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The Effects of Hip-Hop and Rap Music Intervention to Improve the Wellbeing of Black and African American Men

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THE EFFECTS OF HIP-HOP AND RAP MUSIC INTERVENTION TO IMPROVE THE WELLBEING OF BLACK AND AFRICAN AMERICAN MEN

by

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Dedication

I dedicate this dissertation to my children: Alonnie, Joelle, and Justin for being my why and inspiration to complete this program. I hope and pray that my children see my hard work and dedication as inspiration to achieve their dreams. I also dedicate my dissertation and doctoral experience to my husband, Isaiah Jefferson. I thank him for being a good friend and husband, and sacrificing so much. I dedicate my entire educational experience to my parents, Jasper and Desiree Lykes. Because of you, my family has been able to dream big and make those dreams a reality. It is because of your sacrifices and support that I was able to complete this program.

Acknowledgments

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Abstract

Wellbeing affects an individual's functioning regarding personal, interpersonal, social, and overall wellbeing (Tennant et al., 2007). This study investigated the wellbeing of mental health among African American college-aged men by reading hip-hop and rap lyrics (Gonzalez & Hayes, 2009). The study explored the effects of reading hip-hop and rap lyrics on Black and African American college-aged men's wellbeing. Through peer review articles, this study investigated the effects of reading hip-hop and rap lyrics on the wellbeing of Black and African American college-aged men. The researcher identified the lack of research on wellbeing and marginalized communities, specifically Black and African American college-aged men. The purpose of this dissertation, consisting of a systematic review and one multiple single baseline case study was to: (a) provide an overview of current empirical research utilizing hip-hop and rap in counseling, (b) create a manual to assist with implementing hip-hop and rap as a treatment intervention, and (c) test the effectiveness of the treatment intervention to assist counselors with a new culturally-relevant intervention to increase well-being in Black and African American college-aged men. The systematic review identified current research that utilizes and implements hip-hop and rap music through empirical studies with suggestions, different populations, and outcomes. The intervention can be implemented with Black and African American college-aged men to improve overall well-being. The researcher used a single case research, specifically the multiple baseline design with visual analysis, to determine if there was an effect when the intervention was implemented.

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Chapter One: Introduction

Introduction to the Study

Client functioning measures a person's health to address overall functioning (Manwell et al., 2015). Client functioning or mental health can be explained through the interaction of individual, interpersonal, social, and overall wellbeing (Tennant et al., 2007). Wellbeing is a term utilized in mental health as it grows in popularity among professionals to address individuals' ability to live to their full potential (Tennant et al., 2007). Wellbeing focuses on feelings of positivity and provides an internal reflection of capability and self-efficacy to compact negative biological, sociological, and environmental factors (Manwell et al., 2015). The term continues to increase, and programs focused on wellbeing are increasing in university settings, among college-aged individuals (Manwell et al., 2015), and in psychotherapy practices.

Positive wellbeing is accepting oneself, maintaining good relationships, and overall good health (Bhugra et al., 2013). Wellbeing addresses how people look at themselves, others, and the world (Watkins et al., 2017). Mental health wellbeing implies that an individual has healthy functioning levels in their physical and social spheres and general health, along with positive coping skills for potential stressors (Bhugra et al., 2013). Negative wellbeing affects a person's ability to find adequate coping skills to improve in areas that may have adverse effects (Bhugra et al., 2013). A person's

wellbeing is measured by their ability to function with self-care, emotional regulations, and overall positive health (Bhugra et al., 2013).

Wellbeing is influenced by emotions that can be positive or negative (Pierce et al., 2018). It is imperative to address the definitions of wellbeing to understand that wellbeing differs from addressing a mental health concern. Mental health concerns for psychological anguish negatively impact a person's mental health and diminish their functioning and potentialities (Barkham et al., 2019).

Wellbeing

Personal functioning addresses a person's perspective of their functioning (Coyne et al., 2020). Social wellbeing factors coincide with a person's ability to function within their environmental factors (Manwell et al., 2015). Interpersonal wellbeing addresses a person's perspective of how they relate with close relationships and family (Goodwill et al., 2018). Overall wellbeing is a general understanding of an individual's health (Goodwill et al., 2018). Social wellbeing factors align with healthy communication skills and cheerful friend and family relationships (Bhugra et al., 2013). The research highlights that lack of social stability could lead to poor mental health outcomes (Villegas et al., 2021). Stigmas surrounding mental health can lead to a lack of treatment and the person suffering not wanting help with their level of functioning (Villegas et al., 2021). Within the social environment is the impact of one's culture on one's mental health functioning (Bhugra et al., 2013). Cultural variables are unique to the individual, such as the impact of media on sense-of-self and barometers of normalcy (Watkins et al., 2017). More

importantly, if a particular culture or group of people feel excluded from mental health, it could lead to isolation and social barriers (Villegas et al., 2021), which could affect their interpersonal spheres and interfere with their everyday functioning (Coyne et al., 2020).

The Problem Statement

Wellness and mental health are stigmatized in many cultures (Pierce et al., 2018). Additionally, positive wellbeing is under-studied among Black and African American men. It can often lead to biases and ill health care treatment due to individuals' attitudes and ideas about wellbeing and those suffering from mental health concerns. This idea has led to social conflicts and excluded individuals in the wellness and health discussion (Villegas et al., 2021). This also has led to minimal mental health resources in the community and a lack of intense cultural training for future counselors because of the lack of exposure and alliance opportunities that the counselors have with the population. The lack of representation of minority counselors can lead to mental health stigma in the Black community, such as a stereotype that Black people do not have mental health issues (Pierce et al., 2018). This underrepresentation has led to a lack of theories, research, and interventions with empirical cultural context, which continues to keep a cultural gap in the counseling profession (Villegas et al., 2021).

Research shows that mental health disparities among Black/African American men continue to increase. According to Kresovich et al. (2021), the suicidal rates among the said population have increased by 60% since 2021; however, research does not

support how Black and African Americans cope with or address their wellbeing. Black men of various ages have a stereotype of being angry and violent. Black men often work hard to maintain the talk and physical showing of emotions around others to minimize the possibility of being profiled or deemed "an angry black man." The term "angry black man" can be considered to keep a Black man's emotions at a minimum, leading to emotional stress and other mental limitations. Society has not provided a space to express their emotions safely without prosecution. This is due to factors that affect disparities in marginalized groups such as Black men, which results in unstable wellbeing and lack of research.

Nature of the Studies

Study 1

The purpose of the systematic review was to identify hip-hop and rap music interventions that have been empirically studied in counseling and create a summary of the intended outcomes of research studies that integrate hip-hop and rap music interventions in counseling to understand their effects. Also, to critically appraise the available research studies to date to assure quality based on the Mixed Methods Appraisal Tool (MMAT). Most hip-hop and rap music interventions were used with adolescents and other marginalized communities. The interventions included writing lyrics and incorporating feelings and emotions into the music. Researchers reported that integrating hip-hop and rap music in counseling benefited the population's mental wellbeing and

increased emotional awareness and empowerment. More research is needed on using hip-hop and rap lyrics in counseling settings.

Study 2

The purpose of this research study was to implement the reading of hip-hop and rap lyrics as a mental health intervention utilizing a quantitative study through a single case design, specifically multiple baselines. The research may add to the understanding of the effects of hip-hop and rap lyrics intervention on the wellbeing of college-aged African American males (Armstrong & Ricard, 2016). Discovering mental health interventions promoted through arts, specifically hip-hop and rap, promote overall mental health among college-aged Black and African American men (Adjapong & Levy, 2021). This study aimed to raise awareness by promoting wellness-based mental health experienced by Black and African American men. More research needs to be done to address issues in marginalized communities, such as promoting wellbeing. The following research question was used in this study.

1. Does the reading of hip-hop and rap lyrics intervention improve overall wellbeing for Black and African American college-aged men? The research question was measured by ORS and SWLS.

I hypothesized that the reading hip-hop and rap lyrics intervention (independent variable) will improve overall wellbeing (dependent variable), evident through the outcomes rating scale and the satisfaction with life scale.

Assumptions, Limitations, and Scope

There were limitations. The counselor who implemented the study created the manualized intervention, which could result in biases for generalization purposes. The visual analysis used to discuss and understand the data interpretations was subjective. The intervention was implemented during end-of-the-semester responsibilities and holiday festivities. One counselor was administering the counseling sessions, including implementing the intervention, which may have resulted in bias and generalizing as it pertains to the results.

Single-case research involves the manipulation of an independent variable to explain causation. Single-case research assumes the intervention has social significance (Lewis, 2022). The scope of this design is based on strong validity due to the very small sample size required for single-case research.

Significance of the Study

Mental health counselors have ethical obligations to be social justice advocates through training to promote social changes (Washington, 2018). More culturally competent mental health tools are needed to address the distinctive experiences of the African American community (Robinson et al., 2018). African Americans need healthcare tools and interventions that reflect their culture (Robinson et al., 2018). With this evidence of understanding a need, counselor education and training need to continue developing and addressing new strategies to improve engagement in mental health services (Robinson et al., 2018).

However, the need for research and adequate mental health treatment in marginalized communities is not being addressed (Sellers et al., 2011). Scholars have addressed the need to address the lack of cultural competence within the mental health profession. Although classes, training, and ethical guidelines are mandated, there is still a lack of change and persistence (Sellers et al., 2011). Counselor education and other psychology professions are encouraged to expand the importance of doing social justice and express the imperativeness of training and research. Social justice also means finding effective treatment and modalities to use with marginalized communities. This includes being open to interventions that may be culturally different and appropriate.

Through music lyrics, counselors can work on discovering the gap in the wellbeing of Black and African American men through mental health (Adjapong & Levy, 2021). Using hip-hop and rap shares a social contribution to change by working to identify the cultural gaps (Adjapong & Levy, 2021). Hip-hop is a culture within itself and has been a significant vocalized expression of experiences of Black men's social and political vacation (Washington, 2018). Studies show that over 50% of races, including Black, Whites, and Hispanics, listen to rap music (Robinson et al., 2018). Knowing these numbers is a gap as to why counselors are not providing themselves with the hip-hop culture to not only enhance cultural change within the counseling profession but also promote social justice (Robinson et al., 2018; Washington, 2018).

Chapter Summary

Chapter one was an introduction to wellbeing. The literature review assisted with identifying the purpose of the two studies, research questions, and hypothesis. Chapter two is an extensive literature review of articles that align with the theoretical tenants of

wellbeing and the tenants of the intervention. Chapter three incorporates a systematic.

review outlining the procedures used to examine research that includes hip-hop and rap in

the counseling setting. Chapter four outlines the implementation and effectiveness of hip-

hop and rap intervention using a manual.

Chapter Two: Literature Review

Introduction

Chapter 2 examined and explored literature review studies that discuss wellbeing among Black and African American college-aged males. The chapter explored relevant research that examined wellbeing and how to improve wellbeing through hip-hop and rap music. A review of the literature consists of various research methods that include wellbeing, music, hip-hop, and rap as it relates to counseling and the population being studied. The databases screened for articles included Academic Search Complete, Ebscohost, APA PsycInfo, APA PsycArticles, Education Resources Information Center (ERIC), Social Science, and Social Work Abstracts. The search terms included 'Interventions,' 'hip-hop' OR 'rap' music, 'mental health,' and 'counseling', 'wellbeing', 'wellbeing in black people', 'African Americans', and 'marginalized communities'. I adjusted the years from 1985 to the present. The research question that guided the literature review findings was: Does the reading of hip-hop and rap lyrics have an effect on overall wellbeing?

Wellbeing

There is evidence within the research that wellbeing among the population is overlooked, and counseling professionals are aware of the retention and broken alliance. However, the lack of research does not support the corroboration of change. The lack of collaboration within the counseling profession continues to shine the light on the cultural gap and lack of multiculturalism. The chapter is organized into the following sections:

philosophy of study, search strategy, social significance, professional application, theoretical model, and study aims.

According to Watkins et al. (2017), Black men aged 34 and under appear to have higher psychological stress than Black men over 35 years old. These concerns require special attention in the mental health profession to improve the population's mental health concerns and wellness (Watkins et al., 2017). However, the actual negative effects are hard to scientifically gauge because of the Black community's insecurities regarding healthcare (Watkins et al., 2017). Historical events have led and continue to lead due to the absence of subject study participants, but not due to deceit and lack of rapport (Washington, 2018). One can attest that disparity due to discrimination, stereotypes, and racism has led to the Black community's lack of healthcare trust. The research and empirical studies on the Black community, specifically Black males, are scarce with mental health data. Most research about Black men addresses HIV/AIDS or same-sex relationships (Watkins et al., 2017). There is little research on the wellbeing of Black men and minimal research on a therapeutic alliance to assist the community.

Media and Wellbeing

The increased awareness of wellbeing and mental health awareness in college-aged students continues to grow and increase with the help of various media waves (Barkham et al., 2019). Media, including music, is multi-faceted and considered one of the most inspirational ways to get through to generations (Watkins et al., 2017). For years, researchers have studied the effects of social media and its impact on mental health

(Coyne et al., 2020). Through empirical research, mental health in the media shows more evidence of connection (Kaler et al., 2020). The population appears evident, mainly college student populations (Kaler et al., 2020). Media continues to become increasingly important for individuals' perceptions, how they perceive themselves, and how they perceive others (Richards et al., 2015). Traditionally, media was used for informative purposes, but now, it helps people depict what wellbeing should look like and be (Richards et al., 2015).

The effects of media still vary, and most individuals start to use it for coping strategies rather than asking for help or leaning on their supportive systems (Richards et al., 2015). Music is a multi-media facet that is universally used by many. African Americans, White Americans, and Hispanics reported listening to music and using it for coping. Furthermore, the same population reported over 50% of the population listens to hip-hop and rap music (Washington, 2018). Music is a strong and influential art form that can improve wellbeing and be used by many. Most of the population agrees with the genre, further indicating that hip-hop and rap can be used as therapeutic tools (Adjapong & Levy, 2021).

Wellbeing Interventions

Mental health counselors utilize interventions that build solid rapport, which is essential to creating a strong, trustworthy therapeutic alliance (Armstrong & Ricard, 2016). Interventions should be therapeutically appropriate and considered carefully on an individualized basis (Tennant et al., 2007). With this notion, interventions need to be

considered in a cultural context as well (Gonzalez & Hayes, 2009). Interventions improve overall wellbeing and decrease mental health concerns and stressors (Tennant et al., 2007). There is much research on using early intervention to improve emotional wellbeing (Adjapong & Levy, 2021), and research shows that being exposed to emotional wellbeing at a younger age can improve interpersonal skills for overall functioning (Armstrong & Ricard, 2016). However, there is not much research on the mental wellbeing of Black and African American individuals, specifically college-aged Black and African American men.

Marginalized groups, including Black and African American men, face challenges that negatively affect their wellbeing (Outten et al., 2009). Studies show these negative effects are from discrimination, race, stereotypes, and socioeconomics (Pierce et al., 2018). These challenges and biases have led to not having empirical wellbeing interventions performed and studied by researchers for the population to help with any disparities within the community (Outten et al., 2009). Black men's presence is scarce in mental health, which could be a plausible reason for minimal research (Pierce et al., 2018). Rapport and retention of Black men in mental health is affected because of the lack of cultural interventions to understand the population's uniqueness and improve participation outcomes (Washington, 2018).

There is little research utilizing other music genres and their effects (Rahman et al., 2021). Research suggests using the arts to promote creativity and prompt emotional responses for self-reflection (Ohrt et al., 2009). Music has been shown to slow down the

flow of cortisone and relieve or reduce stress. It has been proven to decrease most negative symptoms, such as anxiety and depression (Rahman et al., 2021). Music is also a way to stimulate focal responses (Rahman et al., 2021). Music stimulates gamma rays in the brain and improves cognition, according to Rahman et al. (2021), in a study done during mental health sessions using classical music. Schuldt and Silverman (2020) discussed using intervention notes as lyric analysis, which use song lyrics to prompt therapeutic conversation, usually performed in adult settings (Schuldt & Silverman, 2020).

Music as Therapy

In adult settings, music therapists use song lyrics as an evidence-based approach to foster therapeutic relationships and improve functioning (Ahmadi, 2011). Some of the interventions used by music therapists include analyzing the lyrics for emotional coping through listening to music and/or reading lyrics (Ahmadi, 2011). Music lyrics can provide a new way of thinking and understanding by connecting people (O'Callaghan, 2004). It is a great coping mechanism that improves emotional regulation and cathartic experience (Ahmadi, 2011). Additionally, music contributes to many mood changes in our minds (Ahmadi, 2011; O'Callaghan, 2004).

Studies show that music is beneficial when treating mental disorders and wellbeing (O'Callaghan, 2004). Although music has been used in therapy as an intervention for over a decade, studies show that other genres outside of classical music rarely get explored (Rahman et al., 2021). Therefore, using music and its lyrical content

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in therapy is not a new technique. However, using hip-hop and the rap genre to promote mental health in therapy is on the horizon (Gonzalez & Hayes, 2009). Hip-hop and rap were created in marginalized communities and continue to struggle with recognition, let alone being recognized as evidence-based practices for mental health treatment. Gonzalez and Hayes (2009) suggested a unique social skill in using lyrics from rap music as a therapeutic intervention due to the underlying themes found in rap lyrics and can enhance the relational aspect using cultural relevance. It is a tool to add to the lack of cultural responses in the therapeutic relationship (Adjapong & Levy, 2021). However, hip-hop and rap have a variety of populations regarding race and ethnicity. Black/African American males dominate the culture as listeners and artists (Kresovich et al., 2021). Hip-hop and rap have a strong influence on the lives of young African American men (Elligan, 2000).

