

MOMENTS OF TRANSFORMATION

Rha Goddess's *LOW* and Understanding Social Change

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With Artist Reflections
by Rha Goddess

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Moments of Transformation

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It is really important to recognize that there are so many entry points to affecting change. One of the things I love about the arts is that it lets people enter on their own terms and can make the opportunity for greater civic engagement more accessible to us all. I think that's our hope and our aim.

—Rha Goddess

Artists who are dedicated to civic engagement seek to affect their audiences and communities around some issue, to bring about some kind of change. But how do artists know if they have made an impact? While audiences might be led down a path toward new insight, how do we know if they arrived there or not? This field study examines the work of performance artist Rha Goddess through two approaches to research in order to answer such questions.

As with most powerful artistic collaborations that have as their purpose civic engagement, the real story begins with the vision of the artist and the power of the art, as well as the way that the artist intentionally frames or roots their art in civic dialogue.

Rha Goddess—artist, writer, poet, and social activist—has developed a model of using the arts in civic transformation, coined Arts Based Civic Transformation (ABCT). Her performances—along with the related dialogue and activities that surround them—aim to empower individuals, communities, and

Art's Unique Role in Civic Engagement

Art allows audience members to confront subject matter on their own terms, safely entering the experience and offering their own interpretation and feelings. Art provides a visceral experience and can educate through emotional and kinesthetic connection. Art validates emotional engagement with an issue.

societies to affect positive social change. Beginning long before each performance, Goddess identifies key community organizations that fit with her mission so that she can collaboratively plan and offer activities and provide services and information to audiences. In particular, she seeks to engage those from the most marginalized communities, including immigrants, indigenous peoples, people of color, the working poor, and LGBT (Lesbian, Gay, Bisexual, and Transgender) people.

Goddess created *LOW: Meditations Trilogy Part I* as part manifesto, part family history, and part spiritual evocation. She unflinchingly depicts the very human reality of mental illness in our culture by fusing monologue, movement, and music to tell the story of Lowquesha, a vibrant young woman, and her all-too-common journey through the mental health system. The character of Lowquesha is at once present and real, but also metaphor for the larger societal barriers that exist for those who live with mental illness, including family and caregivers. The journey leads

audiences through the places she must encounter—from home to school to barista job to street to institution—and through the chain of people she encounters—family, teachers, boyfriends, employers, counselors, doctors, strangers, and mental health service providers. A single white sheet of material covers the floor and backdrop to create a continuous bare set with a lone white chair. Goddess performs the work with such intensity and conviction that she seems to become the character.

Arts-based civic engagement can:

Encourage public discourse about an issue or need, sometimes among specific groups of people.

Educate people about a particular issue or condition in their own community or society at large and raise awareness, insight, and empathy.

Lead people to both desire and envision responses and solutions to a societal problem.

Through this 75-minute theater piece, Goddess leads audiences to explore, and maybe even confront, the mythology, stigma, fear, and confusion surrounding mental illness. The piece highlights the social stressors that can precipitate episodes of mental illness and contribute to the decline of one's mental health. Goddess hopes the work will educate audiences, remove some of that stigma, spark dialogue around mental illness, and even shift attitudes towards people who live with mental illness and open eyes about hospital care.

The Hip Hop Mental Health Project (HHMHP), which Goddess co-founded with Dr. Peter Fraenkel¹, grew out of touring *LOW*. The HHMHP's primary purpose is to engage the Hip Hop generation at large, offering culturally relevant and empowering techniques to break the silence about mental health and wellness

and gain support and information. The project focuses on reaching young people of color in urban communities and those that provide support to them, as they are most detrimentally affected by disparities in mental health diagnosis, treatment, and care.

The artfulness of *LOW* lies in the manner in which Goddess subtly and compassionately shifts the focus to rest squarely on those who view it. At the end of the piece, she breaks the fourth wall with a closing monologue that shifts the audience's attention from the story onstage to the world around them. In discussion groups that immediately follow the performance, she hopes to create a safe space for audiences right there in the theater to confront issues around mental health that might not happen in another context. By having professional counselors lead these discussions and researchers document and evaluate their effectiveness, Goddess also hopes to create greater collaboration among mental health professionals, artists, and eventually those who might want to replicate this effort in their own communities.

Reliant upon presenting partners (in 15 cities to date) who book and promote the show and discussions, this collaboration expands and centralizes the role that presenters can play in the civic life of their communities and as a partner to human service organizations and other non-arts groups. Ultimately, HHMHP aims to demonstrate the ways in which art can foster civic engagement—or in this instance to build community and common purpose around the issue of mental illness—through collaborative planning.

Through performances such as *LOW* and its related dialogue, HHMHP seeks to:

- educate about the signs and symptoms of mental illness and tools for recovery;
- decrease the social stigma of mental illness, especially for those of lower incomes and of color;
- explore possible solutions to some of the life stressors that influence mental health;
- increase awareness of, and access to, mental health services and support; and
- impact public discourse about mental health.

In her vision for *LOW* and the conversations that surround it, Goddess has a clear concept of the ways in which art is an appropriate if not ideal channel for meeting her goals. First, art can make conversations safe by breaking the code of silence around a taboo subject like mental illness. Second, art provides a visceral experience and can educate on an emotional and kinesthetic level. Finally, art allows audience members to confront the subject matter on their own terms, allowing them to safely enter the dialogue and offer their range of opinions or feelings on the subject matter.

In fact, for Goddess, audience dialogue is a crucial part of her approach to arts-based civic transformation. It influenced the structure of her piece from the very beginning of the project. The inclusion of a post-performance conversation turned the table: rather than wait for audiences to ask the standard questions about the performance, the artist and facilitators chose and honed specific questions to foster dialogue with the audience.

A DUAL LEARNING OPPORTUNITY

It is rare for artists to proactively seek in-depth feedback from their audiences as an integral part of their artistic process. Standard audience surveys—asking questions about demographics and general impressions—tend to be distributed after a performance and may not be returned. Having captive audiences in the theater is an advantage, but developing mechanisms to capture deeper impressions from audiences—the kinds of reactions that HHMHP encourages—is a challenge, as is finding the resources, both human and otherwise, to ensure it gets done as the show loads in, tech happens, and the curtain goes up and surveys are completed. This challenge was taken on by the City

Evaluation and Research: Research Generalizes. Evaluation Particularizes.

