"My choice, my voice, my opinion" : an exploration of a strengths-based model used with youth in hip hop therapy : a project based upon an investigation at Beats, Rhymes, & Life (BRL)

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Julia Simone Fogelson
“My Choice, My Voice, My Opinion”:
An Exploration of a Strengths-Based Model Used with Youth in Hip Hop Therapy

ABSTRACT

The purpose of this study was to examine how the Academy program at Beats, Rhymes, & Life, Inc. (BRL) utilizes a strength-based therapeutic approach. This study focused on identifying facets of a strength-based model utilized by the Academy, and exploring the effect of a strengths-based approach on participants. Using semi-structured interviews with seven current and past Academy members, the study found that the strengths-based approach positively impacted all participants in three distinct ways: (1) Valuing multiple forms of knowledge in a non-hierarchical manner, which included processes related to collaboration, self-directed learning, and use of a multicultural perspective, (2) Honoring client and communities as experts on themselves and capable of healing themselves, which included participants identifying healing processes amongst their community and the impact of healing through art and expression, and (3) Reframing the pathological “at risk” model to a strength-based model of resilience, which included identifying processes related to highlighting personal strengths, reframing youth form “at-risk” to “at-promise” and increasing perceived self-esteem and confidence.

Implications for social practice highlight the benefits that a strength-based approach provides for the Academy and provides a template for best practice in therapeutic group-based agency work.
“MY CHOICE, MY VOICE, MY OPINION”:
AN EXPLORATION OF A STRENGTHS-BASED
MODEL USED WITH YOUTH IN HIP HOP THERAPY

A project based upon an investigation at Beats, Rhymes, & Life (BRL), Oakland, California, submitted in partial fulfillment of the requirements for the degree of Master of Social Work.

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CHAPTER I

Introduction

This qualitative thesis explores how the Beats, Rhymes, & Life (BRL) Academy utilizes a strength-based therapeutic model in developing growth and positive change in participants. BRL is non-profit in Oakland, California that uses hip-hop music as a catalyst for change and development including therapeutic services; BRL’s therapeutic activity groups (TAGS) are offered in schools, social service programs, and after school programs. BRL also serves transitional age youth with an education program: The BRL Academy. The Academy serves as continued care and professional training for those who have aged out of the BRL program, or who want to work under the BRL umbrella as a clinician and mentor for youth. The Academy consists of two phases: the Workforce Development Initiative for Social Service Employment (WISE), which aims to prepare members for employment in social service positions and the Staff Transition Employment Pipeline (STEP), which aims to prepare members for an employment position at BRL or acceptance into graduate school for social work.

Participants that begin in the WISE program are required to be over 18 years old, hold a high school diploma, or are working towards obtaining a GED. Participants move to the second phase of the Academy, STEP, either by graduating WISE or a 4-year- university. Together the programs takes 27-months to complete. Academy members enter the program with the goal of a future profession as either a teaching artist to educate youth through art and self-expression or as a social work clinician. Graduates of the Academy receive a certificate of completion and assistance with future job placements,
which have included working at non-profits or returning to BRL as a staff member. Some members proceed towards earning a social work masters degree.

When working with youth in historically marginalized communities, it is important to challenge focusing great weight and unnecessary attention on risk factors. Youth identified as underprivileged are often marked by their deficits, which can be detrimentally pathologizing and limit resources that would lead to future positive outcomes. On the contrary, a strengths-based model shifts the focus to youths’ strengths and promise for their future, by instilling in them knowledge of their own strengths, increased confidence and potential for success.

It is no accident that BRL utilizes a strength-based model due to its roots in Hip Hop culture. BRL is focused on the original roots of Hip Hop of conscious lyrics, do-it-yourself recording and producing, and the unity and empowerment from which Hip Hop was born. Afrika Bambaataa, the founder of The Universal Zulu Nation which is a music centered youth organization still in existence today, focused on elements of peace, love, and unity (Orange, 2013) and mobilized Hip Hop to serve as a space to “come together through music” in order to promote decreased gang violence in his community (Weinstein, 2014). Since it’s birth, however, big record labels have commodified the art form of Hip Hop, further perpetuating harmful stereotypes of people of color and erasing the authentic roots of Hip Hop, removing the power from the artists’ control (Commisiong, 2013).

Consequently, BRL is placing the power back in the youth and the artists hands, and reviving the true meaning of Hip Hop: to serve as a unifying art form, focusing on positive elements of peace, collective struggle, and equality (Weinstein, 2014). Hip Hop
is helpful in terms of working with youth due to this essential element of empowerment, as youth are disenfranchised repeatedly. Further, youth who come from stigmatized communities have been systematically oppressed and silenced, just as the roots of Hip Hop were compromised by big money and record labels. The element of unifying serves as a therapeutic way to find commonalities between members of the Academy and to benefit from joining collectively in support of one another. Additionally, by writing, recording and producing their own music and helping BRL youth to do the same, Academy members can take back the power that mainstream media companies have stolen.

In order to align with the roots of Hip Hop philosophy and ethics, my research partner and I chose to use a participatory study as the research model, as the benefits greatly outweigh a study where participants are solely involved as study subjects. While participatory studies in general are powerful methods of involving youth participants to use their own agency and empowerment, we utilized aspects of a Community Based Participatory Research (CPBR) model in order to honor the principles of BRL and Hip Hop. As explored in the history of Hip Hop, the movement began with do-it-yourself roots, blending consciousness raising and critical thinking. Because BRL is dedicated to Hip Hop therapy and culture, it is only in alignment that the research involving BRL would also adhere to these roots. We have decided to utilize aspects of a CBPR approach in order to maximize collaboration between Academy members and researchers, empower Academy students, engage in critical conversations, and raise our consciousness of power dynamics in the research process.
The first reason that CBPR is the most effective model for engaging in research with the Academy is because Academy youth, who have been marginalized in academic settings and are actively engaged in countering narratives of not being “good at school”, have the opportunity to direct how their ideas and experiences are understood in the context of academic project. It is our hope that collaboration in this project serves as a reparative experience with an educational system and students can see themselves as succeeding at an aspect of academia. Through collaboration between researchers and youth, participants have the potential to take charge of their own learning and thus work towards personal aspirations and growth (Smith, Beck, Bernstein, & Dashtguard, 2014). By utilizing aspects of the CBPR framework in this study, Academy students not only learn about conducting research through the collaborative process, but ideally have participated in a manner that maintains that those in power are not exerting their power over those less systematically privileged.

Second, CBPR has an inherent goal of empowering participants by giving them an opportunity to be agents of change beyond their personal narrative. Youth participatory research has the potential to create feelings of agency amongst participants, especially if they have experienced limited agency due to their positionality and personal narratives (Smith et al., 2014). Youth in the Academy have experienced structural and individual oppression for a variety of reasons. Through utilizing a CBPR approach, participants can experience having agency, leading to feelings of empowerment and gaining control over aspects in their social environment. Through direct involvement in the collaborative study process, participants have the potential to increase individual and collective change in partnership with researchers (McIntyre, 2000), which positions them
as agents of change initially stemming from their own experiences and expanding to the
greater community of which they are a part.

Through the CBPR approach, participants engage in critical conversations
about what topic they want to research in their community. At BRL, Academy members’
knowledge is the primary focus of the CBPR study and decisions must always ultimately
belong to them, not to the researchers as outside agents (McTaggart, 1997). Further, a
participatory study “does not accept truths created outside that community or truths
created by researchers working inside the community who treat the community as an
object for research” (McTaggart, 1997, p. 40). Through engaging in critical conversations
between Academy members and researchers, we strive to not taking outside truths as
participants’ truths. By listening to Academy members thoughts and stories, “giving them
the opportunity to speak about their lives and by collaborating with them in designing
plans of action to address their concerns” (McIntyre, 2000, p. 126), we hope to most
effectively develop a research question that honors their experience.

When utilizing a CBPR approach, power dynamics need to be acknowledged and
taken into account. This is a crucial aspect of the research, as Academy members likely
have been systematically oppressed and silenced just as the roots of Hip Hop were
compromised by big money and record labels. This is especially important to consider
when looking at our positioning as graduate students, as we do not wish to serve as the
oppressors in power using Academy members as our participants. Power as a researcher
over participants can be used as a way of maintaining control and gaining knowledge to
be used in coercive ways, giving off an “illusion of participation” (McTaggart, 1997). In
a participatory study, “regular checks are made to ensure that the agenda of the least
powerful become an important focus of the group’s work” (McTaggart, 1997, p. 34). This is an extremely important facet for a research project conducted with people of varying social powers, and although we are aware of ways that this could have been executed more fully, we hope that our collaborative stance and our continued exploration of the roles our work plays in academia, Hip Hop, and BRL was used in a sensitive and thoughtful manner.

Using aspects of a CBPR approach in working with the BRL community may help to increase the authenticity of the study. Issues of social justice and community resilience have been examined in Hip Hop culture since its inception. In 1989, the Hip Hop artist KRS-ONE created the Stop The Violence movement. Higgins (2009) states this campaign was in an effort to “address violence in the black community through education, grassroots organizing, and direct action” (p.97). This is just one of the few examples in which Hip Hop culture has become synonymous with advocacy for civil rights through community awareness. Due to these very powerful ideas, a CBPR-informed approach aims to honor Hip Hop’s value of direct action through community involvement and organizing.

Using a qualitative research design, seven participants were interviewed in order to examine how the BRL Academy utilizes a strength-based model in the program. Open-ended questions were used during semi-structured interviews to identify themes regarding how the strengths-based approach is utilized and how it impacts Academy members. Questions were formulated around three facets of a strength-based approach, which emerged as most prominent in the preliminary Literature Review: (1) a focus on how the Academy addresses valuing multiple forms of knowledge in a non-hierarchical manner,
(2) how the Academy honors clients as experts on themselves and communities as capable of healing themselves, and (3) how the Academy reframes the pathological “At Risk” model to a strength-based model of resilience.

This study aimed to explore the detailed ways in which the BRL Academy utilizes a strength-based approach in their programming and the nuances of doing so by focusing on several themes. First, I focused on how the theme of valuing multiple forms of knowledge in a non-hierarchical manner in order to explore how the Academy supports client-generated action. This distinguishes it from the pathological model that places the clinician in a position of healer and disempowers the client. Next, I focused on how honoring clients as experts on themselves and communities as capable of healing themselves lends strongly to a strength-based perspective, where every individual holds the innate knowledge of what he or she needs in order to heal. This also focuses on one’s community as a source of strength and healing, as communities have exclusive in-group knowledge of successful healing modalities and the potential to amplify resilience. Last, I explored how the Academy reframes the pathological “At Risk” model to a strength-based model of resilience due to the potency of transitioning from problem-focused to possibility-focused, which focuses on clients’ accomplishments and renewal, rather than risk factors and the disease model (Saleebey, 1996).