Philosophy of the Study

Research agrees that there is not enough research on the wellbeing of Black men to understand their overall mental maintenance. There needs to be a distinction between wellbeing and mental illness. Esiaka et al. (2019) studied the overall wellbeing of Black men with chronic illnesses. Although this study did not aim to discuss a particular illness per se, the article highlighted important aspects of wellbeing among Black males. Esiaka et al. (2019) highlighted the different areas of wellbeing, such as interpersonal and personal. Also, mental health professionals recognize the disparities in the community,

yet Black men are left to find their own coping skills to deal with their wellbeing (Esiaka et al., 2019).

Search Strategy

The researcher used the UofSC library database to search for relevant literature. Only a few articles addressed overall wellbeing among Black and African American men. The research in counseling is negligent in its discussion and effectiveness among Black and African American men (Johnson, 2016). The articles that were found dealt with same-sex relationships, HIV, or wellness due to another physical ailment. Although the articles were insightful in understanding concepts and factors of wellbeing, a population of Black and African American men did not fit these specifiers. The specifiers included Black and African American men's wellbeing and how they identify and address personal, interpersonal, social, and overall wellbeing (Tennant et al., 2007). The key terms used to search were *Black men, African American men, mental health, wellbeing, wellness, college men, mental health, Black college men and mental health, Black college women, and marginalized.* All the searches resulted in specified problems, and only two focused on the overall wellbeing of Black and African American men.

Professional Application

Wellbeing is a part of mental wellness promotion (Goodwill et al., 2018). There are several studies on the relevance of wellbeing and why mental health professionals should continue to learn and understand it (Goodwill et al., 2018) The positive wellbeing of Black and African American men has been understudied. This notion of wellbeing and

mental health can be due to unjust treatment that has alienated the population. Studies show that Black men generally do not seek mental health care over any other sex or race (Bauer et al., 2020). There is a lack of interventions and creative ways to increase wellbeing. There are evidence-based links to show that racial differences influence wellbeing and are imperative to be addressed and, therefore, should not be ignored (Pierce et al., 2018).

African American men have attempted to fix their mental being on their own and find ways of coping through various channels (Bauer et al., 2020). Discovering new and inventive ways to understand wellbeing is imperative and ethical (ACA, 2016). There are over 450 theoretical orientations. Some theories can be used and adapted to fit cultural barriers, especially those empirically used in marginalized communities and cultures. Rap therapy has this experience within its practices.

The professional significance behind using rap therapy is that a significant number of Black men that come to counseling listen to rap music (Washington, 2018). However, hip-hop and rap have a variety of populations regarding race and ethnicity. Black/African American males continue to dominate the culture as listeners and artists. Black/African American males are rated least likely to seek mental health counseling and other mental health services. Furthermore, its foundations and principles are rooted within interventions that counselors have been practicing, such as bibliotherapy. Cognitive behavior therapy with social learning theory is the theoretical modality used to create rap therapy.

Social learning theory involves a person participating in numerous reactions during and after the observed task (MacDonald & Ahearn, 2015). The other terms used for observational learning can be modeling or imitation. Observational learning consists of four elements (Prichard, 2012). The four components are: a) Paying attention. For the learning process to commence, the learner must pay attention to the material; b) Retention. The learner must be able to retain the information from the observation to complete the remaining components; c) Reproduce. The learner needs to be able to reproduce the behavior observed through the instructor's observation, and d) Motivation is needed to reproduce the behavior being modeled. Motivation can also be formed with vicarious reinforcement or punishment (Snyder & Fisk, 2016). There are limitations to this method because these four concepts have not been proven by evidence-based practices in research (Prichard, 2012), which makes this more of a method used in teaching and instruction.

Theoretical Framework

Rap Therapy Tenants

Rap therapy has its foundational roots in social learning theory in combination with cognitive behavior therapy (Gonzalez & Hayes, 2009). The multifaced communication that rap promotes makes it useful as a therapy tool (Hadley & Yancy, 2012). Rap therapy has a pre and post-assessment process with five tenants of applications. The process begins with the assessment process in which clients are

assessed to address their fit for rap therapy (Elligan, 2000). The alliance stage consists of building a rapport with the clients (Kobin & Tyson, 2006). Counseling skills include ongoing assessment and rapport to increase empathy and emotional support (Elligan, 2000). The reframing stage consists of the continuation of rapport building and assessment, as well as adding in the idea of negative thinking and using the lyrics to reframe for more optimistic or goal-oriented thinking (Gonzalez & Hayes, 2009). Role-playing in rap therapy promotes creative art forms, such as writing or collaborating on ways to utilize rap (Elligan, 2000). The final stage consists of action and maintenance. In this stage, clients are encouraged to utilize skills learned in the session to guide decision-making and modification of behaviors that they desire to change (Okamoto, 2019).

Social Learning Theory

Social learning theory involves a person participating in numerous reactions during and after the observed task (MacDonald & Ahearn, 2015). The other terms used for observational learning can be modeling or imitation. Observational learning consists of four elements (Prichard, 2012). The four components are: a) Paying attention. For the learning process to commence, the learner must pay attention to the material; b) Retention. The learner must be able to retain the information from the observation to complete the remaining components; c) Reproduce. The learner needs to be able to reproduce the behavior observed through the instructor's observation, and d) Motivation is needed to reproduce the behavior being modeled. Motivation can also be formed with vicarious reinforcement or punishment (Snyder & Fisk, 2016). There are limitations to

this method because these four concepts have not been proven by evidence-based practices in research (Prichard, 2012), which makes this more of a method used in teaching and instruction.

Cognitive Behavior Therapy

Cognitive behavioral therapy is one of the most well-known and widely used therapeutic processes (Steward & Chambless, 2009). CBT, like rap therapy, focuses on problem-solving and collaborative alliance with the client (Elligan, 2000). The strategy used by therapists is to help clients with the following: a) identification of their problem and/or stressor, b) evaluate the plausible reason for the stressor as well as areas of stress, and c) discover a modification of behavior to decrease or distress the emotion (Wenzel, 2011). In the therapeutic relationship, therapists focus on a client's thoughts that may be negative due to having this thought for a period and determining the underlying meaning of the thought. CBT looks at different aspects of a client's life that may have influenced individual cognition, feelings, and behavior.

Constructs of Interest

Therapists continue to find new and effective ways to promote mental health (Gonzalez & Hayes, 2009; Kobin & Tyson, 2006). A huge part of promoting mental health is to improve the working alliance between the therapist and client by building rapport. Rapport building has been argued to be the most important part of the treatment process and is considered more important than the actual process (Kobin & Tyson, 2006). To build rapport among marginalized communities, there needs to be an increase in

cultural competence throughout the therapeutic process, theoretical orientation, and interventions (Adjapong & Levy, 2021).

Hip-hop and rap within counseling can be duplicated and is realistic to use in therapeutic settings and other settings that promote mental wellness (Adjapong & Levy, 2021). According to Robinson et al. (2018), it is necessary to integrate interventions that clients can relate to (Robinson et al., 2018). Interventions should consider marginalized factors to improve healthier outcomes and retention. Culturally competent interventions are needed to address the uniqueness of circumstances that affect marginalized communities (Robinson et al., 2018). The intervention also promotes cultural responses within the alliance (Adjapong & Levy, 2021) and should be explored by counselors regardless of race and ethnicity (Kobin & Tyson, 2006). Utilizing an intervention with a cultural foundation could be a form of social justice within the counseling profession as it promotes minority wellbeing and insight into a client's lifestyle (Washington, 2018).

Research supports that culturally based interventions are an effective treatment (Robinson et al., 2018). This research promotes the value of integrating arts, such as hip-hop and rap, as an intervention strategy to promote wellness (Travis et al., 2019). Hip-hop and rap music are art and can be explored in evidence-based treatments (Robinson et al., 2018) and can be used to improve treatment effectiveness (Kobin & Tyson, 2006). Generationally, promoting culturally competent interventions and trying progressive modalities can be used for generations to come within research and academia. This creates new edge modalities to continue to strengthen multiculturalism and social justice.

Research shows that music promotes positive behaviors. Universally, music can be used as a form of communication. Music interventions in mental health have been used for years (Robinson et al., 2018). Furthermore, using hip-hop and rap music allows therapists to get a glimpse of inside culture as music lyrics help to identify stereotypes, vernacular, metaphors, and cultural expectations. Understanding the lyrics helps to confront assumptions. Music allows individuals to share emotions and connect to a particular moment in their life. It is capable of exploring various human emotions. Music can not only improve the quality of life, but it also connects people and helps them understand their identity, the identity of others, and how they view the world. Hence, it creates a form of cohesion.

Scope

Single-case research is most effective in a small population with three to seven individuals or in group settings, three different groups for a new intervention (Kratochwill, 2015). The intervention of reading hip-hop and rap lyrics to improve mental health has not been done in SCD. Single-case research was used in this study to implement an intervention to change behavior (Hitchcock et al., 2015). The multiple baseline design is best used in therapy ethics. According to American Counseling Association (ACA, 2014), counselors strive to do no harm and seek the best treatment practices. In the multiple baseline design, the intervention does not need to be removed or reversed, which is ideal for counselors and psychology as interventions improve quality of life; therefore, a therapist cannot take away an intervention. Since the intervention is

not moved in MBD, the researcher can measure outcomes by providing the intervention to multiple participants, settings, and outcomes (Hitchcock et al., 2015). The intervention is then manipulated by staggering the start of the intervention between participants.

There is numerous research on wellbeing among different populations. Unfortunately, there is very limited research on the wellbeing of Black and African American men. Overall, understanding the level of functioning and the meaning of wellbeing is essential for assessing wellbeing. The gap is the lack of research about the wellbeing of Black and African American men, despite knowing that this population has high disparity rates and low retention in mental health settings. The use of interventions in counseling has not improved overall wellbeing because of the lack of research and knowledge around the concept and understanding of the difference between wellbeing and mental health disorders.

More research should contribute to the wellbeing of Black and African American men. Understandably, the population's retention gap has made the research difficult. Furthermore, researchers have to identify the aperture for improvement. This also constitutes looking at the adversity of the culture to understand what factors are lacking and ways to connect. The limited research that has taken place shares that media, specifically hip-hop and rap, is the primary go-to for coping skills and understanding wellbeing among the population (Gonzalez & Hayes, 2009).

Also, hip-hop and rap are the most widely relatable and commonly used media among Black and African American men (Washington, 2018). It is widely used by all individuals, regardless of race and ethnicity. Research supports that it is widely used

within the Black and African American cultures. Hip-hop and rap are influential ways to improve communication and address social conventions (Robinson emailed article). Culturally pertinent interventions are imperative for innovative ways to work with clients (Kobin & Tyson, 2006). Therefore, reading hip-hop and rap lyrics could be a creative intervention tool (Adjapong & Levy, 2021) to improve cultural humility between therapists and clients and promote wellness functioning (Kobin & Tyson, 2006). This research study focused on the methodology for research design and actual research findings to share the basic effects of hip-hop and rap interventions.

Conclusion

Chapter two discussed the article reviews that included tenants of wellbeing and the use of hip-hop and rap in a counseling setting. Elligan's (2000) rap therapy was described as the theoretical framework to address the basis of the research. Chapter three includes the first study, which is the systematic review. Chapter four presents the procedures and results of implementing a multiple baseline design using the reading of hip-hop and rap lyric intervention with college-aged Black and African American men.

Chapter Three: The Effects of Hip-Hop and Rap Music Interventions on Mental

Health and Well-Being

A Systematic Review

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Abstract

Hip-hop and rap music interventions are modern approaches often used in counseling marginalized populations to facilitate emotion processing and enhance well-being. The purpose of this systematic review is to (a) identify hip-hop and rap music interventions that have been empirically studied in counseling, (b) summarize the outcomes of research studies that integrate hip-hop and rap music interventions in counseling, and (c) critically appraise the available research studies to date. Most hip-hop and rap music interventions are used with adolescents and include forms of writing lyrics and incorporating feelings and emotions into the music. Overall, researchers reported that integrating hip-hop and rap music in counseling contributes to increased emotional awareness, empowerment, and the ability to process difficult emotions.

Keywords: interventions, hip-hop music, mental health, counseling, systematic review

A Systematic Review of Hip-Hop and Rap Music Interventions in Counseling

Mental health counselors utilize interventions to improve wellness and promote a therapeutic alliance (Tennant et al., 2007). Interventions should be therapeutically appropriate and considered carefully on an individualized basis (Tennant et al., 2007). The American Music Therapy Association (AMTA, n.d.) highlights the evidence-based use of music interventions within clinical settings to promote health and wellness, indicating that all music genres can be used as interventions. According to Uhlig et al. (2019), music integration is a well-suited intervention for enhancing emotional well-being. Gonzalez and Hayes (2009) highlight using music genres such as classical music and suggest other genres should be considered for creative expression as well as cultural context among counselors and clients. When using hip-hop as an intervention, there are two facets of this genre to consider, including hip-hop and rap music. Whereas hip-hop music encompasses all the aspects of hip-hop but may not include the cadence of rapping, rap encompasses all aspects of hip-hop culture, including a particular cadence of musical instruments (Elligan, 2012; Washington, 2018). Further, hip-hop and rap express marginalized communities' social, political, and economic realms (Alridge & Stewart, 2005) through storytelling. Hip-hop and rap include a poetic flow followed by musical instruments and a song outline. Hip-hop and rap are primarily used by young Black and Latino people who developed hip-hop and rap culture to communicate their emotions and lived experiences (Washington, 2018); however, other cultures also show appreciation of this genre. Recently, hip-hop and rap music interventions have been integrated into

counseling approaches (Levy et al., 2021; Washington, 2018). For instance, Evans (2010) suggested that rap music can be used as a culturally appropriate therapeutic tool to connect with troubled youth and assist them in engaging in counseling. Hip-hop music, specifically, has been shown to attract young people to mental health treatment, improve rapport in the working alliance, promote mental health, and improve quality of life (Travis et al., 2019). Furthermore, rap music has depicted coping mechanisms used by African American youth to manage emotional and environmental stressors often experienced by African Americans (Paukste & Harris, 2015).

History of Hip-hop

Hip-hop and rap can be traced back to the late 1960s as a cultural expression consisting of individual or collective morals, values, and beliefs for African Americans and Latinos (Uhlig et al., 2019; Washington, 2018). Frustrated with inconsistent employment, chronic poverty, and violence, young Black and Latino people developed hip-hop and rap culture to communicate their feelings (Washington, 2018). Hip-hop and rap music provided avenues for artistic and political expression of their needs and concerns and were used to promote therapeutic dialogue within ethnic minorities (Levy, 2019). Hip-hop and rap emerged in the mainstream on the east coast of North America in the mid-1970s (Beach & Sernhede, 2012). Hip-hop and rap music utilize cathartic language along with beat vibration to communicate feelings and emotions about the current climate of social change, justice, lack of economic resources, and increased in violence in Black and Brown neighborhoods (Washington, 2018). Hip-hop is defined

through four diverse oral, written, and physical elements: rap, breakdance, DJing, and graffiti (Beach & Sernhede, 2012; Washington, 2018).

Connecting Hip-Hop and Rap Music to Mental Health

Counselors are considered the forerunners in the hip-hop therapy movement (Washington, 2018). As such, hip-hop therapy was developed to stimulate richer clinical interactions with racially diverse clients for clinicians to develop clearer and more meaningful treatment plans (Kobin & Tyson, 2006; Washington, 2018). Because of hip-hop's roots in promoting therapeutic dialogue through music, ethnic minorities utilized this method due to its flexible representation of emotions (Richards et al., 2019). Hip-hop and rap music can also aid in conceptualizing greater insight into Black males' worldviews, experiences, and future aspirations (Washington, 2018). According to Washington (2018), hip-hop and rap music resonates with many Black males who use it to encapsulate their frustration when confronting sociopolitical disadvantages. Roberts et al. (2005) found that over three quarters (81%) of Black children report listening to rap/hip-hop music as opposed to 60-70% of White and Hispanic children.

To incorporate rap music into counseling practice, culturally responsive therapy models, such as the hip-hop and Spoken Word Therapy (HHSWT) model, have been developed, offering clinicians hip-hop-based strategies (e.g., creating emotionally themed mixtapes) that can be used in helping adolescents to explore difficult emotional and cognitive experiences (Levy & Adjapong, 2020). HHSWT provides a theoretical framework and application to give voice to students' struggles and stresses faced on the streets, in schools, and in living conditions (Levy, 2020). HHSWT is grounded in theoretical models such as bibliotherapy, CBT, and elements of person-centered (Levy,

2020). Furthermore, honoring the concept of authenticity, which is an important tenet in hip-hop, provides clinicians with a conceptual framework to assess the level of authenticity within the therapeutic relationship (Levy, 2020). This is important because research has indicated that Black youth and men struggle expressing their emotions to counselors or seeking help if they do not feel genuine connectedness or relatedness with mental health providers (Lindsey & Marcell, 2012). Although hip-hop and rap music have emerged as potentially beneficial interventions in counseling, there is no consensus on how to effectively use them in session. Additionally, there is limited knowledge of the research supporting such interventions. The purpose of this systematic review was to identify the current hip-hop and/or rap music interventions used in counseling and review how they are implemented. Therefore, this systematic review helped to (a) identify hip-hop and rap music interventions that have been empirically studied as counseling interventions, (b) summarize the outcomes of research studies that integrate hip-hop and rap music interventions in counseling, and (c) critically appraise the available research studies to date.