Research. The term research is used in different ways. In science, research refers to information gathering according to rigorous standards with the goal that findings can be generalized to a larger population beyond any given study. For example, a new medical treatment would be tested with various populations of people before being released. However, within the arts field, the term is used more generally to refer to any information gathering. Creative research could lead an artist to travel to Africa to study indigenous music forms or to observe working conditions in a rural American community for incorporation into a new performance. While it may contribute to a growing body of lessons that can be shared, the results are not to produce a one-size-fits-all approach to residencies, choreography, or audience development.

Evaluation. Evaluation particularizes information gathering to a particular set of respondents, such as program participants or audiences. Often, evaluations have predetermined measures of success, but some leave findings more open to exploration, particularly if the program itself is in development.

Either way, information gathering should be designed to allow people to take action on that information. In order to be credible, both evaluation and research need to be conducted according to systematic procedures that control for bias. For guidance, refer to Suzanne Callahan's book, *Singing Our Praises: Case Studies in the Art of Evaluation*. (www.forthearts.org/publications/singing.shtml)

University of New York (CUNY) and Callahan Consulting for the Arts through two studies that have complemented each other and allowed Goddess and HHMHP to compare research processes that ask similar questions in different ways.

City University of New York

The first study was an IRB-approved pilot study² conducted with the City University of New York Department of Psychology. Created by Dr. Peter Fraenkel and now administered by Dr. Karen Singleton³, it was designed to research the impact of *LOW* on audience members' attitudes about mental illness immediately following the show and over time. The initial pilot study was conducted at select performances that were advertised as including a research component⁴. Audience members were asked to arrive at the theater early to complete a brief questionnaire and demographics form prior to seeing the performance. After the performance, professional counselors led a one-hour community dialogue and then broke the audience into small groups and encouraged them to share their reactions to the piece and impressions of how mental illness and health are defined in our society. Goddess hoped that the piece coupled with the subsequent dialogue might uncover, influence, and even change audiences' views on mental health and illness. (It is important to note that audience dialogue was so key to the project that the CUNY study included it as part of the intervention, along with the performance itself.)

After the performance and the community dialogues, the audience was asked to complete the questionnaire again. If they agreed to participate in a follow-up to the initial event, study participants received a questionnaire six months after the performance, along with a self-addressed stamped envelope. At both the time of the performance and at the follow-up, participants were given a list of mental health resources.

The CUNY study met two important levels of validity: 1) it used pre-tests and post-tests⁵ to attempt to isolate the treatment and intervention (in this case, the performance and post-performance dialogue) on the audience's viewpoints; and 2) it assessed for longer-term change at a later date. As with any research projects, some limitations emerged. Due in part to the necessity of numerous lengthy paper instruments and the amount of time that it would take on the part of the audience to participate (they had to arrive one hour prior to the show, stay at least one hour afterward, and hopefully consent to a follow up call months later), the CUNY study had a relatively low response rate. In addition, this study took place at five sites over two and one-half years, and the analysis and findings are forthcoming⁶.

Callahan Consulting For The Arts

The second approach was an evaluation conducted by Callahan Consulting for the Arts at a specific performance at the Clarice Smith Performing Arts Center at Maryland. The CUNY study of the performances were the culmination of a week-long residency coordinated by Jermaine Lewis, assistant manager, Cultural Participation, with numerous groups on campus, drawing chiefly from the women's studies department, as well as off-campus community mental health organizations. Students and others affiliated with the women's studies department and the Nyumburu Cultural Center attended residency events as well as the performances themselves.

At this performance in a black box space with 99 audience members, multiple strategies were used to encourage a quick feedback loop and a high response rate for both a one-page paper survey and discussion. Before the performance, staff from Callahan Consulting for the Arts and HHMHP

Participatory Evaluation

Evaluations can be structured in many ways. Callahan Consulting utilizes a participatory approach, which encourages artists and other stakeholders to be active in setting their own measures of success.

Multiple Measures

One of the most powerful tools to increase the validity of research and evaluation is the use of multiple measures. This case study illustrates how two measures were designed to learn similar things in different ways.

personally greeted nearly every audience member to let them know about the survey and offer an incentive for completing it—a penlight with an HHMHP slogan. At the start of the performance, the Center’s staff made a statement onstage to invite attendees to complete the survey and stay for the after-show talk, emphasizing the importance of responding and participating. After the performance, audience members were encouraged to fill out the survey, including an onstage reminder from Suzanne Callahan just after Goddess took her bow. At the post-performance discussion, for which an estimated 75 percent of the audience stayed, discussion leaders encouraged dialogue about the piece and again asked the audience to complete the survey. (Callahan Consulting’s evaluation design mirrored the CUNY study and incorporated an audience discussion as a method to gather audience response.) As audience members left, staff stood immediately outside the auditorium doors to gently yet proactively encourage the surveys’ completion, collect filled-out surveys, distribute penlights, and thank attendees.

During the after-show talk, Callahan asked several guiding questions similar to those on the survey. When Goddess joined the discussion, audience members had the opportunity to ask questions and provide feedback about the performance. A resource list about area mental health services was distributed to audience members with their playbill at all performances in all cities. The graphically pleasing design of the survey itself was intended to motivate audience members to complete it and included a reminder about the free incentive gift at the top of the page. (See sidebar, page 10, for the survey form.) These strategies proved successful in generating a nearly 98 percent response rate (see below). While this is an extremely impressive response rate, there was no pre-test, and this design did not allow for follow-up.

ART AS INTERVENTION: A CAUSE OF, OR CONTRIBUTOR TO, SOCIAL CHANGE?

Having art supported by two studies may be a problem that artists who work in social change want to have. It raises, however, the crucial question of what to ask and how to focus questions. When compared to other interventions, art and performance provides a unique method to communicate and educate people—which both studies of *LOW* embraced. Some of the larger research questions that both the CUNY study and the Callahan Consulting evaluation sought to address are included below.

How do we define impact as it relates to art? Is it enough for audiences to be moved by a performance? Must they be deeply challenged and engaged in a way that is mental, spiritual, emotional, physical, or financial?

Does such impact equal change or does it lead to change? Is it possible for audiences to be deeply impacted by a performance, but for that impact to be only temporary—for instance, not leading to change in attitude or action?

What causes people to make the leap from being impacted to a desire to act? How much is the artist responsible for making that happen, and how can we know the likelihood of it happening or not?

What can a project feasibly impact? What could it realistically influence, in either people's lives or the larger mental health system?