Currently BRL lacks any studies on the program providing empirical data. While BRL utilizes language lending towards strength-based, for example utilizing “At Promise” rather than “At Risk”, there is also no evidence-based data or previous studies illustrating how the Academy uses a strength-based model and how. It is the researcher’s hope that with the data collected from this study, BRL and the Academy will become the
standard in best practices with regard to programming and receive wider recognition and resources to continue working with the youth who have benefited so greatly from its existence. This study also aims to honor and illuminate the experiences of the youth who participate in the Academy and highlight their experiences and collective growth.
CHAPTER II

Literature Review

The purpose of this study was to examine how the Academy program at BRL utilizes a strength-based therapeutic approach by identifying specific tenants and exploring the effects on participants. In the following pages, I will first review the meaning of a strengths-based therapeutic model. Next, I will review the three most prominent tenants of a strength-based approach that applies to the Academy experience and explore into the literature that supports them. These three tenants are valuing multiple forms of knowledge in a non-hierarchical manner, believing individuals, families and communities have the capacity to heal themselves and help heal others, and individuals defining strategies and informing knowledge of care through asserting their status as expert on themselves.

Strength-Based Therapeutic Model

While the field of psychology and therapy is founded on an understanding of pathology and diagnosis, a strength-based therapeutic model asks clinicians to consider with more depth a client’s strengths rather than her deficits. The strength-based therapeutic model contains several tenants, which emphasize its movement from pathology to positivity and offset traditional therapy and the medical model. BRL and the Academy program uses a strength-based lens in providing mental health by looking at “youth behavior in the context in which it occurs, instead of subjecting youth to a system of pathology” (Alvarez, 2012, p.1). The strength-based model highlights the necessity to identify an individual’s personal strengths and resources, rather than focusing on negative self-labeling (White, 2002). By highlighting a client’s strengths and personal resources,
rather than focusing on deficits, client and clinician can capitalize on the client’s ability of knowing herself best, thus providing a client her own ability to heal herself and her community. While social work has traditionally valued the strengths perspective, the strength based therapeutic model pushes this idea even further to facilitate client-generated positive action, which can shape counseling objectives (Saleebey, 2012).

To support client-generated action, a strength-based therapeutic model values multiple forms of knowledge in a non-hierarchical manner, distinguishing it from the pathological model that places the clinician in a position of healer. Instead, in a strength-based perspective, every individual possesses the knowledge of what he or she needs to heal (Saleebey, 2012). Specifically, this approach suggests that all people have an innate wisdom of who they are and who they can be and that “somewhere within or around the client are forces for, if not healing, at least improving the quality of life” (Saleebey, 2012, p. 172). The model stresses that clinicians not only need to believe their clients stories, but must also believe in their clients themselves. This non-hierarchical manner requires clinicians to form relationships characterized by a mutual respect and collaboration, and to engage clients as equals on their healing path (Saleebey, 1996).

Another major tenant of the strength based therapeutic model is the concept of resilience. By replacing language such as “At Risk” with positive language like “At Promise”, the model focuses on a client’s abilities, intelligence and skills and supports continued development and growth. Transitioning from problem-focused to possibility-focused, the perspective asks clinicians to target clients’ accomplishments and renewal, rather than risk factors and the disease model (Saleebey, 1996). The strength-based therapeutic model neither denies problems that clients face nor masks real issues with
arrogant positivity. Instead it focuses on striking a balance, as “it is as wrong to deny the possible as it is to deny the problem” (Saleebey, 2012, p. 297). In fact, focusing on one’s community as a source of strength, which can be done through sharing stories and narratives, has the potential to amplify resilience (Saleebey, 1996). This is especially important when working with populations whose narratives have been silenced from the dominant culture. From this perspective, empowerment and focusing on strengths leads to resilience.

In the following pages, the main tenants of strength-based therapeutic intervention will be explored further. Specifically, I will discuss valuing multiple forms of knowledge in a non-hierarchical manner, honoring clients as expert on themselves and communities as capable of healing themselves, and reframing the pathological “At Risk” model to a strength-based model of resilience.

**Valuing Multiple Forms of Knowledge in a Non-Hierarchical Manner**

A strength-based therapeutic model focuses on valuing multiple forms of knowledge in a non-hierarchical manner. By valuing multiple forms of knowledge, the model limits the clinician’s power or positioning as “expert” over the client. One area where this shift in knowledge and power has been apparent has been in various workplace cultures. Shih and Young (2016) argue that a multicultural workplace perspective will recognize and honor differences between individuals and consider these differences as points of valuable knowledge. Such a workplace acknowledges differences among individual employees, instead of taking a “color-blind” lens. Examples of multicultural perspectives in work places include activities such as having mentoring groups, seminars, fairs, and workshops for employees with underrepresented identities.
(Shih & Young, 2016) and valuing diversity through trainings, career development, human resource strategic planning and equality councils amongst others (Gilbert & Ones, 1998).

A multicultural perspective can also be used to challenge the ways in which dominant culture’s knowledge is often placed at the top of the knowledge hierarchy in work place culture. In an attempt to challenge this hierarchy of knowledge and encourage multicultural perspectives, Jackson (2005) identifies six points that describe differing consciousness and culture of systems. Stage One: The Exclusionary System maintains the majority group’s dominance and privilege and usually is hostile towards concern for social justice or diversity within their system. Stage Two: The Club attempts to ensure that privilege and power of the majority group, while also allowing a limited number of “minority” people into the group. This group will engage with social justice issues, only if they can still maintain their “comfort zone” and power. Stage Three: The Compliance System still limits engagement with social justice issues in order to not create conflict, but provides more access to members of traditionally excluded social identity groups. Stage Four: The Affirming System works towards social justice and group inclusion, while Stage Five: The Redefining System works towards fully transitioning to include all people and gaining a multicultural perspective. Stage Six: The Multicultural System structurally reflects the contributions and knowledge of diverse social and cultural groups. All members have the potential to make decisions that heavily inform the system and works, to challenge and disqualify social oppression, and to educate others on multicultural perspectives.
A 2014 review of best practices in creating an inclusive corporate culture identified Cisco Co. as a rich example of a company engaging in the creation a Multicultural System (Mazur), further building upon Jackson’s six stages (2005). Cisco Co., which employs 74,000 workers in 165 countries, utilizes “a culture of inclusion” through maintaining an organizational environment that encourages people with multiple backgrounds to work together. In this work place culture, all voices, diverse viewpoints and perspectives are heard and respected through placing value on opinions from all people, not just those in top tier job positions (Mazur, 2014). By encouraging all team members to voice views, perspectives and opinions on business objectives and problems facing the company, Cisco Co. demonstrates best practice for inclusion using a multicultural system lens.

Empirical research further demonstrates how diversity amongst group members can potentially be valuable for knowledge creation and new insights. Lauring and Selmer (2013) surveyed 489 members of multicultural academic departments in Denmark, including professors and doctoral students to assess the relationship between “openness to diversity” and “group knowledge processing.” Openness to diversity was defined as acknowledgment of similarities and differences amongst people while group knowledge processing was defined as the collection of knowledge needed for optimal work-group performance. Results confirmed that openness to diversity was positively linked with increased group knowledge. These results were consistent with past studies that demonstrate the positive correlation between openness to internal discordance and involvement in group undertaking (e.g. Homan et al. 2008; Mitchell et al., 2009). Lauring
and Selmer’s work suggests that groups that are able to capitalize on heterogeneity and benefit from increased effectiveness in organizational functioning.

Valuing multiple forms of knowledge through openness to diversity and consequent knowledge sharing was assessed in a 1998 study by Gilbert and Ones exploring the benefits of utilizing a multicultural system in the workplace. They studied “informal integration” of employees within two different organizational contexts from two local branches of Fortune 100 companies in the Southwestern United States with a focus on race, gender and organizational context. The first branch, which included 119 study participants, expected employees to assimilate into the dominant workplace culture. The second branch, which included 165 study participants, was defined as a workplace where internal differences were valued and diversity was encouraged. The authors were interested in understanding which organizational context possessed the greater amount of informal integration amongst employees. Researchers found that inclusion amongst employees of all identities through social integration occurred more highly in organizations that prioritized appreciating differences. Researchers suggested that workplaces have the potential to lessen the perception that differences between majority and minority employees are something to diminish, and that social assimilation is not necessary for successful business. In fact, valuing the inclusion of employees with contrasting identities and knowledge may lead to a stronger organization and this valuation process endorses a strengths-based approach to workplace functioning. While research on multicultural organizational approaches is minimal, there appears to be numerous published theoretical guides, responses to guides, theoretical papers, and the
proposition of benefits and strategies for multicultural workplaces (e.g. Grieger, 1996; Rogers-Sirin, 2008).

Valuing multiple forms of knowledge and subverting a hierarchical approach to learning while employing a strengths-based perspective has also been used in progressive education programs through self-directed learning. For example, ninth grade teacher Jim Davis taught reading and writing to students who were identified as struggling in English and utilized self-directed learning to capitalize on each student’s potential rather than failures (Davis, Cook, & Ostensen, 2015). Davis utilized a non-hierarchical model of learning to disrupt internalized oppression by understanding that his students were aware of their own needs and allowing them control in their learning. Further, he rejected both the identity of a teacher “whose magical instruction was going to fix” his students and their label as “struggling” in an attempt to disrupt the perpetuation of his students as deficient (Davis et al., 2015). This moved Davis’ teaching away from a pathological approach to a strengths based approach from “At Risk” to “At Promise”.

Davis et al. (2015) identified several teaching strategies that fostered the development of a Multicultural Approach in the classroom. First, they recognized the importance of collaboration for students through disrupting the traditional teacher-student hierarchy. In doing so, Davis allowed students to form their own groups in the nature of collaboration and allotted time for his students to socialize in an attempt to minimize traditional classroom rigidity. Second, Davis provided a new paradigm for learning by allowing students a chance to teach each other and take charge of their own learning, while positioning himself as a “co-learner.” Davis empowered his students by allowing them to choose topics, content and genre to study in class. In an assessment of the
classroom, researchers found that Davis’ ninth grade students who had been previously labeled as reading deficient could read at eleventh/twelfth grade levels when they were allowed to read about something they cared about. Davis et al. concluded that students labeled as “deficient” are undeserving of the negative label. On the contrary, working with a teacher who trusts their learning needs and empowers students by taking away some of their own hierarchical status as all-knowing teacher has been proven to be remarkably beneficial.

Similarly to self-directed education in a classroom, progressive and alternative youth programs occur in outdoor adventure education (OAE) courses where students are allowed to exercise control and self-regulation over their learning process. Sibthorp et al. (2015) studied OAE’s ability to provide students with learning experiences that are interesting and goal-relevant. A sample of 47 college-age students between 18 and 29 years of age enrolled in an OAE program completed measures of their experiences of the course, focusing on the level of their engagement and learning compared to traditional in-classroom learning. Researchers found that OAE’s method of engaging students in experiential learning that was centered on self-defined goals and interests consequently promoted optimal engagement. Optimal engagement was defined as above the student’s mean score on interest and goal-relevance. OAE also values overcoming challenges and practicing perseverance, which has been studied to support tolerance for adversity, making future persistence more likely (Sibthorp, et al., 2015). Highly similar to Davis’ model of self-directed learning in the classroom, OAE allows for students to customize their learning and to “exercise control and initiative in the learning process” (Sibthorp, et al., 2015), leading to stronger motivation and quality of experience. Optimal engagement
results in increased motivation and quality of experience for students. In addition, Sibthorp et al. (2015) note the critical importance of OAE’s placement of students in supportive and responsive social groups within the program, which encourage participants to support each other through attempts at trying, failing and learning.