Method

The systematic review was guided by *The Cochrane Handbook for Systematic Review*, according to Armstrong et al. (2011). For this systematic review, three research team members examined counseling interventions that incorporated hip-hop and rap music as a therapeutic technique with clients. Hip-hop and rap music is defined as music that uses a combination of rhythm and poetry that vocally expresses emotions and transforms them into words. Types of hip-hop and rap music interventions consisted of developing lyrics, poems, songs, and words to assist with raising mental health

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awareness, improving the therapeutic relationship, and cathartic ways to communicate emotions. The databases screened for articles include Academic Search Complete, Ebscohost, APA PsycInfo, APA PsycArticles, Education Resources Information Center (ERIC), Social Science, and Social Work Abstracts. The search terms included 'Interventions,' 'hip-hop' OR 'rap' music, 'mental health,' and 'counseling.' The term 'intervention' was specific to the type of article because the empirical articles were to use hip-hop as an intervention to improve mental health. 'Hip-hop or rap' was used to include both styles of music that belong to the particular culture of hip-hop mental health, which was specific to the search and included all aspects of mental health, not just areas of psychological distress. It should be noted that 'counselling,' with an emphasis on two lls, has the same meaning as 'counseling.' Researchers that use two ll's are of British English culture, and the spelling is accepted differently than in western English.

Search Criteria, Strategy, and Eligibility Criteria

The search included peer-reviewed articles in academic journals written in English between the years 2010 and 2022 due to research suggesting that there has been an increase in the use of hip-hop and rap in counseling settings within the past few years (Washington, 2018). The inclusion criteria consisted of empirical, peer-review articles that use hip-hop and rap music as an intervention in a counseling setting with minority individuals. Exclusion criteria consisted of duplicate articles, non-empirical articles, non-peer review articles, articles that did not include music genre interventions, non-marginalized communities, and medical procedures. The initial database search yielded 12,632 articles with the keywords 'counsel', 'hip-hop', and 'rap'. After adding the keyword 'interventions,' the article count was narrowed to 306. The total number of

articles was 235, after accounting for duplicates eliminating 71 articles. The accepted

articles were imported into Zotero to be converted and downloaded to CSV files to create

an excel spreadsheet of all the articles. An Excel spreadsheet was used to track the

articles, and team members began by dividing and individually reviewing the articles.

The 235 articles were divided among 3 team members to determine if the article met the

criteria for the study, and each author assessed 77 articles. During this round of

screening, team members reviewed the article title and abstract and denoted articles to be

eliminated, maintained, or possibly by highlighting the articles in red, green, or yellow.

After the initial round of screening, we excluded a total of 183 articles, and 52 articles

were funneled into a separate Excel sheet for further screening. Articles were eliminated

because they were not empirical, were medical procedures and not counseling related, did

not provide an intervention, focused on educational processes, or did not include

minorities or people of color.

Once the articles were narrowed down to 52 articles, nine were removed in the

second round of screening because they did not meet the search criteria. During the third-

round screening, team members individually reviewed the entire article for 43 articles to

identify a final count based on the initial inclusion criteria. A total of 36 articles were

excluded, leaving 8 articles for review. Two additional articles were added based on

references from the initial 44 articles, for a total of 10 articles accepted. Our search and

screening process is outlined in Figure 1, the article screening flowchart (Shamseer et al.,

2015). IRB approval was not required to review the articles used in this systematic

review. Per PROSPERO, there were limited resources for systematic reviews conducted

by students at this time.

Quality Assessment

We used the Mixed Methods Appraisal Tool (MMAT) to assess the quality of the 10 final articles (Hong et al., 2018). The MMAT identifies multiple research methods, including quantitative, qualitative, and mixed methods. Each research structure obtains a set of quality assurance criteria to evaluate the articles (Hong et al., 2018). We divided the articles among three team members and entered information from the articles into an Excel sheet to clearly define the purpose and outcome of each accepted article. The sections the team observed include population, presenting concerns/implementation, type of study, intervention(s), outcomes, and results. The 9 articles we reviewed were placed into a separate table outlined in Table 3.1 (Hong et al., 2018).

Outcomes

Study Characteristics

Population

Of the 9 articles included in the review, nine included adolescent populations, defined as participants between 8 and 18 years old. The other population researched included incarcerated individuals ages 25-67. The articles included boys/men and girls/women.

Presenting Concerns

The 10 studies addressed various presenting concerns, with most of the studies completed with individuals having challenges with emotional expression and emotional exploration. Most of the interventions were designed to assist Black and minority individuals feel more understood and heard, increase their level of comfort for engaging in self-reflection and emotional expression, accessing counseling services, managing

difficult emotions, the need for promotion in mental health with depression and anxiety, and enhancing emotional well-being. Overall, most of the studies were also designed to provide clients with a culturally safe space to engage in hip-hop and rap music as a counseling intervention, which has shown a positive effect overall in decreasing the negative symptoms.

Study Methodology

The methodology of the articles within this systematic review varied. Of the 9 articles, three were randomized control trials. Two mixed-method studies were conducted utilizing pre-and post-test surveys to gather quantitative data and a phenomenological approach to gather qualitative data. Further, there was one non-equivalent design study, two qualitative interpretative studies, one interpretive phenomenological analysis study, and one correlational study.

Interventions & Implementation

All 9 articles explored developing lyrics, poems, songs, and words to assist with raising mental health awareness and communication of emotions. Mental health awareness and communication of emotions were facilitated through hip-hop and rap lyric writing, watching YouTube videos for visual, VoxBox groups, and lyrical analysis, which included reviewing lyrics and developing audio and video recordings (Levy et al., 2020; Paukste & Harris, 2015) The number of sessions of the intervention varied between two times a week to multiple times a week. One article mentioned meeting with participants once a week (Uhlig et al., 2018). Two articles disclosed that the intervention lasted 45 minutes (Uhlig et al., 2019). One study included 50-minute meetings (Levy, 2019), and the other studies' sessions lasted 60 minutes to 120 minutes. Three articles

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lasted 4 months (Uhlig et al., 2019, 2016; Uhlig et al., 2018). Two articles provided the

intervention throughout the school academic year (Levy, 2019, 2020). Two articles

reported the duration of the intervention as 5 to 6 weeks (Richards et al., 2019). One

article intervention was for 7 weeks (about 1 and a half months; Paukste & Harris, 2015).

Another article reported 10 weeks duration of the intervention (Levy et al., 2020). Two

articles used the intervention during the school calendar summer vacation (Levy &

Travis, 2020; Travis et al., 2019). A summary of interventions is included in Table 3.1.

      Quantitative Outcomes. Outcomes of the quantitative studies include cultural

sensitivity, analyzing irrational representations of experiences, increased interest in

discussing difficult topics, reduced stress, benefits of sleep and positive effects on

emotional well-being, and encouragement to address feelings. Some of the results found

in quantitative studies include improved stress, decreased depressive and anxious

symptoms, and a positive effect on emotional regulation (Uhlig et al., 2019, 2018, 2016).

Additionally, three studies found no significant effect for their measure of increased the

quality of sleep with a music-related intervention, behavioral issues were not a

contributing factor towards results, and the final article had a small effect size between

both groups (Uhlig et al., 2019, 2018, 2016). In a randomized control study conducted by

Uhlig et al. (2018) examining whether rap and music therapy supported adolescents'

emotional well-being, they found no significant difference in the results between

adolescents in the control group and those who received the intervention. For that study,

the research observation was 45 min, once a week for a few months. Another randomized

control study conducted by Uhlig et al. (2019), observing participants for 45 min once a

week over a 4-month time frame, examined the impact that rap and music therapy had on

sleep in adolescents and found that using rap and music therapy had no significant impact on sleep. Travis et al. (2019) conducted research that promoted positive change in mental health. The intervention was used two times a week, using a correlational design. The research study indicated that by using hip-hop as an empowerment tool to improve confidence as an intervention, students experienced improved symptoms associated with depression and anxiety. Overall, the researchers found significant positive outcomes from using hip-hop and rap-based interventions, especially within a school setting with adolescents. We include a summary of outcomes in Table 3.1.

Qualitative Outcomes. Outcomes of qualitative studies include bolstering confidence, raising awareness of substance abuse, and assisting with better communication of emotional experiences. The findings included themes such as encouraging the clients to step outside their comfort zone, build connections to others, and reflect on identity. In a study in which rap music was incorporated into group therapy provided to incarcerated individuals, researchers identified themes associated with developing a sense of self (affirmation, having a stronger sense of self, and reflection of identity), establishing interpersonal relationships (connection to others and building relationships), and using hip-hop as an escape from the present (Levy, 2019; Richards et al., 2019). We include a summary of outcomes in Table 3.1.

Mixed Methods Outcomes. Outcomes of mixed-method studies include movement from the preparation stage of emotional coping to the action stage. There was also a decrease in perceived stress and increased emotional wellness. Results of the mixed methods section include the development of new coping skills, empowerment of

voice and advocacy, increased self-awareness, and a stronger self-image overall (Levy, 2019). We include a summary of outcomes in Table 3.1.

Narrative Synthesis

The nine articles used in this systematic review were published between 2010 and 2022. The publication dates ranged from 2010 to 2020. The studies were conducted in various countries: five in the USA, three in the Netherlands, and one in Australia. Six studies focused on regulating the emotions and emotional well-being of the participants following the intervention process, two studies focused on hip-hop empowerment and improving self-confidence through music, and the other on improving physical health and wellness. The population of interest in eight of the studies focused on individuals between the ages of 8 years old and 18 years old, while the other study focused on individuals 25 years old to 67 years old, with the common factor between the studies being a minority or vulnerable populations. A common theme between each study reviewed includes promoting health and improving minority populations due to a lack of information on supporting vulnerable populations.

Discussion

Hip-hop and rap have had a negative reputation in the mainstream media (Evans, 2010). Some researchers argue that it promotes violence and contributes to racism. Other researchers, such as those identified in this study, have shown it can benefit the emotional well-being of youth and other marginalized groups (Evans, 2010). Thus, counselors may find it challenging to see the unique aspect of using hip-hop and rap as a therapeutic intervention (Evans, 2010). Hip-hop and rap can be used to increase the therapeutic relationship between counselor and client and provide a cultural connection (Armstrong

& Ricard, 2016). Using hip-hop and rap has the potential to break down bias barriers and promote multiculturalism, as well as enhance competencies that can promote social justice among counselors (Kobin & Tyson, 2006). Throughout history, hip-hop and rap have been used as coping mechanisms for marginalized communities, providing a way to deal with lived experiences such as poverty and discrimination. Using hip-hop and rap music can continue to provide a personal lens into clients' lives by helping to understand the clients' lived experiences through song choices and lyrics in a counseling setting (Armstrong & Ricard, 2016). The 9 studies were primarily conducted with marginalized communities, which assists researchers and clinicians in improving cultural competencies as well as providing counseling aspects (Levy, 2019).

Most studies revealed a positive effect of using hip-hop or rap music as a counseling intervention. The outcomes measured included cultural sensitivity when working with ethnic minorities in clinical settings, analyzing irrational thinking patterns, examining the stages of change as it relates to emotional coping, increased emotional awareness, increased overall confidence and self-esteem in participants, stress reduction, increased emotional identification and communication, and decreased levels of depression and anxiety symptoms when using hip-hop related interventions. As noted above, all outcome measures showed a positive effect when using hip-hop or rap-related interventions as opposed to the studies where participants did not receive the intervention (Uhlig et al., 2019, 2018, 2016). Several articles within the systematic review indicated that using hip-hop as an intervention resulted in increased emotional awareness and regulation, the development of new and improved current coping abilities, and indicated a statistically significant difference in favor of relaxation and enjoyment (Levy, 2019;

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Uhlig et al., 2016). Lastly, the results of the systematic review indicated that researchers found hip-hop or rap interventions to contribute to greater empowerment, self-advocacy, confidence, and increased ability to address difficult topics (Levy, 2019; Levy et al., 2020; Paukste & Harris, 2015).

Implications for Practice

There is a need for culturally adapted interventions in the counseling profession, as counselors may shy away from assisting clients due to cultural barriers or a lack of cultural humility (Kobin & Tyson, 2006). Using culturally appropriate interventions provides counselors with an understanding that experiences are defined through culture and ethnicity (ACA, 2014; Kobin & Tyson, 2006). A creative way to improve professional development and raise cultural competence is to implement and train counselors on using hip-hop and rap in their settings, which also promotes cultural responsiveness (Adjapong & Levy, 2021). This research also promotes the value of integrating arts, such as hip-hop and rap, as an intervention strategy to promote wellness (Travis et al., 2019). There are books and research materials that can be used for self-guided training on ways to use and implement hip-hop and rap as mental health interventions (Richards et al., 2019). There is no required or unique talent that is needed to engage and utilize hip-hop and rap music in a therapeutic setting (Richards et al., 2019). Any counselor willing to use culturally relevant therapy techniques could benefit from this intervention (Washington, 2018). Counseling programs have implemented multicultural learning outcomes to prepare for cultural differences (Levy, 2020). Therefore, it is recommended that counselors continue and increase cultural competence training and communication skills to develop a sense of cultural humility (Levy, 2020).

Limitations

Several articles were generated from our initial search inquiry; however, for this review, we focused on hip-hop and rap music interventions used in a counseling setting. We only reviewed studies that utilized hip-hop or rap music interventions that were studied quantitatively, qualitatively, or both and incorporated hip-hop and rap music as a therapeutic intervention. This eliminated many studies from the initial search due to studies being conceptual, coming from medical or music journals, and did not incorporate a therapeutic intervention. Limitations within this study included a combination of the process of the systematic review and having multiple people reviewing articles used, as well as the limited amount of empirical research completed using hip-hop music as an intervention in counseling. There may also be some additional limitations with our initial keyword search terms limiting the number of articles as well as the content not being generalizable to multiple populations and minorities.

Implications for Future Research

In this systematic review, we provide counselors and clinicians with an in-depth review of the current literature surrounding hip-hop and/or rap interventions used in the counseling field. Counselors can use this review if they are interested in incorporating hip-hop and/or rap music interventions in their practice. Through this research, we hope clinicians and counselors will be interested in incorporating hip-hop interventions into their practice and will be able to use evidence-based interventions listed through our review and search. This review may also be used to inform counselors and clinicians on up-to-date interventions with hip-hop music as well as their clientele if clients may benefit from this modality.

Conclusion

Although additional research is needed, the research, thus far, suggests that hip-hop and rap music interventions are promising in improving client outcomes. Hip-hop and rap music appears to provide an approach for counselors to connect with historically marginalized populations who have often been apprehensive about engaging in the counseling process. Providing culturally appropriate interventions is likely to help foster a strong therapeutic relationship, improve the working alliance, and facilitate clients' emotional expression. More research is needed related to client outcomes and counselor training in implementing the interventions. The authors report there are no competing interests to declare.
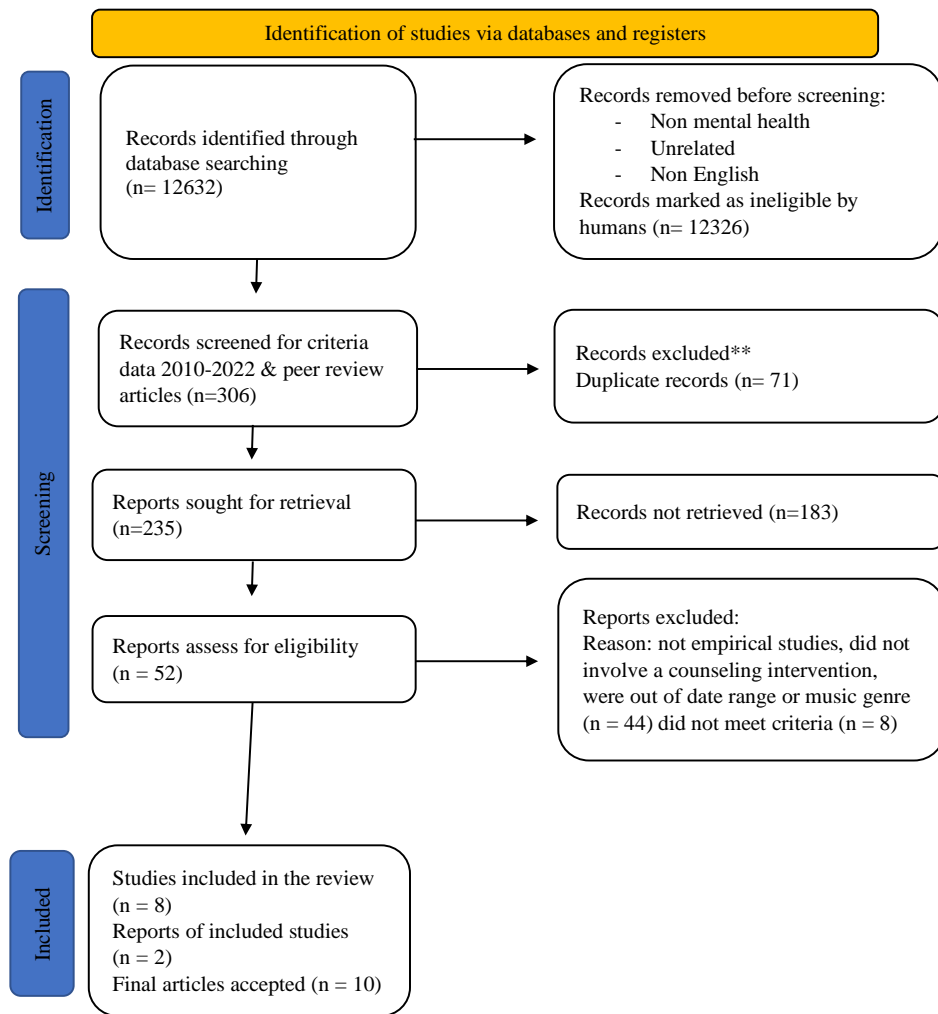
Figure 3.1 Prisma Flow Chart