Finally, to what degree can we measure the degree of the project's impact? What would it require in terms of time, energy, and resources to determine the project's true impact? What could the project afford to research? And regardless of the assumptions about impact, what would remain unknown?

Indicators: The Signs of Low's Success

The more challenging question is how would researchers know if the above outcomes were attained? What is the range of indicators that show some personal transformation or education through the experience—in emotion, attitude, or propensity to act? Goddess and Callahan discussed these responses to the performance, along with the ways in which they could be measured. Each indicator can be seen as a yardstick, measuring the level of possible changes taking place within the audience at that moment from a scale of no change at all to various levels of learning about issues, to a level of engagement, interest, and education that might signify an emotional, ideological, or behavioral transformation.

Emotional response. Audiences might have some kind of emotional response to the performance. While their responses may span a range of feelings, it was hoped that they would feel something on a deep level.

Re-humanization. Audiences might see those dealing with mental illness as suffering from a very real condition, based on the portrayal of Lowquesha, a believable and typical character with mental illness.

Validation. Audience members who live with mental illness, or have been in and out of treatment but have never told anyone, might feel validated.

Reconnection to community. Audience members might share their own experiences with mental illness.

Moments of insight. Audiences would realize that mental illness has multiple and differing causes—more so than they assumed.

Interest in taking action. Audiences would desire to take action of some kind, such as communicating with a family member about their own mental health struggle, becoming more outspoken on the issue of mental illness, or simply telling other people about the event.

Connections to information and services. Audiences might read resource information and visit websites or seek out services because of new knowledge from the performance event.

Indicators

Indicators are the measurable elements that signify that change has occurred. They can be linked to one or more program outcomes. They address the question “if change had occurred, how would we know?” What would we observe, hear, or learn that would serve as evidence of change? Setting indicators is the most challenging part of most evaluations as they tend to be very specific to each project. Some indicators may consist of numbers (such as attendance figures) and may be easy to attain, but other more meaningful ones are more difficult to discern and must be obtained through an objective and systematic review of qualitative data. Some may not be evident until long after a program is over. Setting clear indicators makes it much easier to develop instruments to collect data.

The Results: University of Maryland Evaluation

[The performance] made me empathize with the guy on the street who asks me for change and the woman who is bandaged and banged up and makes me wonder what I can do to help them—not just volunteer for two hours, but do something real and long-lasting.

—Audience Member













Callahan Consulting's evaluation and the methods it used to increase response rates were designed to measure these indicators, drawing from a previous successful instrument⁷ it had created to deal with emotionally charged content. The evaluation featured an “emotion canvas,” a set of single words scattered across a two-tone box in a nonlinear way, ensuring that no particular emotion appeared to rank higher than any other. (See sidebar, page 10.) Other questions inquired about what insights, if any, audience members gleaned about mental health from the performance, and what actions they might want to take after seeing the show. In an effort to learn the degree of their empathy for the Low character, the survey also asked audiences about what they would have done if they were a character in the play.

After the performance at the Clarice Smith Performing Arts Center, data were analyzed using a thorough content analysis system that permitted staff to consider comments quantitatively and qualitatively. This system tracked the frequency of responses (such as the selection of an emotion) and also allowed the researchers to code all open-ended comments according to their meaning and then group those with similar meanings together for analysis. This two-part analysis covers the statistics (or in this case prevalence of responses) as well as the deeper meaning behind them (or themes that emerged from the coding process).

The comments and themes that appear in this field study were systematically analyzed and correspond to the major topics and overarching trends in the much longer full-length report. For instance, the field study mentions that three quarters of the audience selected “sad” as an emotion they felt during the performance, but the full report also includes the number of audience members who elaborated on why they felt sad, which moments saddened them, and some particularly powerful quotes about this emotion. The data clearly show the degree to which audience members connected with the performance, meeting nearly all of the indicators that Goddess outlined.

While this field study summarizes many of the essential points to emerge from the performance, the full report conveys the impact of the intensity and depth of audience comments, the specificity and deeply personal nature of responses correlating to life experiences, and the emotional quality of the post-performance discussion and survey answers, which reveal a sense of engagement and interest with the issues Rha Goddess explored in the piece, as well as the aesthetic and dramatic effects she used to explore them. As Jessica Rucell, HHMHP program coordinator, said, “It is also important to mention that even though [audiences] were really working [to process the emotional content of the performance], they stayed very engaged.” A snapshot of responses reveals this level of engagement and even transformation that was taking place for those who experienced the work.

The “emotion canvas” allowed audience members to circle emotions evoked by the performance and to record what particular elements of the piece induced these feelings. All the viewers who filled out a survey selected one or more emotions. Almost three quarters selected *sad*, and two-thirds circled *touched*. In addition, almost half selected *engaged* and *inspired*, with one third choosing *frustrated*.

AUDIENCES' FEELINGS			
		Response Total	Response Percent
Sad		63	71%
Touched		58	65%
Engaged		43	48%
Inspired		39	44%
Frustrated		29	33%
Helpless		24	27%
Angry		23	26%
Validated		14	16%
Empowered		13	15%
Others		13	15%
Hopeless		7	8%
Numb		5	6%
Total Respondents			89

Many respondents described the work as *humanizing*, indicating that they understood the inner life of Low and empathized with her situation. The range of feelings audiences experienced during the performance—including *sadness*, *engagement*, and *inspiration*—show a high level of emotional investment, especially as all survey respondents answered this question. The empathy of viewers also came through in responses such as, “I felt like one person caring for her, one person taking a stand for her would have made a big difference. I wanted to jump in and be that person.” Respondents also related to *LOW* in very personal ways. As one described in the post-performance dialogue, “The performance helped me understand what [my cousin is] going through.” Others described sympathy for those who are homeless.

Several audience members described the *validation* they felt when describing their own personal experience with mental illness or experiences with close family members and friends. One described feeling “like we weren’t the only ones.” Others in the audience who were members of the mental health industry felt inspired by the performance, such as one who wrote, “I do work on mental health issues. It [the performance] validates the importance of the work.”

Audience members also shared their own experiences in the post-performance discussion, providing what Goddess described as a *reconnection to the community*. Several audience members’ comments noted that the performance helped relieve for them some of the stigma around mental illness. Viewers recognized the importance of community cooperation and effort to help those with mental illness. One wrote, “We need to deal with this as a society. It is so prevalent and not talked about (taboo), not addressed.”

