life
success.

Schools in different districts and states often use different data measures and
methods of monitoring student performance and progress; therefore, this tool makes
suggestions as to what data sources or measures may be helpful, but does not require any
specific measure so that schools are able to use existing data and a burden of collecting
novel data solely for the purpose of this comparison tool is not introduced. The areas and
sources of data collection listed are merely suggestions and schools are highly
encouraged to explore questions within measures already used by the building, district,
and/or state. When student, staff, or parent surveys are chosen as data sources and data is
not existing, the school is encouraged to consider surveying a randomly chosen,
representative sample of the school population to minimize bias and data skewedness and
to give relevant information without the financial and temporal burden of surveying the
entire population. In the event that existing data is inconclusive or nonexistent, it is
encouraged that schools look into implementing a measure to access useful data to
determine if skill gaps exist in the area.

This comparison tool is solely meant to compare student outcomes between the
general education and special education subgroups. The intent of this survey is not to
compare individual students, nor should the data be used to evaluate or compare staff
members or grade bands. Because this data is representative at the subgroup level,
additional information should be sought and considered from families, students, and staff
when making decisions. Additionally, due to the nature of data sources, measures, and
the inherent, innumerable differences between districts and school buildings, what is true
about one building likely will not be true of another building or the district as a whole. This measure is meant to be used at the building-level, but the results may be compared between buildings to foster non-judgmental conversations for the purposes of school improvement; using the Professional Learning Community method of data comparison, discussion of practices, and idea sharing, schools may make improvements-based comparisons between buildings to identify strategies that may help mitigate gaps between groups. This form is not meant for comparisons at the classroom or grade levels due to small sample sizes. Whenever possible, decisions should be made based on information from multiple measures.

**Humble Suggestions for Mitigating Gaps**

The results of this study indicate that the majority of students benefit from some type of intervention teaching life skills and, since hope and social-emotional competence are related constructs, a successful intervention in one area is likely to impact the other. While the majority of students are able to develop adequate life skills through exposure to universal curriculum, positive climate, and natural learning and reinforcement opportunities, teaching life skills to students with disabilities requires more intentional and intensive interventions. These students should participate in the universal curriculum, but additional interventions should be layered atop the universal curriculum.

One recommendation is for the life skills of students with disabilities to be frequently and carefully monitored and intensive interventions provided to students with all types of disabilities who demonstrate a need, not just those related to social skills and behavior which is aligned with the traditional special education service model. Traditionally, behavior rating scales are used during a special education evaluation to
determine whether social-emotional needs exist and social-emotional interventions are provided by special education programming only when significant needs can be identified. However, it would be valuable to also consider universal screeners, such as the CHS and DESSA-mini, both within and between evaluation windows to determine students’ life skill needs. Further, universal screener data should be considered when students in special education are failing to make progress, as research has shown that life skills impact every aspect of development. Existing research has shown that students of all disability types may have life skills deficits not addressed by our current special education paradigm and the results of the current study indicate persisting gaps in life skills for the special education population (La Salle et al., 2016; Litvack et al., 2011). However, life skills are able to be taught to all students and interventions are a factor directly within the control of schools (Madden et al., 2011; Rosenstreich et al., 2015; Westburg & Martin, 2003).

Although special education law does not require students to attend their own eligibility and individualized education plan (IEP) meetings until they turn 14 years of age, students should be invited and encouraged to attend their meetings and participate in data review, goal-making, and progress-monitoring, both at their annual IEP meetings and throughout the year. During these times, students can learn more about the nature of their disability(ies) and the ways their performance is impacted, the goal cycle can be modeled for these students, and they will be given a voice in making goals that are relevant to their future educational and career paths. This will not only give students voice and choice in the plans that are made for them, but will improve outcomes and empower students by improving their feelings of responsibility, ownership, and buy-in
and allowing students to advocate for their needs. Thus, the special education process becomes less of a thing done to a student and more of a thing done with a student, giving students feelings of autonomy and value.