Table 3.1 Article Assessments

Quantitative Articles

Author/Year	Title	Population	Presenting Concerns	Type of Study	Interventions & Implementation	Results
Levy & Travis (2020)	The Critical Cycle of Mixtape Creation: Reducing Stress via Three Different Group Counseling Styles	18 high school-aged youth, ages 14 to 17; 8 females and 10 males; 10 latinx, 3 black, 2 multiracial/multi-ethnic	Social and emotional support concerns for youth in addition to academic focus of a summer enrichment program for high school youth	Quasi-experimental; (NED)	utilizing hip hop as focus in groups to promote mental health. 5 days for 1 hr 45 mins	Improved stress, choice-based group leadership had a more positive response than authoritative leadership
Travis et al. (2019)	Hip hop, empowerment, and therapeutic beat-making: Potential solutions for summer learning loss, depression, and anxiety in youth	35 participants, ages 11to15 you; 3 participants engaged in indiv. HHE sessions, 20 females and 15 males, 17 individuals identified as black, 8 latinx, 3 Asian, 5 multi-	Examine ways to promote mental health in students through expression, relationship and self-concept who have depression and anxiety to prevent summer learning loss	Correlational	Hip-hop empowerment 2x/wk for 60mins	Utilizing HHE helped to decrease depressive & anxious symptoms
Uhlig et al. (2019)	Rap & Sing Music Therapy and sleep in adolescents: A single-blind cluster randomized controlled trial	75 Adolescents, 52 participants in experiential group and 23 participants in the control group; ages 8-13; gender and race not identified	Sleep disturbances as a results of emotional well-being and mood disturbances and if Rap&SingMT would exert positive effect on sleep patterns	RCT	developing rap audio and video recordings 16 Rap & Sing MT 45 min, once a week over 4 months in group school setting	No significant difference in overall quality of sleep
Uhlig et al. (2018)	Being a bully isn't very cool…': Rap & Sing Music Therapy for enhanced emotional self-regulation in an adolescent school setting—A randomized controlled trial	190 adolescents to start, narrowed down to 95 participants; ages 8-12 years; 40 boys and 55 girls; specifics of race not recorded	Enhancement of emotional well-being for individuals to express 'true feelings' by developing self-regulation skills for positive and negative feelings	RCT	developing rap audio and video recordings 16 Rap & Sing MT sessions, 45 min, once a week for 4 months	No significant difference in overall quality of sleep
Uhlig et al. (2016)	Study protocol RapMusicTherapy for emotion regulation in a school setting	Adolescents, 8th grade, race not specified	Examine ways to improve emotional regulation in school settings using Rap Music Therapy (RMT)	RCT	use rap, word development & song as emotional expression 16 Rap & Sing MT sessions, 45 min, once a week for 4 months	There was a small positive affect on utilizing RMT to assist with emotional regulation among adolescence in this study.

Qualitative Articles

Author/Year+G6B4B2:I6	Title	Population	Presenting Concerns	Type of Study	Interventions & Implementation	Results
Levy et al. (2020)	A community-based intervention: A hip hop framework toward decolonizing counseling spaces	8 children ages 8-11 you, (6 females & 2 males)	improve comfort zones, self-confidence, and improve positive feelings	IPA	Hip hop & spoken word therapy that included 10wks, 6-12 sessions	Improved confidence, stepping outside of their comfort zone, processing difficult topics verbally
Levy & Wong (2022)	Processing a white supremacist insurrection through hip-hop mixtape making: A school counseling intervention	8 Bangladesh high school students	examine students understanding of justice and injustice on their well-being	Qualitative	16 wk. YPAR counseling group developing a Critical Cycle of Mixtape Creation	Students became more critically aware of injustice in marginalized communities
Paukste & Harris (2015)	Using rap music to promote adolescent health: pilot study of VoxBox.	Adolescents, ages 14 - 18 (14 males, 4 females)	promotion of good health in adolescence in schools in Australia	Qualitative IA	VoxBox: Pilot study lasting 1-2 hrs. for 7 weeks	Improved confidence, and raising awareness of adolescent substance abuse
Richards et al. (2019)	A qualitative study of group therapy incorporating rap music with incarcerated individuals	10 individuals, incarcerated b/w 25-67 you (1AA and 9 white)	anxiety, self-discovery, and difficulties regulating emotion	Qualitative IA	2 Counseling Groups, 5 90-minute sessions over 5 weeks	Themes: Affirmation, reflection of identity, connection to others/building relationships, & escape from present

Mixed-method Articles

Author/Year	Title	Population	Presenting Concerns	Type of Study	Interventions & Implementation	Results
Levy, I. P. (2019)	Hip-hop and spoken word therapy in urban school counseling	12 individuals of 30 volunteers, grades 10 to 12, (n=6) Black/AA (n = 4) Latino,(n = 1) as Guyanese (n = 1) as West Indian. 75% (n = 9) male and 25% (n = 3) female	created a school course rooted in hip-hop to increase students' level of comfort for engaging self-reflection, emotional exploration, and accessing counseling services	Mixed methods	HHSWT (Hip Hop and Spoken Word Therapy; meeting every other day for 50 minutes for an entire school year	Increased emotional awareness; developed new coping skills, empowerment/voice & advocacy

Table 3.2 Mixed Methods Appraisal Tool

Study Appraisal

Qualitative	1.1. Is the qualitative approach appropriate to answer the research question?	1.2. Are the qualitative data collection methods adequate to address the research question?	1.3. Are the findings adequately derived from the data?	1.4. Is the interpretation of results sufficiently substantiated by data?	1.5. Is there coherence between qualitative data sources, collection, analysis, and interpretation?
Levy (2020)	Yes	Yes	Yes	Yes	Yes
Paukste and Harris (2015)	Yes	Yes	Yes	Yes	Yes
Richards et al. (2019)	Yes	Yes	Yes	Yes	Yes

Mixed-Methods	5.1. Is there an adequate rationale for using a mixed-methods design to address the research question?	5.2. Are the different components of the study effectively integrated to answer the research question?	5.3. Are the outputs of the integration of qualitative and quantitative components adequately interpreted?	5.4. Are divergences and inconsistencies between quantitative and qualitative results adequately addressed?	5.5. Do the different components of the study adhere to the quality criteria of each tradition of the methods involved?
Levy (2019)	Yes	Yes	Yes	Yes	Yes

Quantitative non-randomized	3.1 Are the participants representative of the target population?	3.2 Are measurements appropriate regarding both the outcome and intervention (or exposure)?	3.3. Are there complete outcome data?	3.4. Are the confounders accounted for in the design and analysis?	3.5. During the study period, is the intervention administered (or exposure occurred) as intended?
Levy (2020)	Yes	Yes	Yes	Yes	Yes
Travis et al. (2019)	Yes	Yes	Yes	Yes	Yes

Quantitative randomized	2.1. Is randomization appropriately performed? 3.1 Are the participants representative of the target population?	2.2. Are the groups comparable at baseline?	2.3. Are there complete outcome data?	2.4. Are outcome assessors blinded to the intervention provided?	2.5 Did the participants adhere to the assigned intervention?
Uhlig et al. (2019)	Yes, Yes	Yes	Yes	Yes	Yes
Uhlig et al. (2018)	Yes, Yes	Yes	Yes	Yes	Yes
Uhlig et al. (2016)	Yes, Yes	Yes	Yes	Yes	Yes

Chapter Four: Testing the Effectiveness of a Manualized Hip-hop and Rap

Intervention

A Single Case Research Design

[2]

Abstract

In this study, I implemented the reading of hip-hop and rap lyrics in a mental health counseling setting using a manual for curriculum praxis. The data for the dependent variable were collected through the self-reported perspective of the participants through two assessment tools that measure wellbeing. The participants were five Black and African American college-aged men. I used a single case study, specifically a multiple baseline design, to demonstrate the causal effect between the independent and dependent variables. The results provided evidence supporting the use of hip-hip and rap music intervention to enrich the wellbeing of Black and African American college-age men.

Keywords: single case research, multiple baseline design, wellbeing, Black, African American, hip-hop, hip-hop and rap, rap lyrics

Introduction

Healthcare systems, including mental healthcare in the United States, have a history of ill-treatment regarding healthcare in marginalized communities (Goodwill et al., 2018). The unjust and unequal healthcare treatment has led to stigmas resulting in marginalized communities not seeking healthcare (Goowill et al., 2018). Research suggests that healthcare disparities continue to increase in marginalized communities, including Black and African American men (Bauer et al., 2020). Yet, knowing of these disparities, there is minimal research to suggest ways to improve retention and resources for Black and African American men seeking healthcare, specifically mental healthcare. This gap in the lack of resources for Black and African American men also exposes the lack of research on wellbeing and ways to improve mental health services for this population (Villegas et al., 2021). Research does report that Black and African American men have found alternative ways to cope with wellbeing through music (Bauer et al., 2020). With this information, counselors can find alternative ways to meet Black and African American men by understanding wellbeing within the population and using music as an alternative coping skill (Bauer et al., 2020).

Wellbeing

Wellbeing is defined as effective functioning in which an individual is aware of their ability to cope, be productive, and contribute to daily responsibilities in the public and private areas of their life (Tennant et al., 2007). For this study, I examined wellbeing with an emphasis on individual, interpersonal, social, and overall wellbeing as it relates to hip-hop and rap interventions that could improve the wellbeing of Black and African American college-aged men. Black and African American are used interchangeably to include individuals who may identify as both or prefer one identifier. Black is an ethnicity and shared

experience that could include a globalized group of people (Davis, 1991). African American is a race and identifies a diaspora heritage to American slavery (Stephens, 2009). According to Goodfellow et al. (2022), individual wellbeing is individually defined as a person in a good mental state who embraces positive and negative experiences. Individual wellbeing reduces the negative physical effects of poor health (Goodfellow et al., 2022). Interpersonal wellbeing examines a person's wellbeing within personal relationships and family, such as connections and interactions that are emotionally notable (Tennant et al., 2007). Social wellbeing addresses vocational, academics, and friendships in which fellowship, contribution, and beneficiation within the community are factors (Goodfellow et al., 2022). Overall, wellbeing is having a general sense of wellness, and health is adding the areas of personal, interpersonal, and social wellbeing to address a sense of health (Tennant et al., 2007). Overall, for this study, wellbeing was defined as the sum of all four areas of personal, interpersonal, social, and overall wellbeing when implementing hip-hop and rap in a counseling setting.

Population

Black and African American men suffer from more healthcare disparities than any other racial group and gender (Watkins et al., 2006). Research suggests that Black and African American men have more social and economic stress, which has led black men to find ways to cope with wellbeing and daily stressors outside of healthcare systems (Bauer et al., 2020). There is minimal research on Black and African American men outside of diabetes, same-sex relations, and HIV/Aids (Watkins et al., 2006). There is no research on wellbeing or how Black and African American men cope.

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Regardless of knowing that the disparities within this population continue to increase, research suggests little in preventable measures (Pierce et al., 2018). Research only addresses the aftermath of a condition and how it affects the community (Kresovich et al., 2021). Preventable measures are more likely to change a person's quality of life in the long term if given during youth or at an early age (Mincey et al., 2017). Black college-aged men aged 20-24 have a higher reported rate of poor wellness (Mincey et al., 2017). This information makes this group stand out for possible preventive measures to improve quality of life (Mincey et al., 2017).

Mental health counselors are ethically obligated to promote social justice and be culturally competent counselors (Washington, 2018). This includes meeting populations where they are and understanding the gaps. As stated in the previous chapter, hip-hop and rap music is an alternative coping skill for Black and African American men. Research also supports that it improves therapeutic alliance, working alliance, and retention within counseling settings (Villegas et al., 2021). Discovering these gaps led to my findings that mental healthcare professionals can work to understand the meaning of the alternative coping skills to this population and work on understanding praxis in hopes of providing services that are needed to address the uniqueness of Black and African American men's wellbeing needs (Robinson et al., 2018).

Hip-Hop and Rap in Counseling

Research shows that Black and African American men use alternative coping mechanisms, such as music, instead of therapy (Bauer et al., 2020). Research recommends the importance of the continued strive needed to understand the clients' cultural context and have empathy and recognition of biases to continuously support social change (Brooks et al.,

2020). The history of unjust treatment has alienated the population, and studies show that Black men generally do not seek care over any other sex or race (Bauer et al., 2020). Cultural competency is an ethical consideration in counseling and has been proven to improve the therapeutic alliance. However, the lack of exposure between counselors and Black and African Americans in counseling lacks cultural opportunity for both parties, resulting in a lack of research about the population and low experience (Brooks et al., 2020).

Music alone can be used as a tool to provide multicultural knowledge and promote cultural alliance (Brooks et al., 2020). Rap music is multifaceted in its communication of meaning and representation, yet it breads life into unique experiences of Black and African American men (Hadley & Yancy, 2012). Hip-hop and rap music cultivates cathartic experiences, behavior changes, and reframing of thought patterns (Elligan, 2004). Using hip-hop and rap to have relatability in lived experiences has benefited wellbeing as it is understood that Black and African American men are the least likely to seek counseling (Kresovich et al., 2021). Research suggests the benefits of using hip-hop and rap in counseling to improve the experience (Elligan, 2004). Society has not provided a space to express their emotions safely without prosecution (Jackson & Harvey Wingfield, 2013). Hip-hop and rap provide spaces for imagery, subliminal messaging, and countertransference of emotions and meanings that are aesthetic in nature (Hadley & Yancy, 2012). Although there is evidence in the literature that hip-hop and rap music is the main source of communication for Black and African American college-aged men (Kresovich et al., 2021), there are still struggles associated with using it in counseling settings (Elligan, 2004). Rap's negative connotations of violence, rage, and isms have given it a negative appeal. Isms are defined to address racism, sexism, and classism, to name a few. However, counselors process these with

clients on these lyrics if used in counseling. The elicit of meaning can be subliminal. Although these topics are hard and scary, counselors should not dismiss that these issues do not exist within the client's biopsychosocial assessment (Hadley & Yancy, 2012). This study addressed utilizing hip-hop and rap lyrics intervention in a counseling session to measure overall wellbeing in Black and African American college-aged men. This study outlined the theoretical framework, research design, intervention, and data finding through visual analysis.

Theoretical Framework

Hip-hop and rap music is popular in America and within the Black and African American culture (Robinson et al., 2018). In this study, I used rap therapy as a theoretical foundation to assist with implementing and intervening hip-hop and rap lyrics to improve the overall wellbeing of Black and African American men. Don Elligan founded Rap Therapy in 2000. Don Elligan is a psychiatrist who worked predominately with at-risk African American youth (Gonzalez & Hayes, 2009). Elligan was inspired to build rapport with the population and improve the retention of the population's receptiveness to mental health care (Gonzalez & Hayes, 2009) with the understanding that hip-hop and rap are referred to among youth. Research on rap therapy has also proven to increase empathy and relatability (Kobin & Tyson, 2006). Rap therapy is rooted in social learning theories and cognitive behavior therapy (Gonzalez & Hayes, 2009). Albert Bandura constructed social learning in 1977. Social learning theory's main tenant was observational learning, in which Don Elligan shares a significant impact on hip-hop and rap music (Elligan, 2000). CBT explores thoughts tied to a particular emotion that results in behavior. Rap therapy follows that notion by exploring a client's interconnection to a lyric through their exposition, identifying their emotion and

behavior to change outcomes (Gonzalez & Hayes, 2009). The concept of rap therapy has been explored through psychotherapy, school counselors, and social workers (Gonzalez & Hayes, 2009). The theory can be used in group and/or individual settings (Gonzalez & Hayes, 2009). Rap therapy can be used to practice cultural competence as it is based on cultural responsiveness (Robinson et al., 2018). Hip-hop and rap can help change behavior as its art form consists of communicative styles, lifestyle influence, and discussion of societal expectations (Robinson et al., 2018).

Rap therapy consists of observing clients' behavior by doing a pre-assessment and post-assessment of the client's behavior before addressing the five applications of rap therapy (Elligan, 2000). Rap therapy has five applications that address the therapeutic process (Elligan, 2000). These five applications are important when addressing cognitive behavioral therapy and social learning concepts. According to Elligan (2000), the five applications are assessment, alliance, restructuring and reframing, role play, and action and maintenance.

To commence the session, a complete assessment of the client is done to ensure they are a right fit, have been influenced by rap or hip-hop, and have been assessed for persistent mental illness (Elligan, 2000). The assessment stage consists of the client's understanding of the use of hip-hop and rap. In this stage, the counselor determines their level of listening and use of hip-hop culture. This stage allows the client autonomy over explaining the type of rap music they listen to versus the type of rap music they do not like (Gonzalez & Hayes, 2009). This provides a sense of autonomy and promotes collaboration (Elligan, 2000). For the CBT aspect, assessment is an ongoing process in case the participant's interest changes (Ay et al., 2019).

