Pamela S. Hinds, PhD, RN, CS, began her involvement with the Oncology Nursing Society (ONS) nearly 20 years ago. As evident by the trajectory below, her contributions to the organization have been widespread. Hinds’ work in the areas of certification, education, research, and evidence-based practice has been outstanding and has affected many of the organization’s activities and programs. She also has worked diligently to establish a partnership between ONS and the Children’s Oncology Group. ONS is very appreciative of her long-standing involvement and congratulates her on receiving the 2004 ONS Distinguished Researcher Award.

1985: Joined ONS and the Memphis Chapter
1986–1988: Research Committee member
1988–1991: Task Force on Specialty Certification for Advanced Pediatric Oncology Nursing Co-Chair
1989–1991: Education Committee member
1989–1992: Oncology Nursing Forum reviewer
1991–1993: Education Committee Chair
1994–1996: Task Force on Advanced Practice Certification member
1995: ONS Foundation Research Fellowship mentor
1995–1997: Oncology Nursing Certification Corporation Research Committee member
1996: ONS Foundation Research Grant Review Project Team member
1997: ONS Foundation Research Special Interest Group
1997: ONS Foundation Research Fellowship mentor
1997: ONS Foundation Small Grant recipient
2002: ONS Foundation Center for Leadership, Information and Research Symptom Management Major Grant recipient
2002: ONS Foundation Research Grant Review Project Team member
2002–2003: Evidence-Based Practice Resource Center Project Team member
2003–present: Eighth National Conference on Cancer Nursing Research Project Team member

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Patients with cancer believe that hopefulness is essential to allowing them to cope with the cancer experience, and adolescent patients with cancer have been described as particularly vulnerable to the lack or loss of hopefulness during treatment (Fochtman, 1979; Lewis, 1984; Morrow & Wilson, 1981; Snyder et al., 1997; Susman, Pizzo, & Poplack, 1981). Hopefulness is an internal quality that emerges in the process of interaction with others (Fromm, 1968). Nurses and other caring healthcare professionals are able to positively influence hopefulness in adolescent patients with cancer and, in so doing, may improve the outcomes of these patients and diminish their suffering (Hinds & Martin, 1988; Hinds, Martin, & Vogel, 1987). Hopefulness can energize an individual or a group; for that reason, adolescents who are hopeful are more likely to take action on their own behalf or respond to the care efforts of others (Hinds, 1988a; Stotland, 1969).

To ensure that the interaction between adolescent patients and their care providers is optimally beneficial, it is necessary to know what adolescent hopefulness is (i.e., its defining characteristics), what process is responsible for adolescents’ achieving hopefulness during treatment, how nurses and others can facilitate the process, how to sensitively and accurately measure adolescent hopefulness and assess it clinically, and how to create and maintain a care environment for adolescents that is supportive of hope. The purpose of this article is to describe the evolution of a program of research about adolescent hopefulness that started with efforts to define and measure the concept and is now beginning to test strategies to positively influence the hopefulness of individual patients and their care environment.

Defining Adolescent Hopefulness

At the time this research program began, remarkable, systematic efforts to define hopefulness had been completed but were limited almost entirely to adults (e.g., those who were seriously ill or hospitalized for psychiatric disorders, prisoners in concentration camps) (Gottschalk, 1974; Perley, Wingler, & Placci, 1971). In addition, these research efforts typically relied primarily on self-analyses, literature reviews, analyses of written materials, and selective clinical observations rather than on direct interviews that solicited the perspectives...