Response Rates

Researchers must ask themselves two important questions to gauge response rates: 1) Are those who responded representative of the entire population of those present at an event or program? 2) Who among our participants might not be represented, so that we can note those exceptions and how they may affect research findings?

Take a moment to reflect...

We are interested in the range of impressions you had of the performance tonight and what brought you here. Feel free to continue on the back.

... and take home a token of our thanks!

Return this completed reflection form to the table in the lobby and take your pick of a Hip Hop Mental Health Project penlight or another gift from the UMD Health Center.

Also, talk with us afterward.

Please stay for our community dialogue to tell us how you feel about the performance and find out more about mental illness. We want your voice to be heard!

Think back on the performance you just saw. What feelings did you have? Circle all words that apply, and feel free to jot down others.

inspired numb
 validated touched
 helpless frustrated
angry hopeless empowered
 sad engaged

Can you recall what moments, words, or ideas in the work sparked those feelings? If so, jot them above, next to the word, beside the name of the feeling.

What are any strong images you recall from the performance?

Did you have any new insights or reflections about mental illness based on the performance?

☐ Yes ☐ No
If so, what were they?

What would you have done? If you could have magically jumped into the performance, what role would you have liked to play? What would you have done or said? Who would you have brought with you into the scene? Or, would you have stayed away?

What now? Right now, is there anything that you would do related to what you saw tonight? Check all that apply.

- ☐ I will think about what I saw and heard about mental illness.
- ☐ I might talk to friends or family about this performance or mental illness.
- ☐ I might seek out new information or services about mental illness.
- ☐ I wonder if I could get involved with the cause of mental illness by volunteering, donating, or doing advocacy.
- ☐ I have another idea—here's what I am thinking about doing: _____
- ☐ I am not sure yet.
- ☐ I doubt I would do anything based on what I saw.

Did you see any things in the performance that seemed familiar—that you could identify with?

What were they? They might be things that reminded you of a friend or family member, or even of yourself.

In addition, one audience member specifically wrote about the way “mental illness is treated in Black and Hispanic communities,” pointing to the importance of the performance and its topic to communities of color.

Although many in the audience had first-hand experience with mental illness, over three-quarters *gained insight into mental illness*. Audience members’ engaged responses to the piece are striking, speaking to the power of the performance. Many viewers emphasized their unprecedented understanding of those with mental illness, one writing that it was “impressive to follow the life of someone and be privy to inner moments.” Others discussed the prevalence and stigma of mental illness, as well as the way society treats those with the problem; many condemned the tendency to overmedicate and provide “quick fixes” rather than consistent care, as one wrote. Another viewer, participating in the post-show discussion, said, “in African American culture, there’s not a lot of discussion about mental illness, so to see it represented was really exciting because the performance

will reduce the shame and stigma of mental illness.” Particularly interesting were the thoughtful responses of audience members about the premise in the piece that increased life stresses lead to greater occurrences of mental illness: One wrote, “I am interested in the belief that fractured communities accelerate illness.”

Impact

The term impact is used in many different ways. In evaluation, impact tends to mean the results over time for short and long-term outcomes.

Lastly, it is notable that over three-quarters *expressed interest in taking action* after seeing the performance. Whether these actions included talking about the piece with friends or family or trying to learn more about its issues, they would impact public discourse about mental illness and increase awareness and education—all outcomes anticipated by Rha Goddess. Several audience members had ideas to advocate for and help those with mental illness, such as one who suggested that universities should “provide employment to people with history of illness,” or others who wanted to pursue jobs or education “to change policies in regards to the justice system and diversion.” Viewers also felt it would be important simply to treat those they knew with mental illness with increased patience, love, and dignity. (See Appendix 2: Emotional Reaction: Statistics and Meaning.)

In these ways, the data from the survey and the post-performance discussions, not to mention high response rates, suggest a high-level of engagement with the piece and its content, as well as how meaningful it was for the audience that witnessed it.

I was so taken with how much detail we could get from one survey and the facilitation. It’s amazing. It verifies so much of what we have felt from the feedback we have gotten. This is on a whole other level. It also brings up questions of what has the most impact... Why did they think [what they did]?

—Jessica Rucell, HHMHP program coordinator

Rucell’s comment illustrates two common circumstances. One, the insight of artists and presenters is often correct, but evaluation can confirm their assumptions. Two, this new insight or confirmation can lead to an immediate desire to know even more. The findings from the CUNY study are forthcoming, but early reports show an almost identical incidence of the same themes.

Preliminary Results of the CUNY Study

The preliminary findings of the CUNY pilot study by Dr. Fraenkel⁸ were developed from data collected at five performance-research sites: the Kumble Center in Brooklyn (June 9, 2006), the Museum of Contemporary Art in Chicago (May 16, 2007), the Public Theater in Manhattan (January

15, 2008), the Adrienne Arsht Center for the Performing Arts of Miami-Dade County (May 9, 2008), and the Clarice Smith Performing Arts Center at Maryland (October 16, 2008). Of the 121 total participants⁹, representing a 23 percent response rate, about one-third identified as black and one-third as male. Many in the sample had already had some experience with mental health services—59 percent had undergone psychotherapy and 27 percent had been diagnosed with a psychiatric disorder.

As described above, the study asked a series of questions, both before and after the performance, about the perceived causes of mental illness and the efficacy of the health care system in treating those with a mental illness. The study found that participants' perception of biological factors or "inherited genes" as a cause of mental illness decreased after they had viewed the performance. Similarly, there was an increase in their perception of social factors as causes for mental illness, including racism, classicism, sexism, ethnic/religious discrimination, and immigration status. As might be expected, increases were also found in the factors "quality of neighborhood," "how you were raised as a child," and "experience of stress in life" as perceived causes of mental illness, while the factor "loss of life meaning" decreased. Participants' opinions of how well the health care system treats those with mental illness declined, along with participants' view of their own ability to support someone diagnosed with mental illness. One of the reasons cited for this decreased ability to care for someone with mental illness was money. Cost was also cited as a factor that might stop a participant from seeking mental health treatment, as was "concern that someone might find out."

Uses for This Research

It's funny...One of things people always ask in talk backs or conversations after the show is "how was it for you?" But to have the audience experience is for me phenomenal. To have that depth and specificity is huge. This is a sample of what it is like to view *LOW* thru the eyes of audience. It is a privilege to be able to do that.