The alliance stage is the most imperative as it is the rapport-building stage (Kobin &

Tyson, 2006). This stage could take more than one session. The main goal is to show

empathy and support participants' attentiveness to rap and hip-hop. CBT considers building

rapport an ongoing activity through the therapeutic relationship (Wenzel, 2011). The alliance

stage is also a continuation stage throughout the whole process. In this stage, one builds an

alliance by understanding the clients' values, beliefs, and strengths (Kobin & Tyson, 2006).

This process is familiar in CBT as it seeks to understand how a person views themselves,

others, and the world (Wenzel, 2011). This stage is also the stage of lyric interpretation by

encouraging the client to bring in music lyrics that are important to them and using elicit

meaning for interpretation with the therapist (Gonzalez & Hayes, 2009). Attention and

retention, which are the first two principles in social learning theory, can be applied to the

alliance stage of rap therapy. Attention is meeting the client where they are and using hip-hop

and rap to show acceptance and willingness to be open to the culture. The client's attention

would encourage more discussion of concepts (Bandura, 2006). Retention can help clients

learn how to use hip-hop and rap lyrics to cope and change behaviors they deem changeable

(Bandura, 2006).

The reframing stage is a continuation of rapport and assessment (Gonzalez & Hayes,

2009) and a discussion of reframing and restructuring thought patterns. Reframing and

restructuring help identify the negative emotion, what thoughts are around that emotion, and

what behaviors arise for behavior change (Kazantzis et al., 2017). To achieve this concept,

the client and therapist explore the meaning of lyrics and how they relate to the client. This

concept is also familiar in CBT regarding reframing thought patterns into healthier positive

cognitions (Wenzel, 2011). In social learning theory, vicarious learning is the theory that

individuals are motivated to learn and change when information is relevant to them (Bandura, 2006). In this stage, clients can work on reframing and restructuring due to motivation and self-efficacy created through rapport building (Bandura, 2006).

Role-playing is one of the techniques used in CBT and can be beneficial through written exercises (Kazantzis et al., 2017). The role-playing stage is the creative portion of the five processes of rap therapy. Clients in this stage can use their creative side to create artistic forms derived from hip-hop culture. This could constitute a rap song, poem, graffiti, or dance, all of hip-hop culture's art forms (Adjapong & Levy, 2014; Washington, 2018). Specifically for this research, the analysis helped understand the meaning and other wellbeing factors identified in lyrics. A cultural barrier to the vernacular used could be hard for counselors to understand (Kobin & Tyson, 2006). Reproduction, according to social learning theory, is being able to reproduce information and concepts learned (Bandura, 2006). Role-playing is a way to assess the reproduction of an application (Bandura, 2006).

The final stage is the action and maintenance stage, which uses positive emotions found in lyrics to help with decision-making and behavior modification (Okamoto, 2019; Wenzel, 2011). This stage encourages clients to use music as a coping tool to improve their behavior or look at situations from a different perspective. Elligan, 2000) originally used this theory to improve negative behavior; however, the theory can contribute to overall wellbeing and mental disorders (Gonzalez & Hayes, 2009). In the restructuring and reframing stage, the client has to make changes and utilize tools that could improve quality (Bandura, 2006). Notably, after the assessment stage, the other applications may not fall in the same order and depend on the foci needed for the client (Elligan, 2000).

Problem Statement

There is a gap in the literature regarding overall wellness among Black and African American men. Minimal literature consists of culturally based interventions to improve overall wellbeing. There is a gap in the literature for utilizing hip-hop and rap music among college-aged Black and African American men to enhance wellbeing. Mental health professions and counselor education are ethically obligated to reach cultural competency by promoting diversity and embracing praxis that meet the client in their social and cultural text (ACA, 2016; Washington, 2018). One way of abiding by ethical obligations is to promote culturally competent tools that promote the experience of different cultures in the counseling setting (Robinson et al., 2018). Counselors need education and training to develop strategies promoting mental health engagement (Robinson et al., 2018). Due to the lack of exposure and alliance, counselors lack adequate practices regarding mental health treatment in marginalized communities (Villegas et al., 2021). This study tested the use of hip-hop and rap lyrics using a manual in the counseling setting to see if it would improve overall wellbeing. The study results are useful for counselors to provide a way to reach this particular population and encourage creative techniques. Also, with music being a global universal way of communicating and connecting, it is essential to add it as a way to strengthen rapport, bridge cultural gaps, and promote social/cultural realms.

Research Questions/Hypothesis

I measured the impact of an intervention of reading hip-hop and rap lyrics and its impact on Black and African American college-aged men, utilizing multiple baseline designs (MBD). The design tests the effectiveness of reading hip-hop and rap intervention on overall wellbeing. The following research question was used to guide this study.

1. Does the reading of hip-hop and rap lyrics intervention improve overall wellbeing for Black and African American college-aged men?

I hypothesize that the reading of hip-hop and rap lyrics intervention (independent variable) will improve overall wellbeing (dependent variable), evident through the outcomes rating scale and the satisfaction with life scale.

Methodology

Research Design

Single-case research (SCR) is most effective in a small population with three to seven subjects (Kratochwill, 2015). A multiple baseline design also uses a small population, and participants act as their own control (Kratochwill, 2015). The intervention of reading hip-hop and rap lyrics to improve mental health has not been done in SCD. Single-case research was used in this study to implement an intervention to change a particular outcome (Hitchcock et al., 2015), which was tracking self-reported overall well-being for this study. According to American Counseling Association (2014), counselors strive to do no harm and seek the best treatment practices. In multiple baseline designs (MBD), the intervention does not need to be removed or reversed, which is ideal for counselors and psychologists as interventions are used to improve the quality of life. A therapist cannot take away an intervention. Since the intervention is not moved in MBD, the researcher can measure outcomes by providing the intervention to multiple participants, settings, and outcomes (Hitchcock et al., 2015). The intervention is then manipulated by staggering the start of the intervention between participants. This study fit SCR as I explored and examined the effectiveness of hip-hop and rap lyric intervention on a particular population to see if it changes their overall wellbeing.

Independent and Dependent Variables

Independent Variable

The independent variable was the reading of hip-hop and rap lyrics intervention. I created a manual to use hip hop and rap as an intervention based on Don Elligan's Rap therapy, which consists of social learning theory and cognitive-behavioral therapy constructs. The manual assists in the treatment of fidelity to assure application and increase this study's integrity (Lewis, 2022). The treatment includes identifying rap lyrics that address overall emotional wellbeing. The researcher and participants read the lyrics and identified any individual, interpersonal, social, and overall wellbeing themes. There were prompt questions for critical thinking regarding the aesthetics of meaning, relatability, and subliminal messaging (Gonzales & Hayes, 2009). I had two outside observers review my audio recordings to address the paring of hip-hop and rap lyrics to areas of overall wellbeing as a primary source and satisfaction with life as a secondary source of wellbeing. Ninety-five percent of the sessions were observed to increase the integrity of the manualized intervention I created.

Dependent Variable

The dependent variable for the study was overall wellbeing. Overall wellbeing is defined as effective functioning in which individuals are aware of their ability to cope and produce positive mental health (Tennant et al., 2007). For the primary measurement, overall wellbeing was measured based on the sum of four areas of personal, interpersonal, social, and overall wellbeing measurements from the Outcomes Rating Scale (ORS; Duncan & Miller, 2000). These measures are unobservable to self-reported scoring. Therefore, my operation definition for traditional observable behaviors in a single case was self-reported

behavior. The ORS self-reported four areas of wellbeing, visual analog on a ruler from 0 to 10 (Janse et al., 2014). For the secondary measurement, the dependent variable used the Satisfaction with life scale, which consists of 5 normative data items that self-report a person on life satisfaction (Diener et al., 1993). I used excel to create graphs for each subject. In excel, plot graphs can be used that would need to be measured before the sessions. The graphs show the participant's performance to see if the intervention has an effect. The participants completed weekly assessments (Horner et al., 2005).

Participants and Setting

For this study, I interviewed eleven participants. Six individuals did not meet the demographics criteria. Two individuals were over the age of 25. One person did not identify as being a part of hip-hop culture. The other three could not commit to virtual sessions twice a week.

Five participants were accepted into the study. The participants were between the college age of 18-23 (Spitzer, 2000). All five participants were enrolled at two universities in South Carolina. All five were Black and African American men that were active in college. All participants were undergraduate seniors. I met all participants once or twice a week for 45 to 50 minutes via telehealth. Participants were offered a $100 visa gift card as an incentive for completing the sessions. It was sent via mail after the last day of the intervention.

I measured participants' ORS scores and reviewed demographic criteria to determine eligibility requirements. Participants that were selected had measurements of 30 and below on the ORS. The definition of low or moderate overall wellbeing is not operationally identified in the literature. According to Toland et al. (2021), there is an assumption that less wellbeing is to more psychological distress that may need additional clinical attention. For

this study, I operationally defined treatable wellbeing to scores below 77% of the sum of the ORS. Participants that met criteria also had to meet treatable wellbeing due to the research question of improving wellbeing. Prescott et al. (2017) completed a study of $n = 34,790$ to determine the cutoff requirement for clinical wellbeing. Prescott et al. (2017) wanted to define what score could improve clinically vs. what score could not be clinically treated. Any score above 77% was considered non-clinical and, therefore, not treatable (Prescott et al., 2017). Treatable ORS scores need to be 77% or below. The participants' highest score at the criteria stage was 30.5, which was 77% of 40. Please see Table 3.3 below for pre-questionnaire demographics.

The inclusion criteria for this study consisted of participants who: (a) identify as black and/or African American, (b) identify as male;,(c) identify as being a part of hip-hop culture, have a treatable ORS score (Prescott et al., 2017), (d) can meet twice a week for 50 minutes, and (e) be within college age of 18-24 (Spitzer, 2000).

Table 3.3 Participants' Demographics

SRS	Gender	Race	Hip-hop y/n	Age	College level	SRS
Participant 1	Male	AA	Y	22	Senior	39
Participant 2	Male	B/AA	Y	21	Senior	0
Participant 3	Male	AA	Y	22	Senior	40
Participant 4	Male	AA	Y	22	Senior	40
Participant 5	Male	AA	Y	23	Senior	40

Instruments

Pre-survey Questionnaire

I created a pre-survey questionnaire, which included basic information about the participants and demographic information. I collected demographics such as age, race, and

gender (Bauer et al., 2020) to ensure that the participants met the criteria for the population. For this study, I utilized self-reported instruments to measure wellbeing.

Primary Instruments

I used the ORS (Miller & Duncan, 2000) as the primary measurement for the dependent variable. According to numerous studies, psychometrics have a high consistency coefficient measurement, alpha of .93 to .97 (Bringhurst et al., 2006; Prescott et al., 2017) with an outcome of 45.2 and correlation ranging from .57 to .69 for this assessment to track the therapeutic relationship and assess for outcome measurements in clinical settings (Bringhurst et al., 2006; Moggia et al., 2021). The test-retest reliability was .80 to .84 (Bringhurst et al., 2006). According to Moggia et al. (2021), the measurement tool used for the study, the ORS, was assessed for psychometrics. It has been proven to work efficiently when assessing therapeutic relationships, engagement, and quality of care.

For this study, I used the ORS designed for individuals over 18 (Anker et al., 2009). I administered the ORS at the end of each session in the baseline and intervention stages (Anker et al., 2009). The ORS is an item assessment tool that assesses the participants' levels of wellbeing in four different areas. The areas are known to help therapists diagnose stressors as well as areas that are known to change in a counseling setting (Anker et al., 2009) with a clinical cut-off of 77% or below, meaning the stress is minimal and does not require treatment (Prescott et al., 2017). Scores are calculated using a visual scale analog of about 10 cm (about the length of the long edge of a credit card) long. The ranges read from negative, starting on the left, and positive, which is on the right (Janse et al., 2014). The scores range from 0 to 40, with higher scores equating to a higher level of wellbeing (Moggia et al., 2021). The participants measured their wellbeing by estimating where they felt they were on the

analog scale, rating each area from 1 to 10, and placing their tally where they felt they were (Janse et al., 2014). The total number represented the subject's well-being, representing a measurement point on the graph using excel.

Secondary Instrument

I used the Satisfaction with Life Scale as a secondary measurement for the dependent variable (Diener et al., 1985). This instrument consists of 5 items that use normative data (Pavot et al., 1991). The measurements range from strongly disagree to strongly agree (Diener et al., 1993). It assesses universal cognition from the perspective of life satisfaction. SWLS uses effective and judgment components with the assessment. SWLS has been shown to have validity and reliability measurements for life satisfaction of .54 for four years (Pavot et al., 1991). The assessment can be used with various age groups, races, gender, and ethnicity (Pavot et al., 1991). The assessor takes the sum of the normative data (Diener et al., 1993). The scores result from a particular satisfaction specification (Diener et al., 1993). Each item is measured with a number. I took the sum of the items and used excel to mark their sum score.

Post-Session Questionnaire

The researcher tailed the post-session questionnaire. The questionnaire was influenced by Richards et al. (2019). I provided the questions in email form to the participants and encouraged them to provide honest answers in private to allow for self-reflection on their experiences.

Session Rating Scale

Finally, I used Session Ratings Scale (SRS) at the termination session to rate the participants' experiences. The SRS is also a self-reported analog that reflects feedback that

assesses four areas for session feedback. The areas include rapport, goals, methods, and overall approach. The psychometrics have a high rate of consistency at .90 with a test-retest reliability of .64. (Prescott et al., 2017). Scores of 36 and below are considered a measurement of concern regarding session quality (Prescott et al., 2017).

Data Collection

There was a baseline period of measurement points until there was a measurement pattern (Hitchcock et al., 2015). The baseline does not include the intervention. The baseline session includes psychoeducation on counseling experience, biopsychosocial assessments, and cognitive behavioral interventions. Once measurement points were met in the baseline without the intervention, the intervention was introduced to the first participant. I used a name generator to determine which participant should start first (Lewis, 2022). The facilitator recorded the sessions for the researcher to review to ensure the proper use of the intervention. The target behavior was the wellbeing of Black and African American college-aged men. To account for the threats of validity, there was a staggered introduction of the intervention (Horner et al., 2005). For each session, the measurements of ORS and SWLS were administered, and the sum scores were placed in excel to keep track of session measurements.

Materials

The materials included an online telehealth platform with screen-sharing abilities and recordings. Visuals of song lyrics and YouTube helped to process the meaning and identify wellbeing areas of the lyrics. A copy of the hip-hop and rap manual was used. Paper for interventions was used, and occasionally, Electronic medical records (EMR) were utilized to

store notes and names for security and privacy. A self-reported assessment was done for each session.

<div align="center">**Procedures**</div>

The study was conducted as a single case research, using a multiple baseline design, a design used to test the effectiveness of interventions. Multiple baseline design requires a small population of participants. Multiple baseline design requires the staggered introduction of the intervention.

Initial Baseline

The baseline phase isolates the independent variable from the dependent variable to show causation (Heppner et al., 2018). There were 5 participants (Heppner et al., 2018). Each participant started a baseline treatment that did not include the manualized reading of hip-hop and rap lyric intervention. The baseline phase consisted of traditional psychotherapy sessions with psychoeducation on therapy, biopsychosocial assessments, and interventions. The baseline phase began at the same time for each participant. The baseline was determined by the significance of the trend (Heppner et al., 2018). The baseline lasted until a stable baseline could be seen between all subjects. Once a baseline was stabled, each subject had the intervention (independent variable) introduced. The intervention was staggered into each participant's treatment at different times (Heppner et al., 2018). Counseling sessions were conducted by a third-year doctoral candidate, a licensed professional counselor supervisor. The session was held in a counseling setting via telehealth.

Intervention Phase

The intervention phase is similar to cognitive behavior therapy, such as check-in, goal setting, and objectives. However, it adds the reading of hip-hop and rap lyrics to its objectives. The session changed to see any effects the reading of hip-hop and rap lyrics has on wellbeing. The intervention was implemented during the 50-minute sessions twice a week for the intervention period. The interventions were conducted via telehealth.

Manual

A manual is imperative for analyzing critical information to promote praxis and application (Kobin & Tyson, 2006). The intervention was based on a manual that I created using the constructs of Rap Therapy by Don Elligan (2000) and adding in the traditional tenant of social learning theory and cognitive behavioral therapy, which are two foundations that Don Elligan used when structuring Rap Therapy. Previous research has shown that using hip-hop and rap music in mental health settings is effective; however, it does not show a detailed way of analyzing the lyrics in the therapy setting (Kobin & Tyson, 2006). A manual provided examples and prompts to ensure the lyrics have a therapeutic meaning and relevance (Kobin & Tyson, 2006). The manual has an outline of 8 sessions. Some of the content of the sessions can go on for more than one session. Each session consists of a theme with questions and suggestions for lyric analysis. I created a manual for anyone to use as a guide, and it can be modified to fit different research designs. For this research, I started each session with a check-in for an ongoing assessment process. After the check-in, there was an introduction to the song. I encouraged participants to suggest their songs. There were recommendations from the researcher. The researcher and client started a discussion of the song and identified the meaning of the song, according to the client. Then, the participant

reviewed lyrics that stood out to them to find an illicit meaning to understand what area of wellbeing the lyrics fit. This session utilized two to three songs.