The importance of collaboration between teacher and student to promote optimal engagement in learning is further emphasized by Eisler (2005), who advises educators to see and treat children as partners and to view education as something that you do “with” children rather than something that you do “to” children. This model of “partnership education” is used in the Finish school system; Finland ranked at the top places of literacy, science, and math, far ahead of the United States. Eisler also mentions the strengths of peer teaching for children and identifies collaborative learning as one of the most effective ways of learning, despite not having a place in the U.S.’s conventional school system. Collaborative learning further admonishes the traditional hierarchical learning structure and utilizes a strength-based approach of entrusting students with directing their own learning alongside their teacher.

The importance of self-directed learning in partnership with collaborative education is further emphasized when examining the positive outcomes of students studying their chosen areas of interest in a collaborative learning environment. Researchers Sjödahl Hammarlund, Nordmark, and Gummesson (2013) collected data from five physiotherapists enrolled in online courses and found that choosing one’s own research topic increased motivation and meaning while gaining further knowledge. Participants reported increased self-confidence and efficacy from the self-directed learning process, resulting in greater autonomy. In addition, collaborating with other
students in the class broadened understanding of the material and increased creativity further expanding on the concept that partnership learning leads to optimal engagement.

Valuing multiple forms of knowledge and engaging in collaboration has also been utilized in the creation of community-based mental health programs, like BRL. Co-founders Tomas Alvarez III and Rob Jackson utilized knowledge from community youth, mental health practitioners, educators, policy makers and community artists to inform their strength-based program (Alvarez, 2012). Alvarez noted their “belief that youth consumers deserve a seat at the table” when creating mental health services for them and others like them to utilize (pg. 10) Similarly to Davis (2015) and Eisler’s (2005) models, youth have the opportunity to gain empowerment, advocate for their needs and collaboratively work towards individual and community change through exploring modes of intervention and advocacy.

The Academy strongly utilizes a strength-based therapeutic model to teaching focusing on the tenants discussed. Valuing multiple forms of knowledge in a non-hierarchical manner is demonstrated in the Academy’s staff structure of clinicians and artists teaching collaboratively, while at the same time equally valuing the knowledge and opinions held by participants. Mazur’s identification of Cisco’s best practice for inclusion (2014) runs parallel to The Academy, which also encourages the relay of knowledge from individuals with multiple backgrounds. With clinicians, artists and students working together and educating each other, the Academy challenges a hierarchical model and strives for a culture of inclusion.

The Academy also closely follows the principles found in self-directed learning and collaboration. Academy members choose their track of learning between clinician,
artist or a blended track, and work with staff to gear their learning to future education and career goals. Additionally, the Academy classroom is one of collaboration and support, with both staff and community members compassionately working together to help each other achieve their highest level of optimal engagement. Optimal engagement (Sibthorp, et al., 2015) is clearly demonstrated in Academy members, as their dedication and commitment to the Academy learning process surpasses their engagement in past mainstream school experiences.

Further, the practice of highlighting resiliency in Academy members is similar to that used in OAE. Parallel to how OAE values overcoming challenges and practicing perseverance in an effort to increase tolerance for adversity, the Academy focuses on individual’s strength in moving forward past difficult life circumstances. In addition, the Academy’s structure of social groups and emphasis on peer support fosters resiliency in the same manner as OAE, which encourage participants to support each other through various learning experiences, both positive and negative (Sibthorp et al., 2015). Although highlighting the implications of OAE’s approach for the BRL Academy, the reviewed studies as a whole clearly demonstrate the benefit of allowing Academy members to choose the focus of their studies in a collaborative, supportive environment with their peers.

**Members of the Community Healing Themselves**

Positive psychology highlights the belief that individuals, families and communities have the capacity to heal themselves and help heal others. Historical evidence acknowledges the various ways individuals and communities have healed themselves from within, without the help of a “magic healer”. For modern day
psychology and practice, this idea translates to the deterioration of the clinician as the all-knowing healer and knowledge-holder.

A family unit oftentimes functions as an individual’s community and has the potential to be the catalyst for healing and support. Ayalon (1998) examined the healing process of children traumatized by war and affirms that children can heal through accessing their family and communities. Following a strengths based approach, Ayalon notes the cauldron of tools for healing that a family already possess, for example, serving as a resource in finding new direction and purpose, nurture and heal the survivors, memorialize the victims, participate in rebuilding community, and send messages of hope. Saleebey (1996) notes that sources of hope and strength can also be drawn from cultural and personal stories of healing and survival and personal and familial stories of struggle, resilience, and strength. Families are uniquely suited to aid in healing due to their knowledge of successful healing from past family trauma, exclusive experience of the culture of their own family, and the capacity to build on the strength witnessed in each individual family member.

Communities, in addition to families, can serve as a social support system by creating psychological continuity and stability, enhancing a sense of community, and maintaining a sense of familiarity and routines (Ayalon, 1998). Since coping resources within families can be overwhelmed during community trauma, community-based resources are important for added assistance and support (Farewell & Cole, 2001) and to engage in community wide events, such as a mass memorial or ritual for healing (Ayalon, 1998). Community based programs utilize a strength-based model to encourage healing by turning to an individual’s community, family and the youth themselves for personal-
empowerment. Through turning to their community’s context and history, youth clients can heal their individual pain by externalizing blame and guilt they may have experienced as a result of community trauma like war and political violence (Farewell & Cole, 2001).

Much of the empirical research examining how families and communities heal themselves has been conducted amongst indigenous cultures and traditional healing. McGabe (2007) interviewed four Aboriginal healers and four clients in Manitoba, Canada, about their experiences of helpful factors in traditional healing practices. McGabe found that all healers and clients interviewed believed that major facets of Native healing are: the healer as empathetic and providing of unconditional positive regard towards clients; healers as role models; healers providing trust and safety for their clients; and the client’s acceptance of self and identity. These facets are similar to those seen in Western positive psychological practice today, albeit maintaining the title of “healer” and “client”. Thus, practicing alignment with an individual’s community-derived and culture-based therapy model proved useful for healing and creating effective mental health services. The people of Josina Machal Island, an island in Mozambique that has been effected by war, serves as an additional example of a community healing themselves and omitting “magic healer” clinicians (Efraime & Errante, 2012). Indigenous communities like Mosina Machal Island have historically utilized community-defined healing strategies to deal with trauma successfully. For example, the community utilizes rituals for healing such as leading ceremonies for protection and engaging in creative exercises like writing down a past traumatic memory of war, placing it in a bottle and throwing it in a river. Other cultural practice examples include sweat lodges and drumming, which can be potent means for
gaining recuperation and rejuvenation within a community (Saleebey, 2012). Traditional healing techniques and psychoanalysis share the similar goal of freeing an individual of what is blocking their development (Efraime & Errante, 2012) and can thus be seen as complimentary and analogous means of healing.

The Academy entrusts that members of the community possess the intuitive knowledge needed to aid in self-healing, demonstrated in the way that that the Academy rejects the medical model’s necessitating the help of a clinician with specific academic knowledge as the all-knowing healer. Community-based programs like the Academy, consider individuals as proactive participants in assessing their own needs and encourages individuals’ resourcefulness, in addition to those drawn from their family and community. The Academy’s approach of placing strong value in healing through community engagement and support is demonstrated through the collaborative model and emphasis on unity and collectivity.

**Survivor-Defined Advocacy**

Individuals can help define strategies and inform knowledge of care providers and those with power through asserting their status as expert on themselves. Nichols (2013) describes “survivor-defined advocacy” as a method of empowerment for survivors of domestic violence. Under this model, both advocates and survivors combine their knowledge of domestic violence to inform strategies of care; advocates offer their knowledge of safety planning and available resources with victims’ knowledge of past abusers and situations. Survivor-defined practices demonstrate that “victims themselves hold important knowledge of their cases and needs” and thus places the decision-making in the victims control.
Survivor-defined advocacy is emerging as the preferred mode of practice for intimate partner violence (IPV) services, which emphasizes survivor empowerment and client knowledge as informing care practices (Kulkarni, Herman-Smith, & Ross, 2015). Kulkarni et al. investigated 236 service providers’ attitudes towards survivor-defined care in two studies that surveyed IPV service providers about their work experiences. Results indicated that providers believe collaborating with non-IPV service agencies and educating the community were important aspects of their work with survivor-defined advocacy. The researchers noted that assessing provider’s attitudes leads to “facilitate more empowering, individualized, and coordinated services for IPV survivors” and stress the importance of providers being supportive of client’s independent decision making, avoiding victim-blaming attitudes. This study supports Nichols (2013) theory of survivor, or client, defined advocacy as means of empowerment.

Drawing a parallel to survivor-defined advocacy under the strengths-based model, Academy members provide personal knowledge of their experiences growing up in similar communities to inform their leadership when teaching younger BRL members in TAGs and workshops. In addition, many Academy members previously participated in a TAG themselves, and thus can draw from their own experience as a participant as they move to a position of educator and leader. As noted previously, BRL co-founders Alvarez and Jackson created BRL with the belief that the youth that utilize mental health services also deserve to help create them.

Despite the support for the idea that individuals, families, and communities inherently possess the knowledge they need to heal themselves, there is also a significant level of criticism of this idea. Some argue that educated clinicians are the only qualified
mental health experts, rejecting the idea of all individuals as experts of their own healing (Wong, 2013). Wong argues that indigenous healing methods when used alone without trained clinical care are potentially dangerous. She suggests that personal experience is not a legitimate source of learning and that in Western Society, personal knowledge cannot be granted the same credibility as “academy credentials based on scientific knowledge” (2013). This argument leads to controversy over whether personal knowledge and experience is as credible as academic expertise rooted in proven science. Further, placing confidence in individuals, families and communities as able to heal themselves questions the withstanding social structure of health care that depends on exercising power and control over their patients (Ayalon, 1998), for example, clinicians working within bureaucratic agencies and structures of power. Additionally, in a critique of the idea of all individuals as “potentially experts” of healing, Wong (2013) argues that personal experience is not a legitimate source of learning and that in Western Society, personal knowledge cannot be granted the same credibility as “academic credentials based on scientific knowledge”. Wong argues that clinicians are the experts and discounts indigenous healing as a method of healing to be used alone without trained clinical care.

Developing interview questions addressing survivor-defined advocacy lends to gathering further information on the broader theme of individuals owning the capacity to heal themselves and their community. This is in part due to the Academy’s position as mentoring and teaching the youth in the BRL program. The belief that youth who utilize mental health services also deserve to help create them lends to this model, as Academy members can draw on their experiences as younger individuals and reflect on how they’d shape BRL’s therapeutic services.
Risk and Resilience

A strength based model, like that used in BRL TAGs and the BRL Academy, works by focusing on an individual’s strengths rather than her deficits. BRL looks towards clients’ strengths and resilience in a “culturally-responsive” approach, using a youth “At Promise” approach, a play on the popular terminology of youth “At Risk”. Resilience can be understood as an individual’s ability to move forward through difficult life experiences (Saleebey, 1996). An individual’s protective mechanisms such as self-esteem, family cohesion, and social support that encourages and reinforces coping efforts is important for individual resiliency and helps to shift the focus from a lens of vulnerability (Rutter, 1986).