—Rha Goddess

The research provides Goddess with insight into how her model affects audiences. This new evidence can influence future bookings and also how people think of art as intervention. The data can speak particularly to non-arts related partners who might be less familiar with Goddess and the value of arts in civic transformation. In particular, having the cachet of a CUNY study conducted by two credentialed clinicians, Drs. Fraenkel and Singleton, speaks loudly to the mental health field: these researchers' seal of approval lends Goddess validation and attention from the mental health community. It also answers important questions about whether art can work as a treatment in changing attitudes about mental health. Finally, Goddess can demonstrate to funders the importance of projects like *LOW*—how it has reached an audience and the potential for future impact.

One of the uses of any research project is to build upon what is known prior to initiating it.



The researchers themselves also learned quite a bit about what they would do differently based on some of the challenges they faced with this project. Fraenkel and Singleton began to question the length and number of paper instruments and how their use may be decreasing the response rate. In response, the number of instruments used was decreased. In addition, some of the questions were modified to more closely match Callahan Consulting's study and encourage respondents to answer them.

If she were involved in more post-performance dialogue, Callahan would alter the style in which it was facilitated. Her facilitation style was closer to the traditional talk back than needed. Many in the audience chose to identify themselves as having mental illness themselves or in their families, and some disclosed suicide in their families. Providing an environment to offer audience members support to honor these sometimes painful truths is crucial. Callahan would conduct future talks in a more sensitive manner and probably in conjunction with trained counselors.

A recent study in the *American Journal of Public Health* looked at issues that were in some ways similar.¹⁰ Researchers used community-partnered participatory research to survey two arts events—a photography exhibit and spoken word performance—in an African-American community in South Los Angeles. Collective efficacy was defined by the researchers as “a group’s shared belief in its conjoint capabilities to improve a problem in the community (in this case, depression care).” Community engagement for the study’s researchers “referred to the perception that individual problems (in this case, depression and mental wellness) are problems of the community as a whole.” Through statistical models, the researchers concluded that enhancing collective efficacy to improve depression care may be a key component of increasing community engagement to address depression.

ART AS CATALYST: LARGER ISSUES THAT EMERGED IN EVALUATING THIS ARTS-BASED CIVIC ENGAGEMENT WORK

So much of an artist’s dream is that you want people to feel something, wake up, be ignited.
But then what do you do?

—Rha Goddess

Knowing where people are and what could be done to assist them is paramount for Goddess, particularly since she insists on a work that is realistic, and therefore serious, in its portrayal of the illness. (She recounts stories of presenters who regularly request a show about mental illness that they “want to be funny.”) The artist is intentional about how *LOW* comes into communities, which, Goddess explains, gives them ideas about “how we engage [audiences] before and after. We can connect [audiences] with resources; we are with people who do that work every day. We can be bridge builders.” In each city, a list of resources and referrals to mental health agencies and other service providers is given to all audience members.

That said, Goddess is realistic about what she can—and cannot—accomplish with her performance alone. She cites a regular occurrence: “One common thing I hear [from audience members] is that ‘I won’t look at homeless people the same anymore’ and... ‘[It’s more than] the two hours of thanksgiving dinner handouts.’ We’ve been able to achieve that—to get audiences to think about mental illness and homelessness in a much more nuanced way.” Goddess also sees audiences as

Causation and Complexity

There is enormous pressure for arts programs, even modest ones, to scientifically prove that they solely caused certain effects. In most situations, this would be impossible, due not only to limitations in resources needed to conduct such studies, but also the presence of numerous circumstances that could influence findings. A more recent and accurate way of thinking is that arts projects contribute to, rather than cause, such change. Refer to Maria Rosario Jackson's essay entitled *Shifting Expectations: An Urban Planner's Reflection on Evaluation of Community-Based Arts* (http://AmericansfortheArts.org/AnimatingDemocracy/pdf/reading_room/shifting_expectations.pdf)

grasping the importance of community through the piece and the post-performance dialogues: audiences understand that they can take action “for people they know and love [as well as for] those they don’t know.” For her this is “a huge insight...If we can achieve that in a consistent way, I can go take a nap!” But, at the same time, Goddess feels that “I don’t think any one effort in any arena can claim 100 percent causation...My experience of large scale impact and change comes from the culmination of many localized efforts that are powerfully coordinated, networked, and leveraged over time...I see it as a continuum [as opposed to] simply a before and after.”

Goddess explains that audiences’ sharing of their own connections to mental illness “has been consistent, the most humbling and shocking part of it.

The intention was to really get people to understand not just on an intellectual or philosophical level [and]...that was an ambitious intention...but the courage people show has been a consistent thing... They were going out on a limb to share certain things.”

She situates the paradigm for this work in the context of how our society experiences mental illness. “None of us escapes this. Wellness is a continuum. Some days are better than others for all of us. That is what all of us are trying to work [toward]...a movement that has us wake up or think about well-being as a central part of our priorities and community...This was another theme that has emerged, and that was very intentional. We didn’t tell the communities [where we toured] that, but we wanted them to look at themselves as a resource, rather than to say ‘it is out of our hands’ [or] ‘what do *they*...versus what do *we*...need to do’ [and for audiences to view themselves as] instrumental in this.” Goddess goes on to explain, “We have been in 14 different communities with this work. [It has been] huge to watch *LOW* travel to these communities.” Singleton reports this level of engagement from mental health workers, who have stated that this “treatment” of a provocative work coupled with discussion works better than counseling in getting people to disclose their issues and pain related to mental illness.



As the research shows, Rha Goddess is on her way to achieving her goal. As she states, “[It’s about] getting people to think of their activism in a deeper way.”

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Artist Reflections on Evaluating the Hip Hop Mental Health Project

BY RHA GODDESS

As artists, I believe we all seek to make an impact. Whether we define it as social, political, or otherwise, we seek to engage our audiences in a meaningful way—be it through beauty, inspiration, agitation, provocation, etc. As an artist dedicated to social change, I wish to encourage greater citizenship. I want to encourage a world where “we the people” have a greater stake in our residency on this planet and in the relationships we have with the living earth, ourselves, and each other. I want us to recognize the power and fragility of life and the inherent value each of us possess as human beings. I want us to employ greater responsibility and better stewardship towards the tremendous resources that are available to us mentally, spiritually, intellectually, socially, financially, etc.

Because I am interested in tangible civic and social impact, it is imperative for me to evaluate and determine if my work is meeting its objective. I work in a methodology I call Arts-Based Civic Transformation (ABCT), which is an integration of interdisciplinary arts, personal transformation, and social political consciousness raising and action. The aim of ABCT is to use the creation and presentation of art to leverage new ways of thinking and being about self, community, and the world at large, and to increase the capacity of individuals and communities to approach pressing social issues from a place of vision versus victim.