The intervention was implementing a hip-hop and rap therapy manual to guide sessions. Each week, the subjects read hip-hop and rap lyrics that aligned with a theme for the week. The subjects identified common themes that aligned with wellbeing. This included individual, interpersonal, social, and overall wellbeing. There were probing questions to assist with critical thinking to help identify wellbeing areas. Once the first intervention showed a basic change, the second subject got the intervention, which was repeated among each subject for some time (Heppner et al., 2018). Due to the intervention being something to learn and implement, the intervention cannot be reversed (Kratochwill et al., 2010). Therefore, maintenance was performed after the termination of services giving the client time to implement it on their own. Once the song was reviewed for areas of wellbeing, the participant completed the ORS at the end of each session. The post questions listed in the manual could be asked every session or at the facilitators' discretion to address testing threats to validity. The post questions were emailed or given to the participant to write their self-reflected questions. Also, homework was provided to encourage participants to suggest a song aligned with the next session's curriculum. The next session consisted of a check-in, bridging from the next session, and lyric analysis. This curriculum was done until the session was terminated. Please see appendix A for the manual.

Table 3.4 Outline of Table of Content for Manual

<div style="border:1px solid black;padding:10px">

Hip Hop and Rap Music Interventions to Enhance Client Mental Health and

Well-Being (Individual Therapy)

Part 1: Therapeutic session structure
Par 2: Pre-survey questionnaire
Part 3: Theoretical framework
Part 4: Curriculum and references
Part 5:   References
Part 6: Appendix 1: Song suggestions

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Treatment Fidelity

Treatment fidelity is a strategic way to evaluate the intent of using the intervention (Lewis, 2022). The researcher's team members used a fidelity checklist (Siegmund & Siedlecki, 2021). The checklist ensured the documentation of the purpose of the research and access to the research material as well as informed consent were available to participants and all research team members. Knowledge of researchers, as far as demographics, educational background, and contact information, were needed. The video recordings ensured that the intervention was being completed properly. According to Melling (2015), at least 30% of the recordings should be reviewed.

Inner Observer Agreement for Fidelity Checks

There were two Interobserver Agreements (IOA) for gatekeeping researchers' consistency of independent variables and fidelity (Horner et al., 2005). Two doctoral candidates utilized the fidelity checklist to review consented video sessions. There were 61 sessions in total, with 58 sessions being viewed. Some videos did not have sound or did not save properly on the computer. Therefore, only 95% of the videos were recorded and

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reviewed for fidelity check. The researcher trained the Interobservers on fidelity checks, IOA, and the IOA formula. The agreement calculation was session by session divided by the number of agreements and multiplied the results by 100. The results were reported by percentages. The results succeeded the minimum of at least 80% agreement to meet evidence standards (Kratochwill et al., 2010). Specifically, for this research, the fidelity check score was 88%. Both observers agreed on what they did observe vs. what they did not observe. The videos for the first two participants did not show an overview of the study, professional disclosure, and forms. This information was done before consenting to participate. The release forms and professional disclosure was sent to all participants electronically.

Threats to Validity

In single-case research, the researcher must assess threats to validity. History is when events could happen simultaneously during the treatment phases (Kratochwill et al., 2010). It should be noted that the sessions took place at the end of the semester, in which homecoming, fraternity crossovers, final exams, final projects, and holidays took place. Maturation is when natural changes happen to the subject over time, which could have the researcher questioning the effects of the intervention (Kratochwill et al., 2010). For this study, all participants were seniors and were preparing for the final semester of their undergraduate careers. There were reports of final exam stress, breakups, family conflicts, relationship conflicts, and deaths. Instrumentation was also considered due to using self-reported assessment tools in the data analysis for this study, in which participants were asked to complete measurement assessments at the end of each session. The nature of the participants' condition could change based on the subject's functioning (Kratochwill et al., 2010).

Results

Data Analysis

I measured wellbeing at the end of each session using the sum of the two scales used to measure the dependent variable. I used visual analysis to show a causal relationship due to the sample size of the MBD (Kratochwill et al., 2010). The independent variable was on the Y-axis, and the dependent variable was on the y-axis. The independent variable, the same as my intervention for the study, was reading hip-hop and rap lyrics. I created a manual to use hip-hop and rap as an intervention, which is a framework based on Don Elligan's theory of hip-hop with constructs of social learning theory and cognitive-behavioral therapy. The dependent variable was Black and African American college-aged men's mental health and wellbeing. I measured wellbeing using the outcomes measure scale. I used excel to create graphs of each participant. The graphs showed the participants' performance to see if the intervention affected the self-reported assessment results. The participants completed weekly measurements at the end of each session (Isaksson et al., 2021).

Ethical Considerations

This study was reviewed by the Institution Review Board at UofSC. Participants were aware of informed consent and the right to terminate services at any time without repercussions of the incentives. All participants were identified with a number to ensure privacy. All data were stored electronically and in a locked file cabinet.

Overall Wellbeing Results

Figure 4.1 shows the visual analysis of five participants from the study. I started collecting data in late October, which took 3.5 months to complete. All participants were undergraduate seniors at universities located in South Carolina. Data were collected during the end of the semester and into winter celebrations, resulting in possible threats to validity. My research question for this study was:

1. Does the reading of hip-hop and rap lyrics intervention improve overall wellbeing for Black and African American college-aged men?

I hypothesized that the reading of hip-hop and rap lyrics intervention (independent variable) will improve overall wellbeing (dependent variable), evident through the outcomes rating scale and the satisfaction with life scale.

Visual Analysis

Three to five basic effects are needed to show functional relationships (Hitchcock et al., 2015). There are a few aspects to address when doing a visual analysis (Hitchcock et al., 2015). According to Hitchcock et al. (2015), there are four primary steps. First, I addressed the level of data. From a visual standpoint, one can look at the vertical line to see the level that is being reported from the measurement tool. Second, I discussed and viewed the trend. I examined the line as an increasing line, decreased line, or a flat line. Next, I examined validity to find if there is a common theme to the response or if the measurement points are all over the place. Fourth, I examined the immediacy of effect. Finally, I discussed overlap, and the last one was the consistency of the pattern. The maintenance phase was a check-in with the client to see if the intervention was still working or being utilized. Vertical analysis

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is used to determine control from baseline to intervention points to verify the effectiveness of the intervention.

ORS Visual Analysis

Participant 1 was in the baseline for four sessions before the intervention was introduced in counseling. For the primary assessment of the ORS, levels are visually estimated to be around 25. The variability of the level is 25.75 for the baseline, with the highest score on ORS being 40. The trend shows a decreasing slope in the baseline stage. Once intervention was introduced in session five, there was an immediacy of effect with a variability level of 29.8 and an increase of 4.05, resulting in a decreasing trend, in this case, a negative trend. Therefore, it could be predicted that there was a negative trend in the data. The participant displayed an effect from baseline and into the intervention stage. The score on the first day of the intervention stage was 39, which was almost the maximum for the ORS. Participant 1 reported feeling very excited on the first day of intervention due to weekend festivities and being granted awards, which could have had an effect on the ORS being very high. The scores stayed consistent at a decreasing trend with minimal variability. There is overlap between the phases, with only one session outside the overlap range. This meant that the phases were not independent of each other. Although participant one showed an increase in average score for ORS and a significant increase in score from baseline to intervention, all the requirements for visual analysis were not met to determine a basic effect. Therefore, there was not enough evidence to suggest that the hip-hop and rap lyric intervention had an effect on participant 1's wellbeing.

Participant 2 was in the baseline for 5 sessions until a stable pattern was established. For the primary assessment, ORS, the levels were visually estimated from 31 to 34. With

variability, the level was 30. The baseline trend is an increasing trend. It can be a prediction

that if participant 2 stayed in baseline, the ORS could continue to increase and possibly have

a ceiling effect due to the wellbeing scores already being very high at the criteria

stage for eligibility. There was an effect introducing the intervention in which the wellbeing

score decreased with a level estimated to be 30 to 35, with the variability level at 32.

Participant 2 only attended 2 sessions within the intervention phase. There was an overlap

between phases, which meant the phases were not independent of themselves. According to

Kratochwill (2015), the participant needed at least three points in the intervention phase to

show that the participant was in treatment long enough for there to be an effect. Participant 2

did not return after the second session in the intervention phase. Therefore, there was not

enough evidence to suggest that the hip-hop and rap lyric intervention had an effect on

participant 2's wellbeing.

Participant 3 was in the baseline for 6 sessions. The prediction was if the participant

stayed in the baseline, ORS would continue to decrease. The trend in the baseline showed a

decreasing slope, with the level being 21.8. There was variability in the baseline phase. There

was a slight increase in ORS on the first day of the intervention, with an increasing score of 2

points from the baseline. The level of intervention was 26.37, with some variability. The

intervention phase has more stability, which is noticeable in session 13. The participant

reported a breakup during this session, which could have influenced the low score and

created variability. The trend for intervention was an increasing slope, meaning the ORS

scores increased in the intervention stage. The slope did change direction from baseline to

intervention, despite baseline prediction. The phases showed the overlap in sessions 3 and 4

of baseline and 10-12 of intervention. Session 14 was the only session outside the overlap

parameters, meaning that the two phases were not separate from each other. Therefore, there was not enough evidence to suggest that the hip-hop and rap lyric intervention had an effect on participant 1's wellbeing.

Participant 4 was in the baseline for seven sessions. The level in the baseline was 28, with some variability. It should be noted that participant 4 reported family conflicts in session 5, which could have influenced the decrease in scores and created minimal variability. The slope for the baseline was an increasing slope. I predicted that if participant 4 stayed at the baseline, the wellbeing score would continue to increase. There was no effect once the intervention was introduced. The intervention level was 32, which was an increase in level across phases. The trend for the baseline was a very slight increasing slope. Family conflicts were also reported in session 10, which could have influenced the low score in the intervention phase, causing minimal variability. There was overlap, which means the phases were not independent of each other. Participant 4 showed a trend in both phases of an increasing slope. Counseling may have influenced increasing the participant's ORS score; however, there was overlap and no basic effect. Therefore, there was not enough evidence to suggest that the hip-hop and rap lyric intervention had an effect on participant 4's wellbeing.

Participant 5 was in the baseline for eight sessions. The level was 31 and had a variability. The trend was an increasing slope. I predicted that if participant 5 had stayed in the baseline, the wellbeing score would continue to increase. The intervention was introduced in session 9 with a point increase in the ORS report, resulting in no immediacy of effect. The intervention level was 32. The trend for intervention was a slight decrease. The trendlines did change from baseline to intervention. There was an overlap, meaning the phases were not divided. There was consistency across phases. There was not enough evidence to show that

causation happened because of the intervention as evidenced by the ORS. Therefore, there was not enough evidence to suggest that the hip-hop and rap lyric intervention had an effect on participant 4's wellbeing.

The vertical analysis consists of looking at the baseline to determine if the participants had stability using the last three points in the baseline before being introduced to the intervention (Kazdin, 2011). Participants 2 and 4 showed changes in their wellbeing, which showed that their ORS scores increased before entering the intervention stage. Meaning their score started to increase without treatment (Kazdin, 2011). There were not at least three basic effects to show that the baseline phase differed from the intervention phase. Overall, the ORS did not indicate that the hip-hop and rap intervention effectively affected Black and African American college-aged men's overall wellbeing.

Visual Analysis for SWLS

Participant 1 was in the baseline for four sessions and was introduced to the intervention phase once stability in the baseline was established. The level in the baseline was 22. The trend was a decreasing slope in the intervention with a level of 22. I predicted that if participant 1 stayed in the baseline, the wellbeing score would continue to decrease. There was little variability in the baseline; however, there was a consistent pattern and stability. Using the last three points of the baseline phase into the intervention phase, there was an increase in the wellbeing score to show an effect. In the intervention phase, with a level of 24.37, there was an increase of 2.37. The intervention has some variability, in which the lowest point in session 10, the participant reported a death. The trend was a decreasing slope. The trend direction stayed the same in both phases. There was an overlap in data, meaning the phases were not independent of each other. There was an increase in level and

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an effect that happened once the intervention was introduced, which showed a trend towards improvement. Overall, participant one showed a basic effect; however, the intervention did improve overall wellbeing regarding SWLS.

Participant 2 was in the baseline for five sessions before moving into intervention. The baseline level was 23.6. The trend showed an increased slope with variability. There was no basic effect from the baseline into the intervention stage. The intervention trend had a flat slope, thus, no variability. As stated in the visual analysis for ORS, Participant 2 only attended 2 sessions within the intervention phase. There was an overlap between phases, which meant the phases were not independent of themselves. According to Kratochwill (2015), the participant needed at least three points in the intervention phase to show that the participant was in treatment long enough for there to be an effect. Participant 2 did not return after the second session in the intervention phase. Therefore, there was not enough evidence to suggest that the hip-hop and rap lyric intervention had an effect on participant 2's wellbeing.

Participant 3 was in the baseline for six sessions. The level was 13.1. The trend in baseline was a flat slope with variability in session four. The participant reported feeling good in session four, which may have influenced the increase in the score. However, there was stability in the baseline. There was a slight increase once the intervention phase started at 1 point. The intervention trend was an increasing slope to show scores increased over time. The intervention level was 15.5. There was an overlap between stages, which meant the phases were not independent. Session 14 was outside of the overlap. The trend lines changed direction in the intervention stage. There was stability in the phases, which meant data

collection was convincing and showed the participant did improve overall wellbeing. However, there was overlap and no basic effect.

Participant 4 was in the baseline for seven sessions before entering the intervention phase. The level in baseline and intervention was the same at 24.28. The trend in the baseline was an increasing slope. There was very low variability in both phases and stable lines. The intervention phase started in session eight. The trend line in the intervention was a flat slope. There was no immediacy of effect and no causation. The intervention did not improve satisfaction with life scores.

Participant 5 was in the baseline for eight sessions before entering the intervention phase. The level in the baseline was 19.1. The trend in baseline had a very slight increase. There was an immediacy of effect going into the intervention stage and an increase in level. The level was 23.25 in the intervention phase. There was a little variability in the baseline and no variability in the intervention phase. The trend in intervention slightly increased, in which if participant 5 stayed in intervention, it was predicted that the score would increase. In the baseline, the trend was flat. The trend did change in phases. There was no overlap. The results indicated that there was causation and that the intervention had an effect on wellbeing as it pertains to SWLS.

Using the last three data points in the baseline phase to assess for stability to see if participants had any change before entering into the baseline, participant 2 did have some changes and variability before entering the intervention phase. The other participants were stable and did not show changes before the intervention. Participant 3 showed improvement in wellbeing. Participant 5 was the only participant who showed basic effect and improvement over time. Three basic effects needed to occur to show evidence that the

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intervention was the cause of the improvement in overall wellbeing. Therefore, there was not enough evidence to indicate that the hip-hop and rap intervention affected Black and African American college-aged men's overall wellbeing.

Social Validity

Social validity is having the subjects involved in the study, whereas traditionally, a researcher would not have the subjects involved (Horner et al., 2005). Social validity is an important contribution to counseling because it allows the client to be more involved in the purpose and meaning of the experiment. In any good therapeutic relationship, transparency is key to a strong rapport and working alliance. The three areas of social validity consist of goals, interventions, and outcomes.

Goals

The research aimed to provide culturally competent intervention and provide counseling experience in marginalized communities, specifically Black and African American college-aged men. Other goals included improving retention, working alliance, and improving overall wellbeing.

Intervention & Outcomes

Another way to implement social validity for this study was to use post-session discussions. The intervention had to be done before involving participants. Therefore, to ensure that I provided social validity through collaboration with the subjects by following the three areas of social validity, I used Bishop's (1998) suggestions of CPAR to ensure I considered cultural considerations. The Outcomes Rating Scale (ORS) and Session Rating Scale (SRS) are assessment tools that assessed the participants' levels of functioning in four different areas. These areas help therapists diagnose stressors and areas that are known to

change in a counseling setting (Anker et al., 2009) for overall wellbeing. This was an important assessment to address these areas as they help to identify whether wellbeing is improving among groups (Anker et al., 2009). Scores were calculated using a visual scale analog of about 10 cm (about the length of the long edge of a credit card) long. The ranges read from negative, which started on the left, and positive, which was on the right (Janse et al., 2014). The participants measured their wellbeing level by estimating where they felt they were on the analog scale, rating it from 1 to 10, and placing their tally where they felt they were (Janse et al., 2014). The total scales represented one group (Janse et al., 2014). The total number represented the wellbeing of the subject, and that number represented a measurement point on the graph using excel. Since I relied on visual analysis, I had a team member help with appropriate measurement points and averages of each reported wellbeing measure from the ORS. The SRS was provided to participants to rate the sessions. Four out of five participants completed SRS. Participant 1 provided an SRS of 39, and participants three, four, and five provided 40 each for SRS. Therefore, the score of SRS was 99%. Participants reported having difficulty discussing personal issues in counseling and the sessions being very structured. There were also post-session questions that were provided for self-reflection. The possibility for the intervention not working may have been in the dislike for structure and possibly not having autonomy over the sessions. It was also reported that one participant wished that the lyrics were more connected to the session.