An individual’s capacity for resilience after experiencing challenging life circumstances depends on several factors. An individual’s self-esteem, feelings of self-worth, and confidence in coping triumphantly with challenges are recognized as protective factors (Rutter, 1987). In order to identify other factors contributing to resiliency, Collishaw et al. (2007) collected longitudinal data from 571 study members and their parents in the UK with a focus on individuals with experiences of abuse. He found that an individual’s outcome between resiliency and psychopathology in adulthood after experiencing abuse as depends strongly on the contribution of social support. Participants were interviewed in adolescence at ages 9-10 years old, 14-15 years old and again in midlife, at around 44-45 years in order to assess adulthood resiliency. Collinshaw et al. (2007) found that a significant portion of the abused group reported minimal psychopathology in adulthood, leading them to be classified as resilient. The main factors for resiliency included the importance of peer social support and the
presence of parent who as classified as especially caring during the individual’s adolescence. This availability of emotional support at the time that abuse occurred contributes to resiliency, as an individual will be more likely to draw support from others in adulthood. Notably, the quality of friendships and the stability of love relationships in adulthood also contributed to resiliency. In addition, resiliency in survivors of childhood abuse was noted to include genetic factors, cognitive factors, and inter-personal factors, as well as family background and parenting style. Thus, it is evident that social and community support for survivors of abuse both in childhood and adulthood is a sizeable factor in developing resilience. This study’s findings imply the potential for Academy members to build resiliency and positive outcomes currently and also in adulthood as a result of social relationships and emotional support provided within the structure of the Academy.

Group-based intervention may be an important means to achieve this social support structure. In fact, it is considered as a systemic, strengths-based treatment approach has been shown to foster resilience in children exposed to intimate partner violence (IPV). A 6-year-old African American girl named Alexis was referred to a 10-session, 5-week group-based intervention program following chronic exposure to IPV between her parents. Each session consisted of 4-6 children per group and utilized a strengths-based approach with the goal of skill building in an effort to increase resiliency (Howell, et. al, 2015). Results indicated that despite the distress Alexis experienced regularly, her nurturing relationship with her mother and her extended family along with her personality were strong protective factors contributing to her resilience. Alexis’
resilience after participating in the group was assessed to have improved, suggesting the importance of interventions in childhood towards an outcome of increased resiliency.

Transitioning from the pathology of risk to a lens of resiliency has been demonstrated in several community-based mental health programs for children, including a 14-week art therapy program for youth labeled as “At Risk”. Sitzer and Stockwell (2015) explored the effectiveness of a Wellness Program designed to build resiliency in “At Risk” youth prior to adolescence as well as those experiencing complex trauma, through a combination of art therapy, CBT, DBT, mindfulness, positive psychology, and group therapy. Forty-three subjects, ages 9-12, placed in four separate group cohorts demonstrated increased resilience, with notable improvement in the area of ability to compromise, tolerating frustrations and maintaining a positive attitude. Notably, male students showing stronger improvement than female students possibly due to lower baseline scores for males. Through looking at evidence of group-based intervention for youth labeled as “At Risk”, shifting towards a lens of strength and resilience is effective in changing individual youth’s trajectory towards personal success and positive outcomes.

BRL focuses their program on this concept of strength-based resiliency, as they consistently focus on participant’s strengths rather than deficits, which can include diagnoses and notes from care takers. BRL notes their usage of the language “At Promise” to illustrate this dedication to individual strengths and potential. BRL’s focus on creating a supportive, warm community within the organization aligns with the research that highlights the positive outcomes of building community for optimal growth and healing.
Current Study

BRL is a youth-oriented therapeutic and workforce development program that has demonstrated dedication to utilizing a strength-based approach to all programs. Within this structure, BRL and consequently the Academy emphasize the movement from pathology to positivity and offers an alternative to traditional therapy and group work. As explained, a strength-based therapeutic model values multiple forms of knowledge in a non-hierarchical manner, honoring client and communities as experts on themselves and capable of healing themselves, and reframing the pathological “At Risk” model to a strength-based model of resilience. When BRL and Academy staff focus on strengths, the transition from problem-focused to possibility-focused has the potential to blossom.

The following study was constructed to explore how the BRL Academy utilizes a strengths-based model. We looked for the specific ways that Academy members feel their strengths are explored and honored, based on research collected in the literature review, with space for new findings that are unexpected. When creating this research question, a CBPR model emerged as the most thoughtful way to include Academy members in the research process. A CBPR model strives to treat participants as partners in creating change and improvement instead of as objects of research (McTaggart, 1997). Working collaboratively with Academy members honors the idea that they are truly the experts of their own experience and limits the positioning of researchers as holding more valuable knowledge or experience. The principles of community-based practice include consideration of the clinical, practical and methodological considerations in building community partnerships, assessing community needs and issues, analyzing and interpreting results as a community, and disseminating findings in a manner that has
direct implications for the community itself (Minkler & Wallerstein, 2008). Due to not owning membership in the BRL community, researchers relied on Academy members’ involvement in developing the research question and interpreting the resulting data.
CHAPTER III

Methodology

Formulation

The present community-based research study is an exploration into the hip-hop therapy program BRL’s clinician training program called the Academy. The study is part of a larger study that explored the following two questions: (1) How does the BRL Academy utilize a strengths-based model? and (2) How does the BRL Academy support its members in subverting systems of oppression? Findings were collected through a mixed method study comprised of a survey and semi-structured interview. The purpose of the study was to assess these two values identified by the Academy leaders and members as central to their success. The focus of exploring how the Academy utilizes a strength-based model lends clarity to how an “at promise” rather than “at risk” approach honors Academy member's individuality. The focus of examining the Academy’s curriculum and inclusion of the issue of systemic oppression helps shape a clearer view of developing a social justice identity within its members to resist oppression. The method was shared between these two studies, although this paper focuses on the former research question using a qualitative approach.

Conceptually, the BRL Academy is a community-based approach to intervention for youth that focuses on utilizing the culture, values, and practices of hip hop to support healing. The Academy serves as a platform for college-aged BRL participants to achieve self-defined professional goals by allowing members to select classes under an artist or mental health clinician track. The Academy also provides in-vivo job training and an ongoing community and source of support for members. While BRL has explored the
specific trajectories of members enrolled in the Academy, little has been done to understand how the values that informed the Academy’s structure impact those enrolled.

**Community-Based Participatory Research Model.** We utilized aspects of a CBPR approach in the study in order to maximize collaboration between Academy members and researchers, support empowerment of Academy students, facilitate engagement in critical conversations, and attend to power dynamics. The decision to use a CBPR participatory action research method is based on the fact that BRL is a living, breathing entity that has been created through identifying and using community members’ strengths to propel the organization forward. BRL was founded on community direct action, and it is vital that the research does its best to reflect this. The members of BRL have social identities that have been developed, are still developing, and are affected by each other’s interactions. After BRL teaches at promise youth “At-Promise” how to become engaged with their communities, it then challenges them to take part in their communities using their specialized skills to provide support to others. This is especially important in the Academy as the members are making the shift from being the students, to becoming the leaders that will teach the new generation. To take an individual, outsider approach to researching the Academy would devalue the fundamental community structure that BRL was founded on. Furthermore, Academy members know the program better than the researchers do, and working in collaboration with the Academy to develop and execute the project and disseminate the findings would best meet the needs of BRL as a whole, the needs of the Academy members, and the needs of the Smith School for Social Work (SSW) students.
While we were not able to incorporate all aspects of the CBPR approach, many aspects were included, and these are outlined below in the procedure section. After submission of the thesis to the graduate school, the researchers will review the study findings with two Academy members and together present and discuss the findings in a symposium during the Smith School for Social Work second summer term. This further illustrates the living aspects of CBPR.

**Procedure**

Consistent with a CBPR approach, our research advisor spent several years developing a relationship with BRL and came to understand the organization’s need to measure the process and impact of the programs. Then, we were invited by our research advisor to partner with the Academy to identify specific areas for examination, in an attempt to address the needs of two communities: BRL Academy Members and SSW students, who are required to complete a thesis requirement towards graduation.

After our Research Advisor and the Chief Operations Officer (COO) of BRL discussed several possibilities to execute a CBPR study, two advanced members of the Academy were identified by BRL leadership to serve as community collaborators. These individuals had expressed an interest in participating in the developing research program at BRL. The research advisor and chief operations officer agreed to (1) facilitate a community discussion about the areas for exploration and (2) support regular check in between SSW thesis students and Academy collaborators during research question development, measure development, data analysis, and dissemination, and (3) provide an executive summary for the findings to be incorporated into BRL’s ongoing communications and program development. Working together with community
collaborators provided the researchers with access to peer debriefing (to check for bias), member checking, and prolonged engagement with the BRL community throughout the research process.

Researchers were invited to be participant observers in a class in the Academy’s research methods course, which included the Academy collaborators. Researchers participant-observed a facilitated discussion, lead by the research advisor and chief operations officer about Academy collaborators’ interests in research topics. The researchers were encouraged to participate more actively as the conversation developed and were given the opportunity to ask questions of Academy members to clarify any ideas or emerging themes.

Next, the researchers developed research questions based on what was heard during this initial meeting and developed a first draft of a survey and interview questions in order to gather necessary data. A follow up meeting was scheduled between researchers and Academy collaborators to review the materials and provide feedback to the researchers regarding identified themes for exploration. Researchers then revised their questions and research materials based on feedback, identified a data collection plan, and discussed their role in interviews. Since two researchers would be conducting the interviews for both studies, the researchers rehearsed interviewing with each other in an effort to present questions consistently and with as unbiased view as possible.

After an Academy member agreed to participate in the study, a meeting was scheduled with one of the two researchers to occur in a private room at BRL headquarters. Researchers obtained written consent from all participants. Participants first were given a paper-pencil copy of the survey, and then they engaged in an interview that
lasted 1-1.5 hours, which was recorded, transcribed and analyzed. Researchers also recorded notes during interviews to support the interview process and were not used as a form of data. An audit trail created and continuously documented the entire research process to increase trustworthiness and rigor in the study. Peer debriefing and member checking was also common during this process. This portion of the research took place over the course of two months.

The analytic plan through data collection also included re-assessing and working through the qualitative questions in between interviews. Due to the fact that this is a semi-structured interview, it had the potential to change. This type of inductive method guided the research where the participants want to go in terms of themes that felt more pertinent than others. The analysis also included transcribing the interviews as soon as possible to pull out themes that may be relevant. The iterative process of constantly comparing newly collected data to support reliability, validity, and reflexivity was significant as it helped the researchers analyze their own interviewer behavior as well.

Researchers contacted Academy collaborators to discuss results after data intake was completed. The collaborators were asked to provide any input that arose when reviewing the data with the goal of obtaining feedback regarding findings and interpretation. This further ensured alignment with the CBPR principles and the project’s dedication to a collaborative process between researchers and participants, thus completing the CBPR cycle.

**Participants**

Seven Academy members participated in the current study. After meeting the researchers in the facilitated discussion, Academy instructors informed Academy
members about the study and researchers were invited into Academy group meetings to
discuss the goal of the study and to recruit participants. In order to qualify for the study,
participants must have participated in the Academy within the past year or have been
currently enrolled in the Academy.

