



Date: \_\_\_\_\_

Name: \_\_\_\_\_ Marital Status: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_

Occupation: \_\_\_\_\_ Education: \_\_\_\_\_

This questionnaire consists of 20 statements. Please read the statements carefully one by one. If the statement describes your attitude for the past week including today, darken the circle with a 'T' indicating TRUE in the column next to the statement. If the statement does not describe your attitude, darken the circle with an 'F' indicating FALSE in the column next to this statement. Please be sure to read each statement carefully.

- 1. I look forward to the future with hope and enthusiasm. T F
- 2. I might as well give up because there is nothing I can do about making things better for myself. T F
- 3. When things are going badly, I am helped by knowing that they cannot stay that way forever. T F
- 4. I can't imagine what my life would be like in ten years. T F
- 5. I have enough time to accomplish the things I want to do. T F
- 6. In the future, I expect to succeed in what concerns me most. T F
- 7. My future seems dark to me. T F
- 8. I happen to be particularly lucky, and I expect to get more of the good things in life than the average person. T F
- 9. I just can't get the breaks, and there's no reason I will in the future. T F
- 10. My past experiences have prepared me well for the future. T F
- 11. All I can see ahead of me is unpleasantness rather than pleasantness. T F
- 12. I don't expect to get what I really want. T F
- 13. When I look ahead to the future, I expect that I will be happier than I am now. T F
- 14. Things just won't work out the way I want them to. T F
- 15. I have great faith in the future. T F
- 16. I never get what I want, so it's foolish to want anything. T F
- 17. It's very unlikely that I will get any real satisfaction in the future. T F
- 18. The future seems vague and uncertain to me. T F
- 19. I can look forward to more good times than bad times. T F
- 20. There's no use in really trying to get anything I want because I probably won't get it. T F

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Beck's (1967) cognitive model of depression, consisting of: (1) a negative view of the self, (2) a negative view of present functioning, and (3) a negative view of the future.

### Description and Content of the Scale

The BHS consists of 20 true-false statements that assess the extent of negative expectancies about the immediate and long-range future. Each of the 20 statements is scored 1 or 0. Of the 20 true-false statements, 9 are keyed FALSE, and 11 are keyed TRUE to indicate endorsement of pessimism about the future. The item scores are summed to yield a total score that can range from 0 to 20 with higher scores indicating greater hopelessness. The 20 statements of the BHS and the corresponding responses which indicate hopeless cognitions are:

Statement	Response Key For Hopelessness
1. I look forward to the future with hope and enthusiasm.	F
2. I might as well give up because there is nothing I can do about making things better for myself.	T
3. When things are going badly, I am helped by knowing that they cannot stay that way forever.	F
4. I can't imagine what my life would be like in ten years.	T
5. I have enough time to accomplish the things I want to do.	F
6. In the future, I expect to succeed in what concerns me most.	F
7. My future seems dark to me.	T
8. I happen to be particularly lucky, and I expect to get more of the good things in life than the average person.	F
9. I just can't get the breaks, and there's no reason I will in the future.	T
10. My past experiences have prepared me well for the future.	F
11. All I can see ahead of me is unpleasantness rather than pleasantness.	T
12. I don't expect to get what I really want.	T
13. When I look ahead to the future, I expect that I will be happier than I am now.	F

14. Things just don't work out the way I want them to. T
15. I have great faith in the future. F
16. I never get what I want, so it's foolish to want anything. T
17. It's very unlikely that I will get any real satisfaction in the future. T
18. The future seems vague and uncertain to me. T
19. I can look forward to more good times than bad times. F
20. There's no use in really trying to get anything I want because I probably won't get it. T

### Appropriate Uses

The BHS measures the extent of negative attitudes about the future. It has a particular utility as an indirect indicator of suicidal risk in depressed examines or individuals who have made suicide attempts. Although the BHS was not developed as a tool for detecting hopelessness in adolescent and adult normal populations, it has been used for such purposes (Durham, 1982; Fogg & Gayton, 1976; Greene, 1981). The instrument should, therefore, be used cautiously for screening purposes. The BHS has been employed with adolescents as young as 13 years of age (Johnson & McCutcheon, 1981; Topol & Reznikoff, 1982); however, until more information about the BHS' psychometric characteristics for an adolescent population has been collected, the instrument is recommended as most appropriate for adults over the age of 17.

### User Qualifications

The BHS may be administered and scored by paraprofessionals, but it should be used and interpreted only by professionals with appropriate clinical training and experience according to the guidelines established by the American Psychological Association's (1985) *Standards for Educational and Psychological Testing*. Since depression and suicidal risk may be associated with hopelessness in psychiatric patients, it is important that the clinician reviewing the BHS data be able to respond to the patient's hopelessness by having available a full range of appropriate psychotherapeutic interventions.

## Scoring Guidelines

The BHS is scored by summing the keyed responses of hopelessness for each of the 20 items. Scoring is facilitated by use of BHS scoring key. To use the key, place it over the questionnaire and line up the logos, BHS. Responses indicating hopelessness will appear within the circles on the score key and receive a score of 1. Responses not appearing in circles indicate non-hopelessness and receive a score of 0. Add the total number of hopelessness responses and write this sum on the line provided at the bottom of the questionnaire. The maximum score is 20. Although cut-off scores should be based upon the clinical decisions for which an instrument is being employed, the CCT distributes general guidelines for interpretation in which 0 to 3 is within the minimal range, 4 to 8 is mild, 9 to 14 is moderate, and greater than 14 is severe.