Discussion

Main Findings

In summary, out of the five participants, only one showed a basic effect. The other four did not show a basic effect. There was a visual overlap of three or more sessions; however, the actual reporting numbers on the ORS were slightly different. The slope did change direction for four of the five participants. Participant one and participant three showed that the intervention did improve overall wellbeing. Participant two did not have enough data points for a conclusion. Participant three showed a flat response intervention. Therefore, there were not enough preliminary findings to conclude that implementing the hip-hop and rap intervention to Black and African American college-aged men improves overall wellbeing for the primary measurement. Two out of the five participants showed a basic effect with SWLS, which was participant one and participant five. Participant two did not have enough data points. Participants three and four did not show a basic effect. Participant three was the only participant with a slope change. Therefore, there was enough evidence to conclude that implementing the hip-hop and rap intervention to Black and African American college-aged men affects satisfaction with life. The visual analysis could conclude that implementing this intervention did not improve the overall wellbeing within the primary measure. Although I could not conclude a functional relationship between hip-hop, rap intervention, and wellbeing, the participants had positive self-reports and responses to the end of sessions questions and the SRS given during the last session in the intervention phase. More than likely, the intervention did not work for a few reasons. The sessions were reportedly fun and cathartic; however, the ORS score for that day may not have matched the sessions. Examples of this were apparent in participants 1 and 2, who reported having deaths

and breakups, but still reported high wellbeing scores in those sessions. The ORS asked for overall wellbeing for the week. It may not have been the best measurement for the sessions. This may be justifiable in seeing the difference in the SWLS regarding consistency and stability. As stated before, there was a possibility of the ceiling effect (Meier & Feeley, 2022) in the baseline due to the high wellbeing scores in the baseline with little change in intervention

Limitations

Some limitations consist of the threats to validity and the manual. There was a possibility of history and maturation. As history is an outside influence that could affect the intervention, maturation is an aspect that changing it could affect the mood or emotional stance. The sessions were conducted at the end of the semester when there were lots of activities and deadlines. The manual was created as a guide for eight counseling sessions. It was not specifically tailored to a particular design, such as a multiple baseline. Therefore, the questions and some of the content suggested for each session were skipped over or not asked due to testing. I used at least two assessment tools in each session and did not want to provide too many variables for testing fatigue. Also, depending on the mood or personality of the client, the song choices may not have actually fit the theme. The fidelity check used did not match the flow of the sessions for the first two participants' sessions in the baseline phase. For example, the fidelity check reports discussed the purpose of the research. This process was done with all 11 interviewees but was not recorded. Recordings were done with individuals who agreed to participate. Furthermore, there were limitations when using single-case research. According to Kratochwill (2015), a small number of participants is difficult for generalization. Single-case research can be very time-consuming. Sessions were two times a

week for 50 minutes, which could lead to testing fatigue. Visual analysis is subjective, meaning the interpretations could be different per analyst. Therefore, it was hard to determine or wean out threats to validity. Another limitation was distinguishing traditional therapy in baseline versus intervention therapy. The baseline consists of traditional therapy, which may include tenants of cognitive behavioral therapy. Because rap therapy consists of tenants of cognitive behavioral therapy, I intended to avoid including some of the same treatment suggestions from the intervention phase. An example was the CBT tenant of reframing and restructuring. There was no use of this tenant in the baseline. It should also be noted that the ceiling effect may have affected the outcome of the scoring for my primary measurement, ORS. The ceiling effect is defined as the independent variable that does not affect the dependent variable (Meier & Feeley, 2022). Although each participant met the criteria for treatable wellbeing (Prescott et al., 2017), their scores were still consistent and showed that they still had a good sense of wellbeing. Social validity indicated too much structure in sessions and the need for the lyrics to connect to the session. However, because of their scoring and the research design that I used, this may have led to insufficient evidence that the intervention had an effect on their wellbeing. If this study is replicated, the ORS score should be adjusted during the criteria stage. The sessions were telehealth and not in person, which could have also influenced the outcomes of the wellbeing being self-reported scores. Although there is still a need for empirical research to understand the impact of telehealth vs. in-person counseling sessions, Gerton et al. (2023) suggest that there is proof that the quality of counseling is still present in online sessions, resulting in little difference as it pertains to the experience of the client.

Implications for Future Research and Practice

Although this study did not show that the reading of hip-hop and rap lyrics intervention did not improve overall wellbeing, as it pertains to the ORS and SWLS, there are still implications for the future to assist in replications or creating stronger interventions. This study can be replicated to improve manual and treatment outcomes on the scale rating. The manual should continue to be revised for guidance. This study contributes to studies focused on the wellbeing of Black and African American men and promotes care in this particular population. Further research is needed to assess the influence of in-person sessions versus virtual ones (Gerton et al., 2023). Counselors may utilize this as evidence-based research in the areas of wellbeing in marginalized communities, hip-hop and rap counseling programs, praxis, and interventions. Research promotes the use of hip-hop and rap in hopes of breaking negative connotations and dismantling stereotypes in the culture and healthcare settings. The research study can be used among various counseling professions, including mental health, school counseling, and counselors in training. This research study is an essential tool to address distinct coping skills such as hip-hop and rap music and forms a foundation for counselors to help build rapport and working alliances within marginalized communities, specifically Black and African American men (Ahmadi, 2011). Previous research shows participants creating their own music (Levy, 2019). Researchers can explore the difference between autonomy over creating music and using other artists' lyrics for therapy. Also, most of the research was in group settings, which could change the therapeutic relationship through empowerment and cohesiveness.

Chapter Summary

Chapter four discussed the research study using single case research, specifically multiple baseline designs across participants. The research design was used to test the effects of reading hip-hop and rap music among college-aged Black and African American men to improve their wellbeing. A hip-hop manual was created to guide implementing of hip-hop and rap into sessions. The results of this study do not indicate that the intervention affected the overall wellbeing of the primary measurement. There was an effect shown within the secondary measurement for one person. However, there was positivity from the research study, which provided insight into ways to improve the manual for replication. Chapter five discusses results, future research, limitations, and implications in the counseling field.
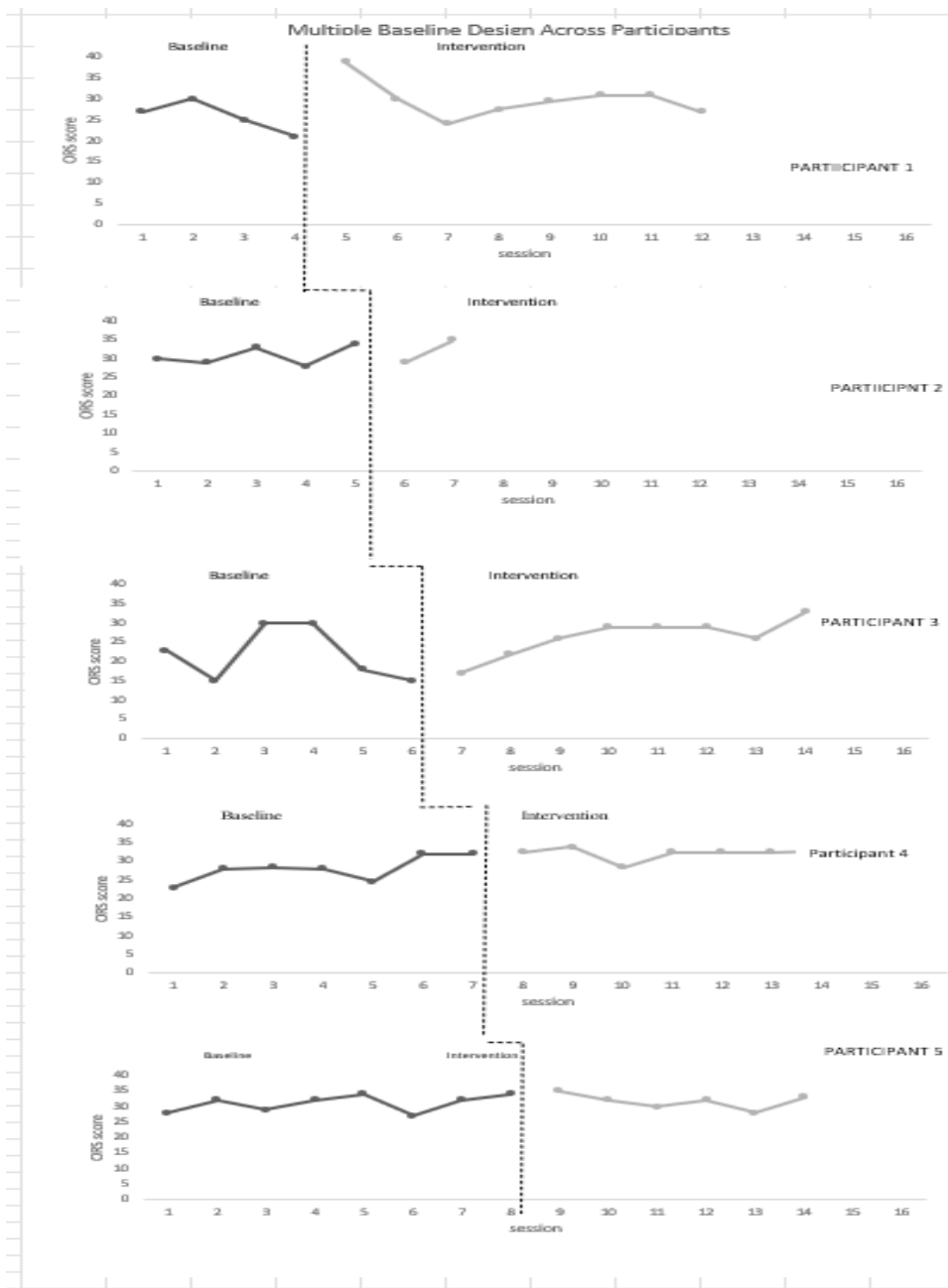
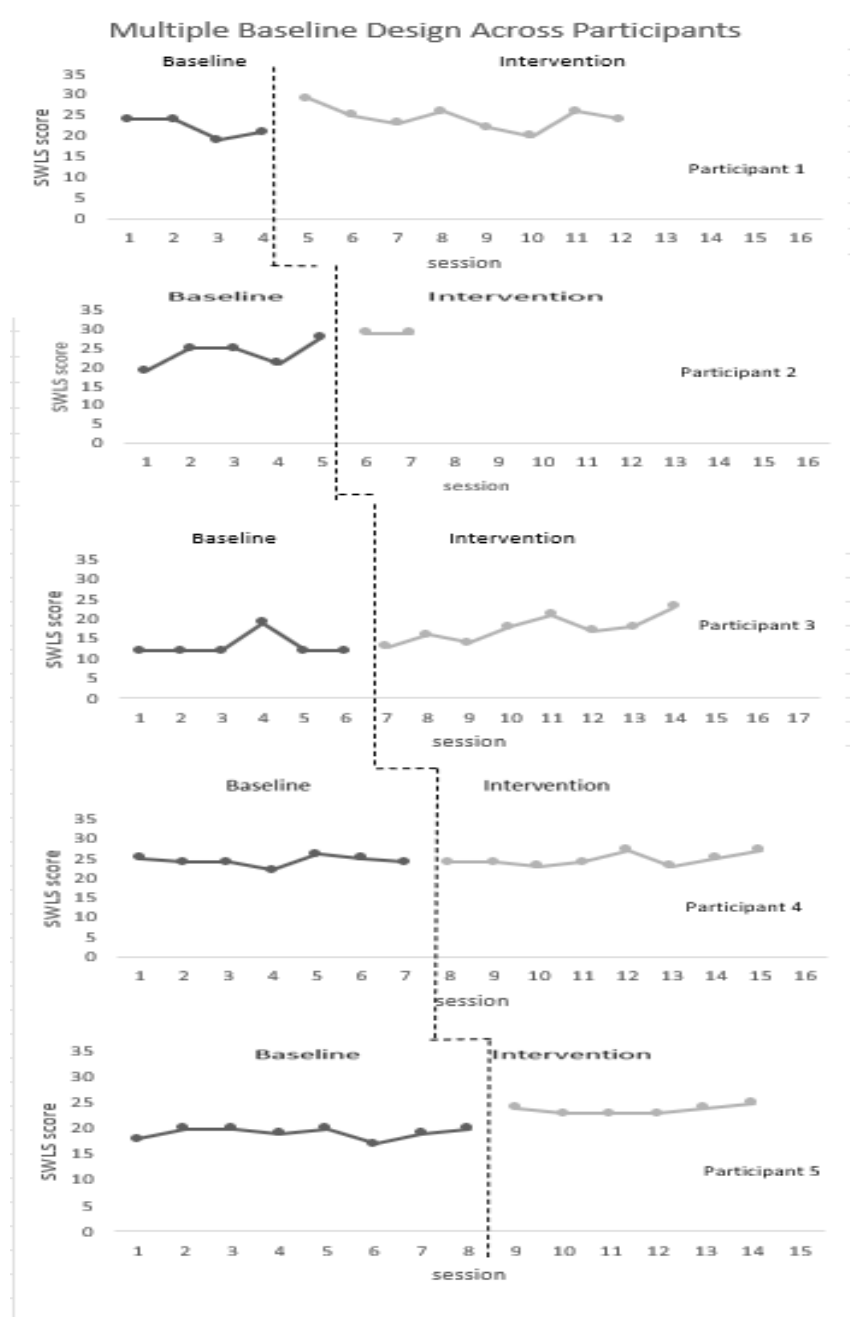Figure 4.1 Participants' Outcomes Rating Scale

Figure 4.2 Participants' Satisfaction with Life Scale

Chapter Five: Discussion

Results

Results from Study One

The systematic review completed for study one identified limited empirical research on utilizing hip-hop and rap in counseling. Ten articles that were reviewed indicated that hip-hop and rap music improves the counseling experience for minorities and vulnerable populations. Most articles showed that hip-hop and rap improve emotional awareness, rapport, and empowerment. However, there is a deficiency in evidence-based practices to determine a strong validity for using the modality. Thus, making it difficult to justify its use and replication suggestions from researchers for professional use.

More research is needed to assist with understanding the importance of hip-hop and its therapeutic use. The research does support that hip-hop and rap music interventions improve client experiences. Hip-hop and rap improve gaps in cultural awareness as it connects counselors with historically marginalized populations who have often been apprehensive about engaging in the counseling process. Providing unique interventions to experiences and cultural context is likely to improve the therapeutic relationship.

Results from Study Two

Study two, the multiple baseline designs, shows evidence that there are no three basic effects from the collected data to conclude the causation of implementing a hip-hop and rap intervention to improve the wellbeing of Black and African American college-aged men. As stated previously, the participant did show an effect. Session five had the highest effect, in

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which participant 1 reported having a "great weekend" and receiving an award. Participant 3 showed an increasing trend. There were not three basic effects to show causation that the intervention worked. One out of the five participants showed a basic effect for SWLS. There was a visual overlap of three or more sessions; however, the slope changed direction for four participants. Participants one and three showed that the intervention improved overall wellbeing. Both of these participants did have reports of concerns that were happening outside of the session, such as deaths and breakups. Participant 4 reported family conflicts. Participant 2 stopped coming without an explanation. Participant two did not have enough data points for a conclusion within the intervention phase to determine the effect. Participant three showed a flat response in the intervention phase. Therefore, there was not enough evidence within the visual analysis to conclude that implementing the hip-hop and rap intervention to Black and African American college-aged men improves overall wellbeing as it pertains to the ORS. Participant 5 showed a basic effect with SWLS, as indicated in participants two and five. Participant two did not have enough data points for a conclusion. Participants three and four did not show a basic effect. Participant three was the only participant with a slope change. Therefore, there was enough evidence to conclude that implementing the hip-hop and rap intervention to Black and African American college-aged men improves satisfaction with life. The visual analysis could conclude that implementing this intervention did not improve wellbeing. Although I could not conclude a functional relationship between hip-hop and rap intervention and wellbeing with my primary

measurement, the participants had positive self-reports and responses to the end of sessions questions and the SRS given during the last session in the intervention phase.

Limitations for Study One

For the systematic review, I only reviewed empirical research that utilized hip-hop and rap in counseling. Other articles that discussed hip-hop and rap that were not empirical were eliminated. However, these articles promoted hip-hop and rap in counseling settings and counselor education. The populations used in the articles were not diverse in age range and vulnerable populations. Also, based on the search terms, some articles may not have shown results in the search. Using MMAT to assess the article that was used, the options for assessment limited the explanation of the articles (Lewis, 2022).

Limitations for Study Two

There were a few limitations to the study. Visual analysis may have been unreliable because it was based on a person's visual ability and may differ from individual to individual in assessing visual analysis (Wolfe et al., 2019). My experiences with hip-hop and rap can influence outcomes. Limiting the intervention to one kind of genre could limit the validity of the results (Rahman et al., 2021). Multiple baselines can be time-consuming. Due to being time-consuming, retention was hard to accomplish at the time. Maturation and history would be hard to detect due to the time of the semester and federal acknowledgment holidays. No signature statistical measure can be used for a single case outside TauU. TauU cannot detect the basic effect of behavior. Usually, single-case research is for direct observable behaviors, in which, for this study, the behavior was self-reported. This resulted in utilizing measurement tools with strong psychometrics and participant participation (Lewis, 2022). The fidelity checklist did not match the flow of the session, so I had to go back and ensure

parts of the fidelity check were in the session. Finally, I created and tested the manual. Although I used an established theory, the manual was structured for anyone to provide at least eight sessions. The manual can be used as a guide and suggestion and can be modified depending on needs and research design.

Implications for Counseling and Counselor Education

The implications of this study can support counselors that want to utilize hip-hop and rap lyrics or hip-hop culture in a counseling setting. Counselors can use these two studies as a guide to implementing the praxis of hip-hop and rap lyrics into counseling. Additionally, this research can support empirical evidence-based practices that are culturally competent. The manual provides guidance and prompts to the flow of sessions (Lewis, 2022). The manual can be replicated and improved to create culturally responsive praxis to use in counselor education and within practicing settings (Levy & Adjapong, 2020). Since there is a gap in the literature on the wellbeing of Black and African American college-aged men, this study added to that gap. Counselor educators can use the findings in the study to discuss creativity in a counseling setting, ways to promote social justice, and concepts that would improve the cultural gap between counselors and particular populations.