Four of the participants were female and three were male. When asked to identify
their race, each participant answered differently, as follows: Afro Puerto-Rican, African
American, White/Japanese/Portuguese, Mexican-American/Filipino-American/African-
American, Black, Black/mixed and one participant declined to comment. Ages ranged
from 21 to 26 years of age, with one participant declining to answer. The length of time
involved in the Academy ranged from five months to over four years. In terms of highest
level of educational experience completed, three members graduated from a 4-year
college, one attended some of 4 year college, two attended some of 2-year college, and
one graduated high school. Five members were currently enrolled in the Academy while
two graduated the Academy. When asked about their role in the Academy, two identified
as focusing on the clinician-track, three on the artist-track, one on a split
Administration/Clinician track, and one did not specify a current role.

Measures

Demographic questionnaire. Participants were given a demographic
questionnaire, with the purpose of collecting information about participant’s identities.
Example questions asked for participants’ self-identified, age, sex and gender.

Semi-Structured Interview. The interview segment addressed the former 5 tenants
in greater depth, and asked 3-4 questions under each. Researchers asked probes for each
question if needed. Questions assess for individual agency, subverting systems of
oppression, community empowerment, reframing a strength-based model of resilience, valuing multiple forms of knowledge in a non-hierarchical manner, and honoring client/individual as expert on themselves and their communities. See Table 1.

**Data Analysis**

The qualitative data was analyzed by examining common themes, patterns or descriptions in recorded interviews and survey answers. The researchers highlighted themes while writing down their own thoughts to account for their own positionality in the study. After this was completed, the researchers started to clarify the data based on the themes that were noticed. The next step was to identify themes from each research question data set and to create a codebook that reflected these themes. During this step, the researchers continued to examine the data from past interviews to come up with 10 themes that were reflective of their research question domains. The codebook was then used to chunk big pieces of data to make sense of what was said. Researchers then sorted the chunk pieces of data by attributing the created code from the codebook to the piece of data. After this sorting process was completed, researchers looked at the implications of the data that was collected and sorted through by code.
CHAPTER IV

Findings

The current study aim to understand BRL Academy members’ perceptions of and experiences with a strength-based therapeutic model as it shapes their experience in the Academy using a qualitative approach. Themes that emerged from seven interviews conducted with current and graduated Academy members are outlined below. Interviews began with an initial survey collecting demographic information about the participants, which also clarified their role in the Academy (artist or clinician track). Next, a survey was given that assessed participants’ sense of how the academy encouraged non-hierarchical knowledge structures, capacity for self-healing, and a focus on strengths. This survey is not included the current analysis. Finally, the participant engaged with the assigned researcher in an interview that lasted approximately one hour.

In the following paragraphs, the following themes are discussed. First, participants discussed the ways that the academy encourages engagement with multiple forms of knowledge in a non-hierarchical manner. Within this theme, participants identified processes related to collaboration, self-directed learning, and use of a multicultural perspective. Second, participants identified how members of the Academy have the capacity to heal themselves and their communities. Within this theme, participants noted processes related to healing through accessing their families and communities, healing through art and expression, and the concept of survivor-defined advocacy. Third, participants explained how the Academy utilizes a strength-based model of resilience. Within this theme, participants identified the importance of highlighting both Academy and BRL member’s strengths, acknowledging the youth who access BRL
as “At Risk” rather than “At Promise”, and the impact the Academy has on increasing individual self-esteem and confidence.

The following results include fake names in the interest of protecting participants’ privacy. In order to best protect participants drawn from a small, specific group, we have foregone individual profile and introductions.

**Valuing/Encouraging Multiple Forms of Knowledge in a Non-Hierarchical Manner**

Valuing multiple forms of knowledge in a non-hierarchical manner is based on the idea that all individuals possess valuable knowledge and life experiences. Omitting a hierarchy of knowledge serves to encourage all individuals to contribute their ideas and experiences, leading to an integration of ideas. This theme limits the influence of those traditionally in power, which is necessary in empowering those who have been systematically disenfranchised.

**Collaboration.** Collaboration between both staff and members, and between members themselves proved to be an important facet to the Academy learning experience. The theme of collaboration elicited a range of responses with the vast majority of participants reporting that their experience in the Academy heavily relied on collaborative activities. Four members (more than half of participants) described the positive impact they experienced due to collaboration between themselves and an Academy staff member. Participant One, Molly, described how she was given the opportunity to write a class with a staff member: “He had a basic framework but gave me the space to add on some things. I decided that [one aspect of human behavior] was important along with trauma theory.” Similarly, Participant Five, Dee, also described feeling excited by being asked to co-teach a professional development class and co-create
the curriculum. It is evident that Academy staff attend to Academy members as partners and view education as a collaborative process between Academy members and themselves.

Three members focused their responses on collaboration between Academy members on the Academy’s engagement with peer-learning and creating a collaborative, supportive classroom setting. Participant Seven, Shay, introduced the idea of a “Voltron unit”, where members come together with their strengths to create a “cohesive unit”. In this analogy, members’ different strengths come together to form the different body parts of the Voltron, which is a transformer whose parts morph together to create various shapes and forms. He noted that this analogy is widely used in the Academy, which was evident as another member also referenced Voltron. Shay gave the example:

Let’s say, like I said, I’m good at speaking…but I don’t always have the words to say, somebody else would be good at, like they know exactly what to say, but they’re not good at speaking. So it’s like I’m left arm, they’re right arm. Let’s say somebody…has the connections, the platform, so he’ll be the head…. So it’s like we take the whole Voltron idea and we try to pretty much turn wherever we’re at into their own form of Voltron unit, basically…

**Self-directed learning.** Self-directed learning is used in progressive education classrooms and acknowledges that individuals are aware of their own learning needs and giving them control of their learning. In the Academy, self-directed learning shined through in many facets. In fact, all respondents commented on some facet of their ability to direct their own learning in the Academy. Academy members are first able to direct
their learning by choosing a track: artist, clinician or a blend of both in which to focus their Academy career on. Participant Six, Caden, described:

I think the whole idea of the Academy was strength bases. ‘Cuz they allow you to choose which path you want to take…that’s strength, that’s my choice, my voice, my opinion on what I want to do with myself, so its giving me like a whole lot of power in what I feel…when you come here its like, ‘Do you want to be an artist, or do you want to be a clinician? What do you want to focus on?’ Like, oh artist. Molly commented how this extends beyond choosing a track and discussed how the opportunity to teach a class of their choice and in their subject of interest geared them towards future professional goals. She explained:

I definitely have a say in what I want to facilitate or teach. I’m currently working on a social class that I’m really excited about because it's touching on a lot of skills and I want to share…I think the experience in itself is really helpful. It’s helping me move a few steps forward as far as my professional and educational goals.

Three-quarters of respondents (n=5) described how the Academy has supported self-directed learning by allowing them to focus on their outside educational goals, such as finishing community college or a 4-year university and attending graduate school in the future. This occurred through two ways: allowing time for college classes outside of BRL and providing information on graduate school.

Participants expressed their appreciation for the Academy’s allowance of a flexible schedule as an aspect of self-directed learning as well as the exposure that BRL offers to many possible professional outcomes. Participant Four, Calvin, noted:
Even when I was in college, they were very flexible about my schedule so I could finish getting my BA. When I told them that I wanted to be a therapist, they gave me a lot of feedback and ideas. They really educated me on what the track was like and what it entailed. We even had an open house of a graduate program at our HQ about six months ago. It was great to have that opportunity to be there and gain all that knowledge.

An emphasis on focusing on individual professional goals was also expressed by Participant Two, Michelle, explaining:

Every time that I switch up and say ‘This is what I want to do’ they support me. Even with thinking about going to graduate school, they set up an event so that a school could come here and talk to staff about their program. They give us all these different avenues of support for the future when we are no longer in the Academy.

Dee described how she felt supported by Academy staff when she made the choice that of applying for Masters of Social Work graduate school. She shared:

They’ve put me in different avenues so I can sharpen my tools…doing intake forms, surveys, talking with the youth’s caretakers, learning to talk to them and keeping tabs on the kids by emailing their care takers and doing small things like that.

In summary, the Academy staff support participant’s professional objectives and personal goals through encouraging self-directed learning.

**Multicultural perspective.** Using a multicultural perspective means recognizing and honoring differences between individuals and considering these differences as points
of valuable knowledge. In the Academy, this translates to valuing knowledge from all BRL members as equally important, as well as knowledge shared between BRL members and staff. This model deletes the traditional hierarchical model of learning and places equal value on all opinions and knowledge. Multicultural perspectives in the Academy were not touched upon by three out of the seven participants, bringing into question if it is experienced by all members or if some members feel their knowledge valued more than others. When it did emerge in the interviews, the themes focused on youth and Academy members as being uniquely positioned to teach and connect with youth and on valuing how different perspectives are associated with different styles of learning and communication.

For example, Michelle commented on the value of teaching workshops from an Academy member position, without holding a professional degree or certification. She explained:

We had a workshop here with young girls from juvenile hall and just being able to teach them is valuing different kinds of knowledge because usually it’s not the youth that’s teaching. Usually the people teaching are people who have been in school for years and because they have a knowledge that’s beyond. Youth are usually looked at in society as not having knowledge, when in reality it should be knowledge that is even valued more than a class. Education is great but the system that we have of educating is super flawed. A lot of things that you learn there, you can’t apply but then a lot of the knowledge we see Academy members have gained has been achieved through their life. Their life stories then become
philosophies and solid knowledge that they can bring into a space. Having outside knowledge outside of institutions that is still valued is really important.

Participant Three, Delia, further built upon valuing different forms of knowledge through multicultural perspectives, by explaining how BRL equally values all participants. She shared:

Everyone has different forms of knowledge. Everyone has different ways of learning here. It’s pretty cool, though. Some people are more hands-on and some people learn by sound. Were able to put all that together and everyone is equal here. It’s not this person is above this person or that person is above that person. You really see that in the all staff meetings and the other meetings that everyone is equal here. Usually in school settings they put you in different classes because you learn different but in BRL we don’t do that, we make sure that everyone learns together. We teach at your pace. BRL takes everyone’s different experiences from where they’re coming from and they’re working with that.

**Community Members Have the Capacity to Heal Themselves**

The theme of community members and families inherently possessing the capacity to heal themselves has emerged throughout many cultures’ historical narratives. The majority of this research has been conducted amongst Indigenous cultures and traditional healing; popular images of traditional healing include drum circles and medicine ceremonies. However, Western Society also holds community and familial traditions of healing, which encompasses looking to family history and engaging in modes of self-expression. The study highlighted several types: healing through
community and family, healing through arts and expression, and healing through survivor-defined advocacy.