When I was asked to participate in Animating Democracy’s Arts & Civic Engagement Impact Initiative, I was thrilled. I have tremendous respect for the work of Animating Democracy and its dedication to strengthening the field of Arts and Civic Engagement. Because I was already pursuing the question of arts impact on social change through an exciting collaboration with Dr. Peter Fraenkel and the City University of New York’s Department of Psychology, I felt the timing was perfect.

From the moment I decided to create *LOW*, my first question was “How are people going to respond?” Mental illness, particularly in our society, is such a dark and alienating topic. “This is not going to be pretty” was my next thought. Well then, “What’s your intention?” I asked myself. And that’s where this journey of evaluation begins. I was compelled to create this work because of the silence in my community. I had family members and very close friends who were suffering tremendously, and no one would talk about it. I knew that somehow I could use art to help break the silence.

I met Dr. Fraenkel at a conference for family therapists. We hit it off immediately. I shared about *LOW* and my intention to determine if art could somehow have an impact on this issue and more specifically could it help reduce the stigma associated with mental illness and encourage people to “come out” and talk authentically about the issue. He was excited and intrigued because, as an artist and psychotherapist himself, he was already engaged in similar work. We developed the research instruments in collaboration, and he secured IRB approval in the first round; this is rare, so we were very encouraged. Our dedication to exploring the efficacy of this model and making a difference in young, urban, and low-income communities of color inspired us to formalize the collaboration by co-founding the Hip Hop Mental Health Project.

Now, it is one thing to have a theory and another thing to evaluate and investigate its merit. My participation in both the CUNY and Callahan Consulting for the Arts studies was eye-opening

because both endeavors challenged me to think specifically and concretely about the kind of change I wanted to make through this performance and about what key indicators would be measured to determine success. The studies also encouraged us—Dr. Fraenkel, Suzanne Callahan, and me—to think deeply about the relationship between the performance, dialogue, and survey. We knew a traditional talk back would not foster the kind of courage, depth, and intimacy we hoped to achieve, so we explored how the context setting, dialogue questions, and facilitation could create a safe space and support people in really opening up. This process led me to understand the importance of orchestrating a *whole experience* versus looking at each aspect of the evening as its own separate activity. To this end, I hired Jessica Rucell, a strong community organizer, as the project coordinator to help strengthen the ABCT residencies and our community outreach and engagement.

In the process of these evaluations, two major insights emerged for us. The first came as we worked to articulate the mission of the Hip Hop Mental Health Project. As we shared our work with stakeholders from the mental health profession and social service sector, we found ourselves talking passionately about issues of stigma, disparity in diagnosis and treatment, cultural competency, and access to compassionate quality care as societal issues rooted in a legacy of inequity and a lack of personal and communal empowerment. Our colleagues—in sharing about their work—spoke in acronyms, clinical jargon, and focused primarily on the individual and their diagnosis. There were also clear lines of demarcation in terms of roles and perceptions of power and authority. The more we examined our respective approaches, the more we recognized that we were coming from a social justice and social change framework and it was important to frame our work in that way, versus engaging through a traditional clinical, public health, or clinical/medical lens that governed theirs. This shift created greater listening and enthusiasm for the fundamental differences in our arts-based strategy, culture, and perspective.

The second insight came after reading the evaluations and learning what it was like for audience members to engage with *LOW*. We'd hoped the performance would have a strong visceral impact because we believed that people needed to genuinely *feel* what it was like to struggle with mental illness in order to examine their relationship to the issue. Given the range of comments from audience members after the performance, we knew that the work was reaching people. However, with this realization came another very important question: "How do we take care of people once they open up and reveal themselves?" Many of the things people shared were painful and very personal, and we knew it was important for us to be fully present in the conversations, facilitate access to local resources, and to be available after the dialogue for those who needed additional support.

Our participation in the evaluations and working group has also influenced the way we talk about our work. Through the supportive research of Mark Stern and Susan Seifert, and their essay, *Civic Engagement and the Arts: Issues of Conceptualization and Measurement* (www.AmericansForTheArts.org/AnimatingDemocracy), we were able to better articulate the specific strategies we employ through the ABCT model. And finally, we have the data—quantitative and qualitative results we can share that illuminate the impact we've had on audience members.

If I had the opportunity to invest in more evaluation, I would incorporate mechanisms for qualitative and quantitative feedback in the total ABCT experience. In these evaluations, we focused specifically on the performance and the pre- and post-dialogues. The collaborations we build with community members on the ground, the empowerment-based training and development that happens with other stakeholders in the community, the people who sometimes host us in their homes or over traditional meals, and the ways we participate in the day-to-day environment all fuel our learning and strengthen our capacity to work effectively. The evaluation fully integrated would become a more natural, organic,

and fluid part of the experience; audience and community members would have genuine time and space to be with the impact of the ABCT experience and to authentically reflect.

I believe evaluation bears the greatest fruit when there is collaboration between the researcher/evaluator, those of us who are doing the work, and those we serve over an extended period of time. Our project was fortunate because we are all very collaborative by nature and willing to give each other honest and important feedback at crucial junctures in the process. I believe great evaluation, just like great art and activism, is about building trust and credibility with one another. It's also about engaging with evaluators who share your passion for the change you wish to make and can help you see opportunities to get better, just as you are able to hold the vision and the original intention that helps them shape the tools they will ultimately employ. The people we serve are also important in this equation because they are the experts in how the issue affects their lives. Having feedback on the evaluation process from audience members for us was extremely helpful in this journey.

Our big take away from this experience is the potential to refine and disseminate the ABCT model. Our first opportunity will be with Youth 'N Action, a consumer-based peer advocacy group in Washington State. As part of a therapeutic intervention, this group created a performance work to address the challenges associated with youth in transition—for instance, youth who age out of child behavioral health services at 18 but who are too young to begin adult services, which start at age 21. After experiencing a performance and workshop with the Hip Hop Mental Health Project in November 2008, this group decided that they'd like to use their piece as a tool for social change and develop a tour to engage key mental health service providers, legislative stakeholders, and the larger community in the issues affecting youth in transition. They have asked us to help them build out the residencies and train them to be strong spokespeople for this issue. Oh yea, and they want to have it all evaluated!