Perhaps the best thing that can be done for the benefit of all students is to provide classroom-based supports that promote the inclusion of all students and teach value and acceptance of individuals with all types of abilities. This recommendation is related to the findings that all students benefit from inclusive classrooms but general education students often have difficulty forming relationships with students with disabilities due to the different behaviors they exhibit (Anderson et al., 2014; Gardner Taylor & Moniz-Tadeo, 2012; Litvack et al., 2011); learning how to interact and maintain relationships with individuals of all abilities is a crucial life skill and should be taught and modeled within our classrooms. This recommendation is not a new paradigm shift, rather it stresses the importance of current paradigm shifts toward more inclusive educational settings and encourages schools to persist in their quests to educate all students in the general education classroom to the maximum extent possible. However, it must also be noted that students with disabilities, while reporting gains in life skills in inclusive settings also reported being afforded poorer voice and choice, less teacher recognition, and fewer opportunities to participate in social decisions (i.e., more social decisions were made on their behalf; Tetler & Baltzer, 2011). Schools must actively seek to be aware of the opportunities they provide to all students and ensure that students with disabilities are afforded the same opportunities as their general education peers.

Further, while it is important to provide intensive, direct instruction on deficient foundational concepts while providing students access to grade-level curriculum, it is
imperative to provide social opportunities in which all students can develop proficient life
skills. This may require careful scheduling of special education services outside of the
classroom, rethinking current models to provide more services and supports within the
classroom, increasing collaboration between general education and special education
staff, or additional modeling and guidance during unstructured social times. Ideally,
resource teachers should consider “pushing into” the classroom to support students in
their natural environments as much as possible and limiting the amount of time that
students are “pulled out” of the natural learning environment and into a resource
classroom where access to typically-developing peers and social learning activities are
limited. Admittedly, this is a big, if not impossible, ask of understaffed and underfunded
special education programs and is far from a widespread option in the current educational
paradigm. However, as paradigms shift, this is a goal that special education can aspire to.
That being said, it is currently well within the power of schools to make every effort for
all classrooms to not only be inclusive in label, but also inclusive in climate so that all
students may not only learn life skills but generalize these skills to leadership skills. We
must create systems of support that teach and encourage responsibility, independence,
interdependence, leadership skills, and collective success for all students if we are to
achieve equity.

Limitations

Firstly, this study was conducted in a small, urban school district in the Midwest.
This is a somewhat uncommon setting and results may not be generalizable to large urban
districts, suburban districts, and rural districts. Similarly, the data utilized was solicited
from one elementary school in one district that housed a behavior skills program. This
data may not be representative of other elementary schools in the district or elementary schools overall. Although data from students in the behavior skills program housed by the school that participated in this study was excluded, the school may have implemented additional universal supports to further support these students during mainstreaming activities, which may further limit the comparability of the results to other schools. Because the scores of students in the behavior skills program were excluded, the results of this study may not be generalizable to students whose educational needs extend beyond their neighborhood school into placements such as specialized programs (e.g., behavior skills programs, alternate curriculum programs), hospitals/clinics, homebound placements, camps, or specialized schools (e.g., schools for students with extreme behaviors or Level 3 programs, schools for students with medically-intensive needs).

Secondly, this study focused on students in grades third through sixth and results may not be generalizable to younger or older populations. Additionally, the elementary school that participated in this study housed sixth grade, whereas other districts commonly house sixth grade within a separate middle school building. This may reduce generalizability due to differences in the amount of time the students have spent in the environment and the supports they have acquired. The students in the current study had theoretically spent the past six or seven years in the school building, were the oldest students, were well-known by staff, and had built a social support network over the course of their progression through the grades; this is in contrast to students attending sixth grade in a middle school building who would be new to the setting, the youngest students, would know few people and may have lost friends in the transition, and would still be building their social support networks. The results of this study are not directly
generalizable between these two groups of students with different settings, one group with a stable environment and one undergoing a change.