**Healing Through Accessing Families and Communities.** The Academy emphasizes the ability of a community to heal itself, which builds further upon nonhierarchical knowledge and creates an absence of an all knowing healer, clinician or authority. Through seeking support from their family and community, Academy members feel strongly that they can heal themselves. The majority of the participants (n=6) identified the Academy community itself as a source of healing, with over half of the participants (n=4) referring to the Academy as a “family”. One participant, Michelle, described how “it was … something that I think helped me in my development. It was the sense of that community that really helped me. It’s a smaller community inside a community.” Similarly, Delia described the importance of the Academy as a support system and how it influences other parts of her life, noting “Everybody supports you no matter what it is. Here, I feel like I have a sense of a good support system and more of a family based here.” Participant Four, Barry, further reflected on the Academy as a source of support and a family: “I talked to certain members within BRL more than I talk to close family members. A lot of issues and personal problems I find are more supported with BRL members.” Dee specified that she finds others in the Academy to be good listeners which has helped with her own healing:

I would say ever since I’ve gotten here, everyone’s been super supportive and just like super engaged. Everybody is just, is able to listen to others and able to comprehend what the other is talking about, and then from there, whatever steps need to be taken, we’ll do that. Everybody has been super supportive. It’s fun, it’s
kind of like a family I would say...So that really helped, and you always have somebody to talk to, always.

Shay emphasized the growth he has experienced as a result of being able to share his feelings with others:

And like personally, it feels more like a family so …developing is pretty simple. When you’re around people you feel comfortable around, you naturally grow...Everybody is pretty supportive here. We really do consider ourselves a family of some sorts. Cuz we’ll see somebody off, and it’s like ‘alright, what’s up with you? You need to check in? We need to talk something?’

It should be noted that all six participants who spoke on the idea of a community healing themselves focused on the Academy as that source of support, but one participant, Calvin, also spoke to how BRL can help youth heal their communities when they leave the BRL classroom. He stated:

This is how I look at it. Every child that comes through here, they leave with pride. They leave with pride and they go home and it’s infectious, it’s like, you can’t run from that. They might come here doing all kinds of stuff. And by the end, when we have the showcase and we have the CD and whatever we have for them, you just see a look on their face, like whoa, I can change stuff, I can do whatever I want to do, whether good or bad, even though we want them to focus on the good, they got the power beaming in their eye. And I feel they go home and they just give that, they give that… its like a magnet touches a paperclip, the paperclip becomes a magnet… I feel like we are, absolutely helping the community. And then us personally, we go home and we are still in our
neighborhoods too, and we talk to people too. And we definitely have these conversations with most folks now.

**Healing Through Art and Expression.** Members were not directly asked how art and personal expression has contributed to their journeys of healing, but the theme strongly emerged which is unsurprising given the musical emphasis of hip-hop in BRL. Personal expression includes art, writing, rapping or any other form of expressing one’s feelings and creativity. Six participants identified art and expression as a key factor for healing in themselves and in the BRL participants they work with. Michelle commented: “To see your power through the therapy of writing is amazing. I remember telling myself ‘No, I’m not going to do that. I’m not going to write.’ But then I started doing it and realized ‘wow I love this!’ The model is not just used with the youth, the model can be used with staff in the Academy.” Another participant, Dee, described how writing was therapeutic for herself, and also for the youth that she works with in BRL. She described how expressing one’s voice can be a transformative experience: "Just the thought of giving adolescents a voice to what they’re going through and their trauma and everything really stood out for me because [of past experiences she’s had with writing]. So I know like the importance of creating your voice and letting your voice be heard."

**Survivor-defined advocacy.** The theme of survivor-defined advocacy only emerged with 2 clients out of the 7, indicating that it is not a defined facet of the Academy. Survivor-defined advocacy is when an individual survivor lends their knowledge as informing care practices, which also has the potential for personal empowerment. The two participants who spoke to survivor-defined advocacy noted both micro and macro levels, of an individual and a community informing care. Calvin
commented about the community of Oakland youth and the unease with which black youth trust others due to past experienced injustices. He noted:

Everybody doesn’t look like us, so its like, yo, it’s hard but I think at the same time it was like us having that resiliency to heal ourselves. Because we know, like, Okay, we need these opportunities and we know what we got to do to help our people, and our neighborhoods, and we seen another way to do that through BRL.

He suggested that through experiencing directly what it’s like to be a member of the BRL and Oakland communities informs care practices in which he can help his community.

Similarly, Shay focused on himself as a survivor helping others understand his experience. He spoke about his mental health diagnoses and the openness with which he shares his experiences with other Academy members:

Well, usually, if there’s something along the lines of like mental health issues and stuff like that, I feel more so looked upon, cuz it’s I’ve always been pretty open with my mental health disorders… I have depression and PTSD and stuff like that. Usually when there’s issues around that people like usually look to me like alright how do you deal with this, how do you go about this, so I feel that’s where my opinions are most like validated, when it’s something around that...I feel like an expert on this topic, you make me feel like the number one authority to go to on this.

In summary, when considering the capacity for community members to heal themselves, Academy members emphasized receiving support from their BRL community, using art
and self-expression to share their experiences and struggles, and lending knowledge of personal experiences in order to help others.

**Reframing on a Strength-Based Model of Resilience**

The concept of resilience focuses on an individual’s strengths and capacity to traverse hardships. Findings point to Academy members’ resilience are a result in part to the Academy’s focus on members’ strengths, reframing “At-risk” to “At-promise” and imbuing members’ increased self-esteem and confidence.

**Highlighting academy members’ strengths.** Resilience points to an individual’s ability to move forward through difficult life experiences. Using a strength-based model of resilience, the focus lands on the individual’s strength and trajectory of moving forward into healing rather than focusing on one’s deficits and pathology. Through asking participants about the theme of resilience, a concept emerged of highlighting their individual strengths and using them to place the member in a leadership position, most often of leading a class for BRL TAGs.

Several participants provided examples of how their strengths lead them to a placement of leadership in the Academy. Participant Six identified the impact: "I think the biggest influence it has is impacting my leadership. Like running other groups.” Molly remarked how her interest in women’s studies was identified by Academy staff as a strength, and thus she was asked to step into a position of leadership to teach a class. She shared:

I think that they thought of me and brought the idea to me and it was a workshop that I was able to create with a couple of other people. We created it completely from scratch. It definitely made me feel really appreciated and special because it’s
a topic I’m really passionate about and so being able to channel that passion into something that’s going to be able to touch other people is a really special thing.

To have been thought of and tapped on the shoulder to create that was really cool. Dee expanded on this idea further by describing her initial fear and later satisfaction with also being approached to teach a class. She described that being chosen to lead a class helped her to see and understand her worth, and identify a strength of writing classroom curriculum.

Barry also spoke of the powerful experience of running his own training class. He reflected:

I developed it from start to finish and was the second person to do so. I think that having that kind of leadership position and having done the training really helped me see my own value and was able to do something on my own. I had never come up with a curriculum on my own before so, by the end it opened new doors for me. I started to see myself as potentially a teacher or other things that I hadn’t thought of before. It was really powerful and one of the administrators said that it was one of the best trainings they ever had, so it felt awesome.

Calvin also described the potent experience of running his own group and the impact it had on his perception of his own power:

Like I’m talking and I’m teaching the kids things, it’s like they really give that responsibility and they let me have it and run with it and I’m like yo….In other areas of my life it allows me to be more vocal now about my experiences and where I came from and where I am now. ‘Cuz it’s easy to be a recluse and just stay in my shell and not talk about it. But you know, having that experience and
standing in front of a group, teaching everything and them giving me that, it makes me feel that I’m strong, very strong. Very powerful. I feel now that I’m very powerful everywhere.... And I feel like I can walk into any room and teach people stuff.

A number of participants described how they taught at conferences and trainings outside of the Academy. Michelle described teaching at a conference in Washington D.C. and the satisfaction that came with sharing the knowledge he had learned in the Academy. Shay also referred to teaching at a conference and feeling that the experience was influential at helping him realize his strengths:

Like the first time I really know my strength is when the Executive Director asked if I wanted to go on a conference… we stayed for 3 days in a big hotel. And I’m around millions of social workers in a room, full of a thousand people. After I was done with that, cuz I’ve done it before, I’ve always felt like I guess I’m good at it, but after that sitting around mingling with people, I’m like okay, he must have really known that I was good at this, so that was that one time, it was like my strength was like oh yeah, I think I got this.

In addition to receiving encouragement to step into leadership positions from staff members, all participants emphasized the Academy’s action of highlighting participant’s strengths for them. Barry described feeling empowered by identifying his strengths and using the opportunity afforded by the Academy:

I think it left a lot more room for empowerment and usually a lot of models tell you exactly what to do and how things should be done. I think the strength-based model leaves a lot more room for you to see what your strength is and to exercise
that. I think the Academy has really allowed people like myself to go at the pace that they feel comfortable with.

Part of the strengths-based approach appears to be allowing individuals to identify strengths by first discovering weaknesses. Delia described:

Just being in the Academy, sometimes you wouldn’t even know that you had a like a big weakness but you can be in a conversation, you know, like sometimes I wouldn’t be a debater. I don’t debate. I don’t like confrontation. But since I’ve been in the Academy, it’s like I have to say what I have to say. It’s fine though. It brings up topics, and I would say that they focused on that strength. They took that little weakness and made it a strength. I’m able to approach what I have to say without worrying that it will be a confrontation because of the safe space. You’re able to say your opinion with confidence. Which is the definition of a safe space.

In this vein, Dee described how when she originally came to the Academy, she felt unprepared and inadequate. She commented that she quickly felt uplifted and supported by the Academy through their view of her as positive and identifying her strengths:

But just allowing others to see my worth and them telling me like, hey you can do this, you did it already. And I’m like, what, no I didn’t. Just having people constantly look at you as a positive thing instead of oh, you messed up a couple times and now I’m going to hold it against you. There isn’t anything like that.

BRL youth: "At-Risk" to "At-Promise". The strength-based model used in the Academy influences members' work with BRL youth, which includes the BRL moniker
which is often used of moving from viewing youth as "at risk" to "at promise". While this was not an initial theme asked in interviews, the theme emerged of participants referring to how the strength-based approach has influenced their work with BRL youth. A majority of participants (n=6) mentioned how their experience in the Academy has influenced their leadership with the youth they directly work with and serve. Two of the participants directly used the phrase “at risk” to “at promise” in describing how they view the youth of BRL, while the others nodded to the concept. Delia noted:

Well, BRL to me is known for taking what’s already a strength, and making it even a better strength. And even taking a weakness, that you might think is a weakness, but they’re going to take the strength out of that. You know you can say ‘my voice is really really low and people can’t hear me.’ ‘Well, the fact that your voice is really low, once you put it on that microphone, people can hear you. Or the fact that your voice is really low is really good because everybody is so loud and you keep things calm.’ So the fact that they’re able to take stuff like that and make it a strength is remarkable. You know, instead of youth at risk, it’s youth at promise.

Two of the participants indicated that they “praise” their students when speaking about a strength-based model. Molly described the helpfulness of identifying strengths in the youth she works with, based on her own experience as a child:

I think on a more theoretical side, like as a student having that framework is really helpful for speaking to youth and encouraging and praising them. I think that I really appreciate the strength model because I remember being a child and thinking to myself, having a lot of realizations, having a lot of knowledge but not
feeling validated by adults and older people around me because I was just a child.
I think we’re shifting that thought process, that paradigm that children should be
seen and not heard kind of thought process. I think once you give a youth that
space to be appreciated and once you have that strength-based strength base
model in place, you actually are really surprised by their capacities and their
growth.