I believe that art has a tremendous amount to offer as an effective vehicle for encouraging greater civic participation and affecting positive social change. This is the fundamental theory that governs our work. My hope is that greater investments will be made in these kinds of collaborative evaluations by stakeholders who are interested in finding viable solutions for persistent social problems.

About Rha Goddess

Rha Goddess is a world-renowned performance artist, activist, and social entrepreneur. Her work has been featured in numerous international compilations, forums, and festivals. She has received rave industry reviews from *Time Magazine*, *Ms. Magazine*, *XXL*, *Essence*, and *The Source*, among others. As CEO of Divine Dime Entertainment, Ltd. she was one of the first women in Hip Hop to independently market and commercially distribute her music worldwide. Goddess co-wrote and co-produced the international hit “All Over The World” (Uptoyoutoo), which launched MTV’s Africa Channel. In her 30-plus year tenure as an organizer she has worked on issues of racial justice and equality, electoral politics, youth empowerment, offender aid and restoration, mental health, and young women’s empowerment. She is the creator and executive producer of the Young Woman’s performance movement, [We Got Issues!](#), and the [Hip Hop Mental Health Project](#). Honors and awards include: Meet the Composer, National Performance Network Creative Award, nominee for Tides Foundation’s Lament Fellowship in the Arts, semi-finalist in 2002 and 2005 for the Leadership for a Changing World awards program, 2001 semi-finalist of Do Something’s BRICK Award, and *Essence*’s Top 30 Women to Watch. Goddess is also a 2008 recipient of the National Museum of Voting Rights prestigious Freedom Flame Award for her outstanding work in arts and civic engagement.

Critically acclaimed, *LOW* premiered at the 2006 Humana Festival of New American Plays at the Actors Theatre of Louisville, KY, and went on to tour to the Theatre Lantaren/Venster, Rotterdam, Netherlands; 651 Arts, Brooklyn, NY; the Philadelphia Live Arts Festival, Philadelphia, PA; Cincinnati Playhouse in the Park, Cincinnati, OH; Hip-Hop Theater Festival, Brooklyn, NY; Pillsbury House Theatre, Minneapolis, MN; Under the Radar festival, New York, NY; Adrienne Arsht Center for the Performing Arts of Miami-Dade County, Miami, FL; the Clarice Smith Performing Arts Center at Maryland, College Park, MD; and VSA arts of New Mexico, Albuquerque, NM, and Carolina Performing Arts, Chapel Hill, NC.

About Suzanne Callahan, Callahan Consulting for the Arts

Founded by Suzanne Callahan in 1996, Callahan Consulting for the Arts helps artists, arts organizations, and funders realize their vision through a range of services that includes strategic planning, resource development, program evaluation, and philanthropic counsel. The firm has attracted a wide and growing client base of small to mid-sized arts ensembles, large institutions, presenting organizations, foundations, and national associations. The firm’s list of more than 50 clients include the Pew Charitable Trusts, Doris Duke Charitable Foundation, Dance/USA, National Performance Network, VSA arts, Urban Bush Women, and the Washington Ballet. Callahan is a published writer and regular trainer, college educator, panelist, and guest speaker. Published by the Association of Performing Arts Presenters, Callahan’s book, *Singing Our Praises: Case Studies in the Art of Evaluation*, was awarded Outstanding Publication of the Year by the American Evaluation Association for its contribution to the theory and practice of evaluation. She has also been published in the areas of fundraising, planning, and philanthropy, and in print media such as *The Chronicle of Philanthropy*, Theatre Communications Group (TGC) *Centerpiece*, *Dance/USA Journal*, and *Inside Arts*. Callahan holds a master’s degree in dance education, a certificate in fundraising from the George Washington University (GWU), and a bachelor’s degree in social policy from Northwestern University. She did post-graduate study in program evaluation and research methods at GWU and also studied evaluation through The Evaluators Institute of GWU.

APPENDIX I: GUIDELINES AND LESSONS LEARNED FOR EVALUATING ARTS-BASED CIVIC ENGAGEMENT

BY CALLAHAN CONSULTING FOR THE ARTS

Planning strong residencies and effective evaluations can go hand in hand. Below are lessons learned from planning and evaluating this and other artist-driven projects.

Begin with the artist's vision and intention for their work. Evaluation should honor that vision, follow its intent, and attempt to measure the degree to which that vision is realized.

Foster relationships with a range of strong partners who believe in the artist's vision. Select those who will support the work and, if desired, the research and evaluation of it. If the partnerships do not allow for this commitment, then lower your expectations for the evaluation or even consider not doing it.

Invest time in planning the evaluation and building agreement among stakeholders. Determine what will be possible given resources, interests on the part of partners, and even limitations that might be set by the venue or format. Determine what the partners most wish to know and what resources they can contribute. The response rate to an audience survey can depend largely on logistics, such as having access to partners' volunteers or staff that can be present at all exits in a theater.

Define and hone your indicators. Ask stakeholders—including the artists—tough questions about what impact would look and feel like if it happened. Clear indicators make it much easier to create data collection instruments when it's obvious who needs to be approached and what needs to be asked to measure them.

Use a range of incentives to creatively encourage participation and response, both in number and in depth. These might include complimentary tickets, giveaways, or food.

Think about what change means in relation to the project, and what is realistic to measure in the short and long term. Bear in mind the reality that many programs might contribute to long-term change, but few programs, particularly if they are of short duration, can solely cause that change. The cost of measuring long-term change can be prohibitive for most organizations. It is particularly challenging to isolate how one of a variety of circumstances or programs could be responsible for a widespread change. Outcomes can vary widely from project to project and should be determined by stakeholders.

Take care of respondents. Surveys and interviews ask audiences to give us something. Take into account where audience members may be emotionally after a powerful performance. The process of asking and receiving responses to tough questions can bring up memories or unresolved issues for the audience. Think ahead about how people are likely to respond, what they will need, and how they can be supported. One of the purposes of IRB is to ensure that people are not harmed during the research process. Even outside of IRB studies, the principle of "do no harm" should be observed. If there is a good chance that audience members will experience harm from an evaluation, then it probably should not be done. Researchers can consult IRBs or other professional researchers for guidance.

Pay attention to principles of good research design and seek guidance if necessary. Both teams that evaluated Goddess' performances of *LOW* talked to each other. Issues such as sample size and research format matter. Ask yourself how representative the responses are from those who submitted a survey and from those who did not.