Thirdly, one measure examined in this study was student-report and the other was teacher-report, both of which are susceptible to the implicit or explicit biases of the rater. Additionally, although the ratings given were meant to capture a picture of the student’s behavior over time, the ratings examined were collected at one point in time and may have been influenced by cognitive biases such as the Halo effect, confirmation bias, gender bias, interoceptive bias, salience bias, or stereotyping. Teachers likely had adequate exposure to most students and were able to accurately rate their behaviors by the December 2019 administration, but may have had more difficulty providing ratings and likely provided less accurate ratings for students who enrolled in their classrooms close to the administration date.

Fourthly, the DESSA-mini was piloted by the participating school for the first time during the 2019-2020 school year as a more valid and reliable method of identifying students in need of additional social-emotional supports. The data used in this study was data from the very first administration of this new, piloted measure. Teaching and training occurred prior to the first DESSA-mini administration. However, the reported scores may have been impacted by teachers’ unfamiliarity with the measure, their understanding of the purpose and importance of the measure, their understanding of the directions for completion, and the quality of the training provided.

Fifthly, the largest limitation of the current study is the over-simplicity of the groups studied. The general education and special education subgroups were compared in this study, but there are many levels of support between and beyond these two groups,
such as 504 Plans and intervention plans, that work to meet the individualized needs of students. Further, it is an overly-simplified view to assert that all general education students are functioning well with the supports they have and that no students who are outside of the special education subgroup are in need of more intensive services. Often, there are students who are receiving assistance through 504 Plans or various intervention processes in an effort to address gaps in learning and to determine if interventions will result in skill gains and dismissal to general education or regression or plateaued progress and referral to determine the student’s eligibility for special education services. It is also worth noting that some students demonstrate a need for more intensive supports such as special education but formally do not meet eligibility guidelines outlined by state and federal governments. On the other hand, some students do meet eligibility criteria for special education but their parents decline services; it is unknown whether any students meeting this description were included in the current study but if there were, these students were included in the general education subgroup. Due to the complexity of this continuum of supports, the difficulty of accurately identifying students in need of additional levels of support, the quality and integrity of supports provided, and the time and monitoring necessary to identify students who indicate a significant need for special education services, the groups in this study were overly-simplified. Any student not meeting federal and state disability guidelines was encompassed in the general education subgroup, which likely underestimated their needs and oversimplified groups.

The final limitation in this study that must be addressed is the unpredictability of human behavior and the inability of research to reliably categorize individuals. Despite the hard lines drawn in this study, there are examples of hope, perseverance, and risk in
all individuals that may be difficult to quantify, compare, and explain due to the complexity and vulnerability of the human experience.

**Suggestions for Future Research**

The results of this study indicated a significant relationship between hope and social-emotional competence and significant differences in these two variables between students receiving different levels of educational support. It is suggested that future researchers examine and compare the hope and social-emotional competence of subgroups of special education students. This study did not delve into the specific differences between subgroups, such as which group experienced higher or lower scores and the reasons why, which may be helpful to examine in future research. Future researchers may also consider examining differences among disability subgroups within special education such as academic disabilities, motor disabilities, speech/language disabilities, health-related disabilities, and behavioral disabilities. With a large enough sample, future researchers may be able to examine and compare life skills across federal disability category.

This study examined the scores of students attending one elementary school in a small, urban district in the Midwest. The students whose data was examined in this study had educational needs that were accommodated either within the general education or inclusive special education settings. Future researchers may wish to examine and compare data from students in more specialized, intensive placements that reflect the severity of disability such as Level 2 programs (e.g., academic, behavior, or health programs housed within the district but likely outside of most students’ neighborhood schools), Level 3 programs (e.g., academic, behavior, or health programs contracted out
to community organizations and agencies by the district), homebound placements, or hospital placements.

Finally, as discussed in the limitations section, this study used overly-simplified subgroups of students. Future researchers may want to examine groups of students receiving educational services in levels between general education and special education, such as 504 Plans, English Language services, or intervention plans within the Response to Intervention (RTI) or Multi-Tiered Systems of Support (MTSS) frameworks. These students demonstrate some type of educational difficulty, which may be a risk factor for the development of life skills, but also receive some type of assistance which may serve as a protective factor.