Dee also spoke to praising her students and identifying their individual strengths:
We are constantly doing strength-based and we are constantly praising the kids,
and we are looking for small things that they wouldn’t even think of as a strength,
whether it be opening the door or getting all the snacks or you know, doing
something small like that. We would praise them for, and be like thank you for
doing that, it shows that you really care. Or them being super early. You know,
it’s like I see you want to be here on time and I see you want to be here even
before anybody else comes so you can greet them and that’s really dope. So like
just straight praising them all the time. And from there I praise myself.

Calvin described a compelling experience of working with youth BRL participants who
had been classified as what he considered to be “outrageous things” by their mental
health worker. He described them as being defined by “a long list of stuff that’s just like
going on with them”. He discovered that they appeared “fine” when they were in the
group he facilitated, which lead to him question why the youth were initially classified as
“at risk”:
And we’re like, I don’t even see how you got that from him, or her. And I think a lot of times the workers just look at the piece of paper and they just try to label the child as such based off the piece of paper and they treat them as such. But when we come we treat them like they’re our best friends, like ‘yo, what’s happening with you?’ And we treat them like they’re our equal and right there, that’s such an amazing act for a child to feel on equal footing with somebody that’s older or somebody that they don’t really know, like okay I feel empowered, that’s the word I want to use.

**Increasing Self-Esteem and Confidence.** Highlighting strength amongst Academy members has consequently resulted in increased confidence and self-esteem amongst 5 out of 7 participants. Four participants noted increased self-esteem when asked about the impact of being in the Academy and referenced how the Academy has contributed to their self-esteem increasing. Barry referenced self-esteem several times in his interview, describing his past history of experiencing low self-esteem to feeling an increase since joining the Academy. He stated:

I think more than anything, that being in BRL and the Academy, my self-esteem has definitely improved a lot in terms of being comfortable on stage, talking with people, meeting new people, and even being comfortable with myself. I just feel a lot more comfortable in my own skin and feel a lot more aware of my own voice and the value of my own voice….Our training builds a lot of self-esteem. There’s a lot of trial and error and a lot of capacity to continue to have the opportunity for leadership positions. I’ve been a lead facilitator for about two years and that’s
definitely increased my self-esteem. I definitely didn’t see myself in a leader format of any type before!

He also described the harrowing experience of nerves that would hit him before performing his music publicly, prior to joining the Academy. He credits the Academy for instilling in him increased confidence on stage and in his art, which has allowed him to begin touring as a hip-hop artist.

Only 1 participant mentioned confidence in addition to self-esteem, and referenced how the Academy has contributed to their confidence increasing. Delia stated: “I had confidence [before I came into the Academy] but it boosted more just being here. Just being around in this environment has been really positive for me.” She expanded:

You’ve got to be able to be confident in yourself and I feel like that’s what the Academy teaches here. I feel the Academy teaches you to be confident in yourself. No matter what it is, or what negativity you have towards yourself, it’s a strength. So now if you have a low calm voice, you’re proud of that low, calm voice because you know you keep a chill vibe to yourself. Now you can walk out with confidence and say ‘well, I like my voice now.’ I feel like I walk out into my personal life, even with that strength. It’s like walking in this door it’s like a breath of fresh air and walking out this door is like you’re ready. You walk in this door, you’re learning, and you walk out this door you’re prepared and you’re ready.

In summary, Academy staff work to highlight members’ strengths and encourage leadership opportunities that help do so. Using an “At-Promise” lens shifts the focus on an individual’s strengths and capacity for growth from their deficits and imperfections.
Last, increasing self-esteem and confidence amongst Academy members was a sizeable result of Academy membership and further solidifies the positive impact the Academy has on its participants.
CHAPTER V

Discussion

The intent of this qualitative study was to explore how the BRL Academy utilizes a strengths-based model. The study elicited seven Academy participants’ in-depth thoughts and perceptions about how the Academy’s use of a strengths-based therapeutic model is central to their success as students, artists, and future clinicians. The study illustrated that Academy members experience their program as using a strength-based model and that this use impacted them positively as individuals, artists, and clinicians for younger BRL members. This discussion will compare study findings to the research literature presented in Chapter Two regarding a strength-based therapeutic model used in work and educational settings, focusing on the most salient findings of Academy members’ perspectives on using a strength-based model in the Academy. These findings include the following: valuing multiple forms of knowledge in a non-hierarchical manner, honoring client and community as expert on themselves and as capable of healing themselves, and reframing the pathological “at risk” model to a strength-based model of resilience. This section will analyze these findings and the potential alignment with reviewed literature while incorporating unexpected findings that emerged through interviews. This will be followed by implications for BRL programming, limitations of the study, and implication for social work practice and lessons learned.

Valuing Multiple Forms of Knowledge in a Non-Hierarchical Manner

The finding of the positive effects of Academy members engaging with multiple forms of knowledge in a non-hierarchical manner aligns strongly with published research. Within this theme, participants identified processes related to collaboration, self-directed
learning, and use of a multicultural perspective, which was found to be widely expressed within the literature findings. These three facets proved to be highly impactful aspects of the Academy classroom environment.

First, findings from reviewing literature on non-hierarchical educational structures support the value collaboration has on students in educational settings, like the Academy. Eisler (2005) and Davis et al. (2015) reported on the value of teachers collaborating with students, likening them as partners in education rather than the traditional teacher-student hierarchy. Davis et al. (2015) identified teachers as co-learners with their students, and further emphasized the necessity for collaboration not only between teachers and students, but between students themselves in order. In addition, the importance of collaboration between students is supported by findings by Sibthorp et al. (2015) and Sjödahl et al. (2013) of the critical importance of students placed in supportive and responsive learning groups to foster optimal learning environments. This includes the opportunity for students to broaden their understanding of the material and increase creativity, which is evident in the Academy classroom’s model of creating a collaborative, supportive environment with their peers.

Another finding that supports non-hierarchical learning is the Academy student’s engagement with self-directed learning, which was deemed as an important part of their experience in 100% of participants interviewed. Sibthorp et al. (2015) stated that students who are able to control and direct their learning resulted in stronger motivation and quality of experience, which is congruent with my study’s findings. Increased self-confidence and efficacy from the self-directed learning process (Sjödahl et al., 2013) was also congruent with Academy participant’s narratives.
Last, this study’s results align with literature findings on the benefits of a multicultural workplace. These include recognizing and honoring differences between individuals as points of valuable knowledge (Shih & Young, 2016) and as means of increasing social integration amongst individuals (Gilbert & Ones, 1998). While only three Academy members explicitly expressed the importance of valuing knowledge from all BRL members and staff as equally important, all participants in some way expressed that their knowledge and strengths held value in the Academy. This model further disrupts the traditional hierarchical model of learning and places equal value on the entirety of members’ opinions and knowledge. The Academy’s usage of a multicultural classroom aligns with reported best practice of encouraging all team members to voice views, perspectives and opinions (Mazur, 2014).

**Members of the Community Healing Themselves**

The identification of the Academy as a source of support and strength aligned well with the literature findings on community healing. Within this theme, participants identified healing processes amongst their community and the impact of healing through art and expression, which was found to be widely expressed within the literature findings. The concept of survivor-defined advocacy, a concept I initially researched and interviewed members on, did not prove to be influential on participants and will be discussed in this section.

Viewing the Academy as “family”, which occurred in four participants, emerged as a strong theme that was not originally accounted for in written interview questions. The impact of considering the Academy to be one’s family proved to be strikingly influential in participant’s perception of emotional support and encouragement. The
majority of the participants identified the Academy community itself as a source of healing, with over half of the participants referring to the Academy as a family. Findings from the literature review support the concept of community and family members possessing the innate ability to heal themselves.

Ayalon (1998) noted the ability of communities to create psychological continuity and stability in order to solidify a sense of community and maintain a sense of familiarity and routines. Participants identified the Academy as a source of strong social support. Referencing the Academy as a family suggests that participants experience familiarity of routine of the Academy schedule. In addition, if a participant has continued on to the Academy from participating as a youth member of BRL, they experienced continuity in their care, which creates stability, routines, and familiarity. One participant attributed his development to the support he received in the Academy. Another member stated that they feel that other members of the Academy can understand the issues they are going through more than other people in their lives, which supports Saleebey’s (1996) suggestion that families and communities are able to successfully aid in healing due to exclusive in-group knowledge and experience.

Although participants were not directly asked how art and personal expression has contributed to their journeys of healing, the theme strongly emerged which is unsurprising given the musical emphasis of hip-hop in BRL. This theme was also prevalent in the literature reviewed in that community-defined healing strategies, like ceremonies, rituals and creative exercises are frequently used in Indigenous communities (Efraime & Errante, 2012). The Academy as a community has defined its own sources of healing through creative expression, which participants identified as a
central aspect of healing for both themselves and for the youth they work with. This finding draws a parallel with researched Indigenous communities self-defined healing strategies. Using art and musical expression in the Academy aligns with Indigenous culture’s utilization of drumming and writing as strategy for gaining recuperation and rejuvenation within a community (Saleebey, 2012).

The theme of survivor-defined advocacy, a concept initially researched and inquired through the interview did not emerge as a defined facet of the Academy. Although questions regarding this idea were not asked directly, I expected a stronger theme to emerge due to the fact that several participants were previous members of BRL as youth consumers. The few participants who spoke to the theme of survivor-defined advocacy cited their experience as a community member of Oakland, and of past experiences with mental health issues. Both members suggested that their personal experiences helped to inform how they interact with others in BRL, with the latter sharing personal mental health struggles as a means of teaching his peers in the Academy. Given this, survivor-defined advocacy may be a theme to explore specifically, but would require a wider approach.

**Reframing on a Strength Based Model of Resilience**

Reframing pathology to a strengths based model of resiliency in the Academy aligns with the positive benefits illustrated in published research. Within this theme, Academy participants identified processes related to highlighting their strengths, reframing youth form “At-Risk” to “At-Promise” and increasing their perceived self-esteem and confidence.
Research collected on the benefits of highlighting individual strengths was minimally gathered for this study. Sitzer and Stockwell’s (2015) exploration of group therapy based in part on a positive psychology and art therapy resulted in the increased ability of group members in maintaining a positive attitude and demonstrated the positive effects of shifting towards a lens of strength. The Academy, which is also based on art therapy and incorporates the positive psychology philosophy of focusing on strengths, was also found to instill a positive attitude reflected in member’s responses. All Academy members responded that the Academy staff and experience helped them to realize their strengths and potential, often in the form of leadership.

Factors found leading to increased resiliency aligned with study findings. The majority of Academy members reported increased confidence and self-esteem as a result of participating in the Academy, themes which have been studied as factors contributing to resiliency (Rutter, 1987). Resiliency has also been noted as being contributed to by supportive familial and community relationships (Howell, et. al, 2015). This aligns strongly with findings that Academy members experience the support of staff members in highlighting their strengths and encouraging their subsequent leadership as highly transformative. The Academy’s emphasis on peer support and group work fosters resiliency in the same manner as Outdoor Adventure Education, which encourage participants to support each other through various experiential learning experiences (Sibthorp et al., 2015).