Some of the most meaningful responses may not be fully captured in numbers. Qualitative data are crucial in revealing the meaning behind the statistics of audience response. However, in order to be credible the data must be gathered objectively and systematically.

APPENDIX 2: EMOTIONAL REACTION: STATISTICS AND MEANING

The comments from audience members who participated in the Callahan Consulting-facilitated performance of *LOW* connect the quantitative findings from the “emotion canvas” to the qualitative findings—the meaning behind the numbers. This is an example of how qualitative data can be systematically analyzed. In addition, comments also reveal the depth of emotion and meaning experienced by audience members in response to the performance and from the post-performance discussion.

Of those who selected emotions, 24 percent (21) also elaborated on what moments or aspects of the performance evoked those feelings. While some responses referenced specific events from the performance, others focused on larger issues related to mental illness. The most frequently discussed feelings included the following:

***Sad* (elaborated on by nine audience members).** Viewers who discussed feeling *sad* most often referenced the scene in which Low’s mother refuses to let her come home, interpreted by audience members as “mother’s abandonment” and “being kicked out by the mother.” Others attributed their sadness to more general ideas—“that people have such pain and struggle,” as one viewer wrote, or that “there are so many people like this,” another said.

***Angry* (7).** Viewers felt *angry* during scenes when Low was forced to exchange sex for money or food. One viewer referenced the scene in which a man demands sex “so that [Low] could use the bathroom.” Viewers also felt particularly angry during scenes of conflict with Low’s mother and sister and at various institutions related to mental illness, such as hospitals, over-medication, and “the broken mental health system,” as one viewer wrote.

***Frustrated* (7).** A similar number of viewers discussed feeling *frustrated* by various obstacles in Low’s life, such as lack of understanding from family members and ineffective mental health resources. One viewer questioned, “How can we help these beautiful, troubled people?” while another wondered “why people can’t see or empathize” and if “there isn’t help available, where does she go?”

***Inspired* (7).** Viewers reported feeling *inspired* by Low’s character, one writing about “her courage to keep fighting to the end” and another that “she tried to make it from the streets.” Others felt inspired by the message of the performance, including that “love is a way to communicate and educate.”

***Engaged* (5).** Respondents discussed feeling *engaged* throughout the performance by the plot and story. One wrote, “I was drawn in by the performance and the relationships displayed onstage.”

***Helpless* (5).** Viewers felt *helpless* during various episodes of Low’s struggle with mental illness, including her hospitalization, homelessness, and conflict with family. One wrote of the helplessness of taking medication for mental illness: “Damned if you do, damned if you don’t.”

Touched (4). Respondents felt particularly *touched* by the strong emotions presented in the performance, including “honesty and vulnerability” as one viewer wrote, or “[Low’s] pain and suffering,” another said.

Validated (4). Viewers reported feeling *validated* by different scenes in Low’s life, such as her family conflicts and her outburst in the classroom. Others found validation in similarities to their own lives, one writing, “I saw myself, having been homeless and mentally ill for a few months in 1995.”

Emotional Resonance for the Audience

In the evaluations, audience members wrote of their responses to the performance and the post-performance dialogue.

Very real and powerful

A very good demonstration of how people do not end up the way they are overnight, but it is a progression of experiences going back to their childhood that culminate in their mental disorder.

Some people are where they are not always because they want to be. They need someone to be there and care.

Our society would rather drug and confine or reject mentally ill people than love them.

The biggest thing is the awareness. A lot of people are not aware how prevalent it is in their community... That’s why it’s easy for us to walk past the man on the street or the girls in the JV system being medicated. That is something big because we can pass people off as crazy, but when you are in their mind understanding what is going on it is totally different.

Mental health is a continuum and there is mental health and illness and we are all somewhere on the continuum... Saying a person is bipolar is not the same as saying a person is experiencing something. Talking too much about diagnosis blurs the fact that people need to be helped and can recover.

How can this be geared toward a younger generation?... I think children need to be exposed to this earlier so that they can begin to understand, sympathize, and realize that if they are experiencing something like this, they are not alone, can have hope and a place to then get help.

Endnotes

1. Dr. Peter Fraenkel has more than 25 years of experience in the field of human development, specializing in couples and family therapy, community-based program development, and qualitative research. He is an associate professor in Clinical Psychology at the City University of New York and director of the Center for Work and Family at the Ackerman Institute for the Family.

2. An IRB (Institutional Review Board) is a body that is formally designated by an institution—hospital, university, federal agency, etc.—to approve, monitor, and review biomedical and behavioral research involving humans with the aim to protect the rights and welfare of the research subjects. Studies that are approved by an IRB must meet rigorous research standards and often take place over a long time period. For these reasons, it can take many years from the formulation of research questions to the public release of findings, often published in peer-reviewed journals that inform theory, practice, and additional research. While other arts-related studies may not be required to go through a formal IRB approval, they nonetheless can (and many do) adhere to similar standards.

3. Dr. Karen Singleton is a clinical psychologist in private practice in New York City. She also serves as an adjunct professor at Beth Israel Medical Center and teaches courses in multicultural psychology. She specializes in trauma, particularly resilience in survivors of childhood sexual abuse, sexual assault, and relationship violence, and works with Black women who are survivors of trauma.

4. Recruitment efforts varied from city to city. Postcards were printed and distributed in a variety of locations. It was promoted during outreach activities. In some cities radio interviews included mention of the study. It could not be included in season brochures or on ticketing websites.

5. Pre- and post-tests attempt to isolate the treatment, or intervention, from other variables that could influence the research.

6. For information on the forthcoming study, visit the Hip Hop Mental Health Project online at www.hiphopmentalhealth.org or write to Dr. Peter Fraenkel, Department of Psychology, Room 7/I20, NAC Building, City College of New York, Covenant Avenue and 138th Street, New York, NY 10031.

7. Callahan Consulting created a similar type of survey instrument for the Covenant Foundation's evaluation of a work by Liz Lerman Dance Exchange entitled *Small Dances About Big Ideas*.

8. As of the publication of this case study, the findings had not yet been submitted to a peer reviewed journal.

9. The response rates per city are not yet available, but likely range from ten to 20 percent for the phases that occurred in the theater.

10. Bowen C., Jones, L., Jones, A., Corbett, C., et.al. (2009, February). American Journal of Public Health. "Using Community Arts Events to Enhance Collective Efficacy and Community Engagement to Address Depression in an African American Community." American Public Health Association." Vol. 99, No. 2, 237-244.