Summary

In conclusion, this study supports a direct relationship between hope and social-emotional competence and indicates that gaps exist in the development of these life skills for students in special education when compared to their general education peers. Schools have every motivation to close said gaps, but prior to this point in time research has not existed that indicated potential gaps and tools have not existed that assist schools in identifying gaps so they can be mitigated. This study proposes an evaluation and progress monitoring tool, The Life Skills Learning Mitigation Tool (Appendix). Luckily, life skills can be taught and schools are the ideal setting in which to do so, the earlier in development the better; by partnering with families, schools can teach life skills, mitigate skill gaps, and achieve equitable outcomes for all students (Bashant, 2016; Curran & Reivich, 2011; Snyder, 1995).
We, as educators, must realize that regardless of the arbitrary labels we assign to students, all students within the walls of our schools – general education, special education, English Learners, High Ability – are all of our students. We must take collective responsibility for the outcomes of all of our students and recognize that each of us has an important part to play in achieving equitable outcomes for all students, regardless of ability. We have the unique privilege of being part of students’ lives, albeit sometimes a fleeting part, but our influence lasts a lifetime and our impact tendrils outward into society and through time. Education is the starting place for equity. In the words of Sonya Sotomayor, “we are never going to reach equality in America until we achieve equality in education” (Golden-Vazquez, 2017). Education is the gateway to better a future and life skills are the key.
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Appendix

The Life Skills Learning Mitigation Tool

**Purpose**
The purpose of this tool is to directly compare the supports and opportunities afforded to the general education and special education subgroups in a school building in order to identify and mitigate differences in the educational experience that promulgate gaps in life skills. The overall goal is to provide equitable opportunities in each of the areas rated so that positive educational, career, and life skills outcomes can be achieved for all students, regardless of ability. The results of this measure can be used to monitor gap mitigation for subgroups over time, as paradigms shift and changes are made to the educational environment.

**Data Sources**
Although schools may use some of the same data collection measures, others may vary. The suggested data sources are merely suggestions and can be personalized to utilize the data that the building is already using, assuming the data source is the same for students in general education and special education. A source that is not listed may be used if it is related to the question and data is available from both subgroups. If an existing data source cannot be identified in an area, or if a consistent source is not identifiable for both subgroups, it is suggested the school examine possible sources and consider implementing one that meets their unique needs.

Additionally, classroom observations and student interviews are suggested data sources for some questions. Observations should be conducted in at least two randomly-chosen classrooms, preferably not in the same grade band. Observers should be familiar with which students receive general education services and which receive special education services. While observing, the observer may draw a map of student seating in the classroom or list students in order to facilitate the recording of interactions and behaviors. When using interviews, it is recommended that at least 10% of the student population be interviewed and representative groups of students receiving general and special education be randomly chosen for interviews to minimize bias.

**Guidelines**
This measure should be completed at least annually. The observations, interviews, and results should be used only for the purposes of evaluating and improving student opportunities and outcomes and should not be used for feedback or evaluation of individual staff members.

**Next Steps for Action**
When life skill gaps are identified between the two subgroups, school teams should self-reflect on their procedures and processes to attempt to determine the source of the discrepancy. Then school teams can collaborate to find solutions (or Next Steps for Action) to attempt to mitigate learning gaps as informed by data. If multiple schools in a district use this measure, the Professional Learning Community (PLC) approach (i.e.,
data comparison, discussion of practices, and idea sharing) may help schools with gaps identify strategies to mitigate gaps between groups.