Implications for BRL Programming

In sum, the current study found that BRL’s Academy utilizes a strengths-based model by attending to participants potential for success. The Academy provides
educational experiences to its members, and is clearly invested in their futures due to a commitment to helping members secure jobs or a path into a social work graduate program after Academy completion. This form of education offers an alternative form of education to the local universities and community colleges. In addition, it can also serve as further education or as a link between undergraduate and graduate careers, contributing to members’ increased knowledge of the field and a competitive edge as school applicants.

BRL’s approach to supporting Academy youth and Oakland youth who utilize their services provides many studied positive factors in their daily life. This includes support from staff members, a physical safe place to attend regularly, structure and routine, friendship, and mentorship. This study supports the implication for BRL programming of the need to channel assets and resources into the Academy to ensure its longevity. The study results highlighted the Academy’s position as an asset to the community at large, evident in members expressing their enthusiasm at sharing their work with others.

**Limitations**

Limits of the study include the possibility that participants had conflicting feelings about presented issues and chose to be discreet in what information they choose to share. Due to the small pool of participants, participant anonymity is compromised; although participants were aware that researchers would de-identify the data, participants are very familiar with each other’s experiences and beliefs, and this may have affected what information was shared.
The personal attributes and structural positions of researchers themselves likely impacted the findings of the study. Researcher bias includes the potential for researchers to be more bonded with specific Academy participants over others. Due to previous meetings between participants and researchers, some Academy members were more familiar with the researchers. This may have lead to some participants trusting the researchers more, which had the potential to lead to an increased amount of authentic or vulnerable information being divulged. It is also worth noting that that researchers are currently in their graduate program and that some Academy members are actively applying to graduate programs. This may have created a dynamic issue of a power differential that while not intended, was still present and likely affected the research.

It is also important to recognize that neither of the researchers are part of the community that the BRL Academy members are from. Due to this, it is possible that despite adopting a CBPR approach, the researchers may still communicate the results of the study from a perspective that is not completely authentic to the BRL community.

Other limitations include the limited application of the CBPR model. The current study utilized only two community collaborators who were chosen from the Academy. Furthermore, researchers only checked in with these two members throughout the research process for fact-checking, modification of interview and survey materials, and debriefing, and therefore the results may be limited in terms of the contributions of the CBPR model.

**Implication for Social Work Practice and Lessons Learned**

A strengths-based model used in a therapeutic community, like that of the BRL Academy, can pose as a model for best practice for group-based therapeutic intervention.
Due to the highlighted facets of a successful Hip Hop therapy program outlined in this study, other programs can learn from BRL’s Academy model to develop their own strength-based collaborative, group interventions. Agencies who want to provide alternative group therapy services may wish to draw upon the knowledge gained by this study. Informed by a therapeutic approach without the traditional therapy practices, the Academy demonstrates a model of group-based community intervention with minimal resources and illustrated effective outcomes.

This study also offers teachers and educators a model of a strength-based intervention that was highlighted as successful in the Academy. Clinicians would also benefit from studying this best practice model of highlighting clients’ strengths and exclusive knowledge of their own inner world. Through a strengths-based approach, other helping professionals can also impact the communities their clients return home to, as Academy members touched upon during interviews.

The next steps for this study are to continue exploring strong themes that emerged in the study and how they can be broadened to address the entire BRL agency as a whole. It is also advised to conduct further research on challenges of Academy retention, as several Academy members posed a challenge to contact due to taking time off from the program. Through interviews, it was also highlighted that some participants had Academy membership without regularity.

Additionally, as the first outside individuals to partner with BRL to conduct research, it was a challenge to construct a non-hierarchical model of research, as there was an educational power dynamic with researchers. Researchers sensitively attended to interviewees as experts and relied on their exclusive in-group knowledge of the agency.
In order to help make outside partnerships better in the future, researchers would benefit from integrating further with the agency, which could include attending more community events, shadowing staff members and sitting in on classes and meetings. This would need to be attended to in a sensitive manner in order to respect boundaries as researchers and not create unnecessary bias in the research.
References


In Hadley, S. & Yancy, G. (Eds.), Therapeutic uses of rap and hip-hop (117-128).

Routledge/Taylor & Francis Group.


Commisiong, S. (2013, October 26). How Hip Hop was bought and Rap was sold. [Blog post]. Retrieved from http://raprehab.com/how-hip-hop-was-bought-and-rap-was-sold/


doi:10.1037/14754-016

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| Reframing to a strengths-based model of resilience | 1. An important value at BRL is thinking about youth’s strengths and capacities. In what ways has BRL’s focus on strengths shaped your experience in the Academy?  
Probe: Can you tell me about a specific moment where the Academy focused on your strengths?  
2. How do you think this focus on strengths will influence you moving forward?                                                                                     |
| Valuing multiple forms of knowledge in a non-hierarchical manner | 1. BRL talks about *valuing different forms of knowledge*; for example, valuing knowledge from Hip Hop artists, clinicians, and community members. In what ways has the Academy demonstrated valuing different forms of knowledge?  
Probe: Can you tell me about a time when you felt the academy valued knowledge you have that hadn’t been appreciated in other contexts? What is the impact on you of having this experience?  
2. In what are ways have you had the opportunity to direct your own (learning) experience in the Academy?  
Probe: Can you tell me a specific time you were able to direct your own learning? How do you think having that experience shapes how you think about yourself and the knowledge that you do have? |
| Honoring client/individual as expert on themselves and their communities | 1. A BRL value is believing that members of the community have the capacity to heal themselves. How has the Academy demonstrated this value to you?  
2. Drawing from your personal experience, how has the BRL Academy worked with you to help you achieve your educational and future career goals? |
Appendix A: Consent Form

Smith College

2015-2016

Consent to Participate in a Research Study

Smith College School for Social Work • Northampton, MA

Title of Study: Individual Strength and Social Justice Development in BRL Academy.

Investigator(s):

Julia Fogelson, BA; Smith School for Social Work
Alfredo Laris, BA; Smith School for Social Work
Mamta Dadlani, PhD; Smith School for Social Work

Introduction

• You are being asked to be in a research study of the BRL academy and how the Academy supports Academy member’s development.
• You were selected as a possible participant because you are currently a member of the Academy or have been within the past year.
• We ask that you read this form and ask any questions that you may have before agreeing to be in the study.

Purpose of Study

• The purpose of the study is to understand what Academy members view as the most important aspects of the Academy, how the academy uses a strengths-based models, and how the Academy supports its members in subverting systems of oppression
• This study is being conducted as a research requirement for my master’s in social work degree.
• The findings of the study will be shared with the BRL community.
• Ultimately, this research may be published or presented at professional conferences.

**Description of the Study Procedures**

If you agree to be in this study, you will be asked to do the following things:

• Complete a paper survey
• Engage in a 1.5 hour semi-structured 1-on-1 discussion about your experiences in the BRL Academy
• Engage in a group discussion for approximately 1 hour.
• Consent to the audio recording of your discussion

**Risks/Discomforts of Being in this Study**

• Participation may lead to some discomfort due to sharing of personal experiences.
• Should this occur, you should utilize your supports within BRL to discuss your thoughts further
  • It is possible that if you decline to participate in this study, that program staff or other members may know this due to the nature of the non-private setting.

**Benefits of Being in the Study**

• The benefits of participation may include gaining insight, having an opportunity to talk about issues important to you, and contributing to possible published research on BRL.
• The benefits to social work/society are adding to the limited literature related to Hip Hop Therapy, Community Based Intervention, and defining best practices in the field of social work.

**Confidentiality**

• Your participation will be kept confidential. You will assigned an ID number and Pseudonym in any presented findings. Your name will not be used at any point.
• Surveys, interview recordings, and transcripts will be stored using your ID number and kept in a locked filing cabinet. The Investigators be the only people with access to recorded material. Audio material will be erased/destroyed through deletion after transcription is completed.
• All research materials including recordings, transcriptions, analyses and consent documents will be stored in a secure location for three years according to federal regulations. In the event that materials are needed beyond this period, they will be kept secured until no longer needed, and then destroyed. All electronically stored data will be password protected during the storage period. We will not include any information in any report we may publish that would make it possible to identify you.
Payments/gift

• You will not receive any financial payment for your participation.

Right to Refuse or Withdraw

• The decision to participate in this study is entirely up to you. You may refuse to take part in the study at any time (up to the date noted below) without affecting your relationship with the researchers of this study or Smith College.
• Your decision to refuse will not result in any loss of benefits (including access to services) to which you are otherwise entitled. You have the right not to answer any single question, as well as to withdraw completely up to the point noted below.
• If you choose to withdraw, we will not use any of your information collected for this study. You must notify us of your decision to withdraw by email or phone by May 1, 2016. After that date, your information will be part of the thesis and final report.
• Participants have a right to refuse to participate in the larger group or to individual interviews though it is highly encouraged that they participate in both.

Right to Ask Questions and Report Concerns

• You have the right to ask questions about this research study and to have those questions answered by us before, during or after the research. If you have any further questions about the study, at any time feel free to contact any of the following three researchers: Alfredo Laris, Julia Fogelson, or Dr. Mamta Dadlani. If you would like a summary of the study results, one will be sent to you once the study is completed. If you have any other concerns about your rights as a research participant, or if you have any problems as a result of your participation, you may contact the Chair of the Smith College School for Social Work Human Subjects Committee.

Consent

• Your signature below indicates that you have decided to volunteer as a research participant for this study, and that you have read and understood the information provided above. You will be given a signed and dated copy of this form to keep.

Name of Participant (print):

_______________________________________________________

Signature of Participant: _________________________________ Date: __________

Signature of Researcher(s): _______________________________ Date: __________

........................................................................................................
Since this study involves audio-recording, please sign either #1 or #2 below.

1. I agree to be audio taped for this interview:

   Name of Participant (print):  
   __________________________________________________________

   Signature of Participant: __________________________ Date: __________
   Signature of Researcher(s): __________________________ Date: __________

2. I agree to be interviewed, but I do not want the interview to be audio taped:

   Name of Participant (print):  
   __________________________________________________________

   Signature of Participant: __________________________ Date: __________
   Signature of Researcher(s): __________________________ Date: __________
Appendix B: HSR Amendment Approval Letter

February 19, 2016

Julia Fogelson
Alfredo Laris

Dear Julia and Freddy:

You did a very nice job on your revisions. Your project is now approved by the Human Subjects Review Committee.

*Please note the following requirements:*

**Consent Forms:** All subjects should be given a copy of the consent form.

**Maintaining Data:** You must retain all data and other documents for at least three (3) years past completion of the research activity.

*In addition, these requirements may also be applicable:*

**Amendments:** If you wish to change any aspect of the study (such as design, procedures, consent forms or subject population), please submit these changes to the Committee.

**Renewal:** You are required to apply for renewal of approval every year for as long as the study is active.

**Completion:** You are required to notify the Chair of the Human Subjects Review Committee when your study is completed (data collection finished). This requirement is met by completion of the thesis project during the Third Summer.

Congratulations and our best wishes on your interesting study.

Sincerely,

Elaine Kersten, Ed.D.
Co-Chair, Human Subjects Review Committee

CC: Mamta Dadlani, Research Advisor