<table>
<thead>
<tr>
<th>Area/Question</th>
<th>Suggestions for Data Sources</th>
<th>General Education Data</th>
<th>Special Education Data</th>
<th>Next Steps for Action</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Academic Learning</strong></td>
<td></td>
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<tr>
<td>Do students have equal access to grade-level and instructional-level curriculum (e.g., differentiation, extension)?</td>
<td>● Review of lesson plans&lt;br&gt;● Review of general education and special education schedules&lt;br&gt;● Student interview&lt;br&gt;● Teacher interview&lt;br&gt;● Gifted enrollment data&lt;br&gt;● Minutes from intervention team meeting discussions</td>
<td></td>
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</tr>
<tr>
<td>Do students have equal access to the necessary supports to make adequate growth toward grade-level proficiency and college and career readiness?</td>
<td>● Northwest Evaluation Association Measures of Academic Progress (NWEA MAP)&lt;br&gt;● Nebraska State Accountability Assessment (NESA)/Nebraska Student-Centered Assessment System (NSCAS) or other state assessments&lt;br&gt;● Iowa Test of Basic Skills (ITBS)&lt;br&gt;● AIMSweb/DIBELS/easyCBM/other universal screening data</td>
<td></td>
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</tr>
<tr>
<td>Do all students have access to socially-based academic learning and practice opportunities?</td>
<td>● Classroom observation&lt;br&gt;● Review of daily schedules&lt;br&gt;● Review of IEP service times</td>
<td></td>
<td></td>
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</tbody>
</table>
### Life Skills

<table>
<thead>
<tr>
<th>Question</th>
<th>Methodology</th>
</tr>
</thead>
</table>
| Are students able to make and maintain at least three close friendships? | - Student interview/survey  
- Teacher interview/survey                                                                 |
| Do students have at least one positive relationship with an adult at school? | - Student interview/survey  
- Teacher interview/survey                                                                 |
| Do students have goals for their futures and do they know and engage in behaviors that allow them to productively pursue their goals? | - Children’s Hope Scale  
- Student interview/survey                                                                 |
| Do the Tier 1, 2, and 3 social-emotional curriculum and supports implemented by the school adequately teach and reinforce social-emotional skills? | - DESSA-mini  
- Children’s Hope Scale  
- Office referral/disciplinary data                                                                 |
| Do subgroups have proportionate office discipline referral and suspension rates? | - Office discipline/referral data  
- Suspension data  
- Discipline handbook/guidelines  
- Referral and suspension details                                                                 |
### Learning Environment

<table>
<thead>
<tr>
<th>Question</th>
<th>Methods</th>
</tr>
</thead>
</table>
| Do subgroups have similar attendance rates?                             | • Attendance data  
  • Consider comparing excused/une xcused absences                       |
| Are students in the subgroups given equal voice and choice in their daily educational environment? | • Student interview/survey  
  • Classroom observation with frequency tally by subgroup |
| Do subgroups have equal opportunity to participate meaningfully in their learning (e.g., are allowed to share their learning, ask questions, etc.)? | • Classroom observation  
  • Student interview/survey  
  • Student-report school or classroom climate survey |
| Do all classes have students receiving special education? Are general education: special education ratios approximately equal per classroom? | • Review of class rosters |

### School and Classroom Climate

<table>
<thead>
<tr>
<th>Question</th>
<th>Method</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do students feel like they are known by peers</td>
<td>• Student interview (can students name)</td>
</tr>
</tbody>
</table>
| and adults at school and valued? | 2 caring teachers and peers?)  
- Student-report climate survey |   |   |
|---------------------------------|---------------------------------|---|---|
| Do students feel connected to the school? Do they feel that they are welcome and they belong? | - School Connectedness Scale (SCS)  
- Student-report climate survey  
- Student interview  
- “What do you know about our students” staff activity where staff members list what they know about each student |   |   |
| Are classrooms inclusive of all learners? Do staff members believe that all students can meet high expectations? Are staff willing and equipped to support students? | - Staff attitudes survey  
- Classroom observation (percent of time spent with students in general education versus special education)  
- Parent-report school climate survey  
- Staff needs survey |   |   |
| Do all students have the opportunity to engage in leadership roles and activities both within and outside of the school day? | - Extracurricular activity participation data  
- Percent of nominations for awards, activities, clubs, and privileges by subgroup |   |   |

*Anderson et al. (2014); Bashant (2016); Feldman et al. (2018); IDEA (2004); Sharabi et al. (2012)*