Implications for Future Research

In this dissertation, I used a multiple baseline design to investigate implementing the reading of hip-hop and rap music as a mental health intervention to improve the well-being of Black and African American college-aged men. I used visual analysis to share results of the data trends, variability, levels, addressing overlap, immediacy, and consistency. Many studies have used music as therapy and other forms of mental health interventions. However, there is minimal research on using hip-hop and rap genre. There is still a need for more

research to be done using the research design from this study and research design in general. Rahman et al. (2021) suggest that no love of evidence-based research discusses how music affects the human experience. The hope is that this research would provide evidence to use hip-hop and improve awareness of the variety of research that can be used within different populations. The sessions for this research were online. Further research is needed to assess the difference between online sessions versus in-person sessions to see if the relationship and outcomes change (Gerton et al., 2023). The finding in this research can explore qualitative research designs to include mixed methods that can examine more of the participants' personal experiences.

If I were to do this study again, I would work on the initial ORS scale during the criteria stage. Instead of selecting participants under 77% of treatable ORS, I would do 25% to 60%. These thresholds will possibly eliminate or decrease ceiling effects and provide enough wellbeing that may not include psychological distress, resulting in the participant needing more than therapy that focuses on wellbeing. I would conduct one session a week instead of two to decrease testing fatigue. I would still conduct virtual appointments. I would work on connecting the lyrics to the session and work on ways to encourage the client to suggest more topics that they wish to discuss. Finally, the reading of hip-hop and rap lyrics can be tested in different settings, populations, sample sizes, and research designs, which would help build evidence on which population and settings would benefit from exploring different ways to make the intervention work.

Conclusion

The purpose of this research was to promote the use of hip-hop and rap in hopes of breaking negative connotations and dismantling stereotypes in the culture and healthcare

settings. The gap that led to this study was the lack of physical well-being among Black and African American men. The use of coping skills in counseling has not improved overall well-being. The limited research that has been conducted shares that media, specifically hip-hop and rap, is the primary go-to for coping skills and understanding well-being among the population (Gonzalez & Hayes, 2009). Therefore, reading hip-hop and rap lyrics could be a creative intervention tool (Adjapong & Levy, 2021) to improve cultural humility between therapists and clients and promote wellness functioning. Because of the findings of this research, this study would add to evidence-based research and potentially inspire more research on hip-hop and rap. Participants were able to experience counseling pro-bono and find comfort in the flow. This study helped to break cultural stigmas. The hope is that this research allows counselors to think outside of traditional therapy practices to meet clients where they are as we continue to work on counselors who are exemplar examples of cultural competencies and social justice. The research study can continue to focus on the methodology for research design and actual research findings to share the basic effects of hip-hop and rap interventions.

References

Adjapong, E., & Levy, I. (2021). Hip-hop can heal: Addressing mental health through hip-hop in the urban classroom. *The New Educator*, *17*(3), 242-263. https://doi.org/10.1080/1547688X.2020.1849884

Ahmadi, F. (2011). Song lyrics and the alteration of self-image. *Nordic Journal of Music Therapy*, *20*(3), 225-241. https://doi.org/10.1080/08098131.2010.522718

Alridge, D. P., & Stewart, J. B. (2005). Introduction: Hip hop in history: Past, present, and future. *The Journal of African American History*, *90*(3), 190-195. https://www.journals.uchicago.edu/doi/epdf/10.1086/JAAHv90n3p190

American Counseling Association. *2014 ACA code of ethics*. https://www.counseling.org/docs/default-source/default-document-library/2014-code-of-ethics-finaladdress.pdf

American Music Therapy Association. (n.d.). *What is music therapy?* Retrieved December 8, 2020, from https://www.musictherapy.org/

Anker, M. G., Duncan, B. L., & Sparks, J. A. (2009). Using client feedback to improve couple therapy outcomes: a randomized clinical trial in a naturalistic setting. *Journal of Consulting and Clinical Psychology*, *77*(4), 693. https://psycnet.apa.org/doi/10.1037/a0016062

Armstrong, R., Hall, B. J., Doyle, J., & Waters, E. (2011). 'Scoping the scope of a cochrane review. *Journal of Public Health*, *33*(1), 147-150. https://doi.org/10.1093/pubmed/fdr015

Armstrong, S. N., & Ricard, R. J. (2016). Integrating rap music into counseling with

    adolescents in a disciplinary alternative education program. *Journal of Creativity in*

    Mental Health, *11*(3-4), 423–435. https://doi.org/10.1080/15401383.2016.1214656

Ay, D. S., Kühne, F., & Weck, F. (2019). The assessment of cognitive-behavioral therapy

    skills in patients diagnosed with health anxiety: Development and pilot study on an

    observer-based rating scale. *Clinical Psychology & Psychotherapy*, *26*(6), 639-649.

    https://doi.org/10.1002/cpp.2387

Bandura, A. (2006). Toward a psychology of human agency. *Perspectives on Psychological*

    Science, *1*(2), 164-180. https://doi.org/10.1111/j.1745-6916.2006.00011.x

Barkham, M., Broglia, E., Dufour, G., Fudge, M., Knowles, L., Percy, A., Turner, A., &

    Williams, C. (2019). Towards an evidence-base for student wellbeing and mental

    health: Definitions, developmental transitions and data sets. *Counselling and*

    Psychotherapy Research, *19*(4), 351-357. https://doi.org/10.1002/capr.12227

Bauer, A. G., Christensen, K., Bowe-Thompson, C., Lister, S., Aduloju-Ajijola, N., &

    Berkley-Patton, J. (2020). "We are our own counselor": Resilience, risk behaviors,

    and mental health service utilization among young African American

    men. *Behavioral Medicine*, *46*(3-4), 278-289.

    https://doi.org/10.1080/08964289.2020.1729087

Beach, D., & Sernhede, O. (2012). Learning processes and social mobilization in a Swedish

    metropolitan hip-hop collective. *Urban Education, 47*(5), 939-958. https://doi-

    org.pallas2.tcl.sc.edu/10.1177/0042085912437415

Bringhurst, D. L., Watson, C. W., Miller, S. D., & Duncan, B. L. (2006). The reliability and

    validity of the Outcome Rating Scale: A replication study of a brief clinical measure.

    Journal of Brief Therapy, 5, 23–30. https://www.scottdmiller.com/wp-

    content/uploads/JBTORSReplication.pdf

Brooks, M., Wolfgang, J., Adams, J., Armstrong, N., & Cassidy, R. (2020). Using rap music

    to better understand African American experiences. *Journal of Creativity in Mental*

    Health, *15*(4), 457-473. https://doi.org/10.1080/15401383.2020.1732251

Bhugra, Till, A., & Sartorius, N. (2013). What is mental health? *International Journal of*

    Social Psychiatry, *59*(1), 3–4. https://doi.org/10.1177/0020764012463315

Coyne, S. M., Rogers, A. A., Zurcher, J. D., Stockdale, L., & Booth, M. (2020). Does time

    spent using social media impact mental health?: An eight year longitudinal

    study. *Computers in Human Behavior*, *104*, 106160.

    https://doi.org/10.1016/j.chb.2019.106160

Davis, F. J. (1991). Who is Black. *One Nation's Definition*, *10*.

    https://doi.org/10.1017/S0898030600006266

Diener, E., Sandvik, E., Seidlitz, L., & Diener, M. (1993). The relationship between income

    and subjective well-being: Relative or absolute?. *Social Indicators Research*, *28*, 195-

    223. https://doi.org/10.1007/BF01079018

Duncan, B. L., & Miller, S. D. (2000). The client's theory of change: Consulting the client in

    the integrative process. *Journal of Psychotherapy Integration*, *10*, 169-187.

    https://doi.org/10.1023/A:1009448200244

Elligan, D. (2000). Rap therapy: A culturally sensitive approach to psychotherapy with

young African American men. *Journal of African American Men*, 27-36.

https://www.jstor.org/stable/41819404

Elligan, D. (2004). *Rap therapy: A practical guide for communicating with youth and young*

adults through rap music. Kensington Publishing Corp.

Elligan, D. (2012). Contextualizing rap music as a means of incorporating into

psychotherapy. In *Therapeutic uses of rap and hip-hop* (pp. 27-38). Routledge.

Esiaka, D., Naemi, P., Kuofie, A., & Hess, R. (2019). General well-being in adult Black

males with chronic illness. *Gerontology and Geriatric Medicine*, *5*,

2333721419855664.

https://journals.sagepub.com/doi/pdf/10.1177/2333721419855664

Evans, D. J. (2010). The challenge of treating conduct disorder in low-resourced settings:

Rap music to the rescue. *Journal of Child & Adolescent Mental Health, 22*(2), 145-

152. https://doi-org.pallas2.tcl.sc.edu/10.2989/17280583.2010.528581

Gerton, A. K., León, G. A., Bludworth, J., Spille, S., & Holzapfel, J. (2023). Outcomes in

clients transitioning from in-person counselling to telehealth counselling with

trainees. *Counselling and Psychotherapy Research*, *23*(1), 188–197.

https://doi.org/10.1002/capr.12541

Gonzalez, T., & Hayes, B. G. (2009). Rap music in school counseling based on Don Elligan's

rap therapy. *Journal of Creativity in Mental Health*, *4*(2), 161-172.

https://doi.org/10.1080/15401380902945293

Goodfellow, C., Hardoon, D., Inchley, J., Leyland, A. H., Qualter, P., Simpson, S. A., & Long, E. (2022). Loneliness and personal well-being in young people: Moderating effects of individual, interpersonal, and community factors. *Journal of Adolescence*, *94*(4), 554-568. https://doi.org/10.1002/jad.12046

Goodwill, J. R., Watkins, D. C., Johnson, N. C., & Allen, J. O. (2018). An exploratory study of stress and coping among Black college men. *American Journal of Orthopsychiatry*, *88*(5), 538. https://doi.org/10.1037/ort0000313

Hadley, S., & Yancy, G. (Eds.). (2012). *Therapeutic uses of rap and hip-hop*. Routledge. https://doi.org/10.4324/9780203806012

Hitchcock, J. H., Kratochwill, T. R., & Chezan, L. C. (2015). What Works Clearinghouse standards and generalization of single-case design evidence. *Journal of Behavioral Education*, *24*, 459-469. https://doi.org/10.1007/s10864-015-9224-1

Hong, Q. N., Fàbregues, S., Bartlett, G., Boardman, F., Cargo, M., Dagenais, P., Gagnon, M. P., Griffiths, F., Nicolau, B., O'Cathain, A., Rousseau, M.-C., Vedel, I., & Pluye, P. (2018). The Mixed Methods Appraisal Tool (MMAT) version 2018 for information professionals and researchers. *Education for Information*, *34*(4), 285–291. https://doi.org/10.3233/EFI-180221

Horner, R. H., Carr, E. G., Halle, J., McGee, G., Odom, S., & Wolery, M. (2005). The use of single-subject research to identify evidence-based practice in special education. *Exceptional Children*, *71*(2), 165-179. https://doi.org/10.1177/001440290507100203

Jackson, B. A., & Harvey Wingfield, A. (2013). Getting angry to get ahead: Black college

    men, emotional performance, and encouraging respectable masculinity. *Symbolic*

    Interaction, *36*(3), 275-292. https://doi.org/10.1002/symb.63

Johnson, P. D. (2016). Somebodiness and its meaning to African American men. *Journal of*

    Counseling & Development, *94*(3), 333-343. https://doi.org/10.1002/jcad.12089

Kaler, L. S., Stebleton, M. J., & Potts, C. (2020). "It makes me feel even worse":

    Empowering first-year women to reconsider social media's impact on mental

    health. *About Campus*, *24*(6), 10-17. https://doi.org/10.1177/1086482219899650

Kazantzis, N., Brownfield, N., Mosely, L., Usatoff, A., & Flighty, A. (2017). Homework in

    Cognitive Behavioral Therapy: A systematic review of adherence assessment in

    anxiety and depression (2011-2016). *The Psychiatric Clinics of North America, 40*(4),

    625–639. https://doi.org/10.1016/j.psc.2017.08.001

Kazdin, A. E. (2011). Evidence-based treatment research: Advances, limitations, and next

    steps. *American Psychologist*, *66*(8), 685.

    https://psycnet.apa.org/doi/10.1037/a0024975

Kobin, C., & Tyson, E. (2006). Thematic analysis of hip-hop music: Can hip-hop in therapy

    facilitate empathic connections when working with clients in urban settings? *The Arts*

    in Psychotherapy, 33(4), 343-356. https://doi.org/10.1016/j.aip.2006.05.001

Kratochwill, T. R. (2015). Single-case research design and analysis: An overview. *Single-*

    Case Research Design and Analysis (psychology Revivals), 13-26.

Kratochwill, T. R., Hitchcock, J., Horner, R. H., Levin, J. R., Odom, S. L., Rindskopf, D. M.,

    & Shadish, W. R. (2010). Single-case designs technical documentation. *What Works*

    Clearinghouse.

Kresovich, A., Collins, M. K. R., Riffe, D., & Carpentier, F. R. D. (2021). A content analysis of mental health discourse in popular rap music. *JAMA Pediatrics*, *175*(3), 286-292. https://doi.org/10.1001/jamapediatrics.2020.5155

Levy, I., & Travis, R. (2020). The critical cycle of mixtape creation: Reducing stress via three different group counseling styles. *The Journal of Specialists in Group Work, 45*(4), 307-330. https://doi.org/10.1080/01933922.2020.1826614

Levy, I. P. (2012). Hip hop and spoken word therapy with urban youth. *Journal of Poetry Therapy*, *25*(4), 219–224. https://doi.org/10.1080/08893675.2012.736182

Levy, I. P. (2019). Hip-Hop and spoken word therapy in urban school counseling. *Professional School Counseling*, *22*(1b), 2156759–. https://doi.org/10.1177/2156759X19834436

Levy, I. P. (2020). "Real recognize real": *Journal of Humanistic Counseling, 59*(1), 38-53. https://doi.org/10.1002/johc.12128

Levy, I. P., & Adjapong, E. S. (2020). Toward culturally competent school counseling environments: Hip-hop studio construction. *Professional Counselor, 10*(2), 266-284. https://doi.org/10.15241/ipl.10.2.266

Levy, I. P., Hess, C. W., Elber, A., & Hayden, L. (2021). A community-based intervention: A hip hop framework toward decolonizing counseling spaces. *Journal of Creativity in Mental Health*. https://doi.org/10.1080/15401383.2020.1762816

Lewis, O. J. (2022). *Effectiveness of an EcoWellness Intervention for College Aged Individuals with a Developmental Disability* (Doctoral dissertation, University of South Carolina).
https://www.proquest.com/openview/a60f680bafccdbb6a2ff880ff251d657/1?pq-origsite=gscholar&cbl=18750&diss=y

Lindsey, M. A., & Marcell, A. V. (2012). "We're going through a lot of struggles that people don't even know about": The need to understand African American males' help-seeking for mental health on multiple levels. *American Journal of Men's Health, 6*(5), 354-364. https://doi.org/10.1177/1557988312441520

MacDonald, J., & Ahearn, W. H. (2015). Teaching observational learning to children with autism. *Journal of Applied Behavior Analysis*, *48*(4), 800-816.
https://doi.org/10.1002/jaba.257

Manwell, L. A., Barbic, S. P., Roberts, K., Durisko, Z., Lee, C., Ware, E., & McKenzie, K. (2015). What is mental health? Evidence towards a new definition from a mixed methods multidisciplinary international survey. *BMJ Open*, *5*(6), e007079.
https://doi.org/10.1136/bmjopen-2014-007079

Meier, S. T., & Feeley, T. H. (2022). Ceiling effects indicate a possible threshold structure for working alliance. *Journal of Counseling Psychology*, *69*(2), 235.
https://psycnet.apa.org/doi/10.1037/cou0000564

Melling, R. (2015). Single case research methodology: Applications in Special Education and Behavioral Sciences. https://doi.org/10.1080/02667363.2014.993822

Mincey, K., Turner, B. L. B. L., Brown, A. A., & Maurice, S. S. (2017). Understanding

 barriers to healthy behaviors in college black men in college Black men. *Journal of*

 American College Health, *65*(8), 567–574.

 https://doi.org/10.1080/07448481.2017.1360305

Miller, S. D., & Duncan, B. L. (2000). The Outcome Rating Scale. Chicago: Author.

Moggia, D., Niño-Robles, N., Miller, S. D., & Feixas, G. (2021). Psychometric properties of

 the Session Rating Scale 3.0 in a Spanish clinical sample. *British Journal of*

 Guidance & Counselling, *49*(5), 648-659.

 https://doi.org/10.1080/03069885.2020.1778635

O'Callaghan, C. (2004). Identifying comparable therapeutic foundations between "musical

 re-play" and improvisation: Cancer research inspires a hybrid perspective. *Nordic*

 Journal of Music Therapy, *13*(2), 127-142.

 https://doi.org/10.1080/08098130409478109

Ohrt, J., Foster, J., Hutchinson, T., & Ieva, K. (2009). Using music videos to enhance

 empathy in counselors-in-training. *Journal of Creativity in Mental Health, 4*(4), 320–

 333. https://doi-org.pallas2.tcl.sc.edu/10.1080/15401380903372539

Okamoto, D. (2019). The therapeutic relationship in cognitive-behavioral therapy: Essential

 features and common challenges. *Practice Innovations (Washington, D.C.), 4*(2),

 112–123. https://doi.org/10.1037/pri0000088

Outten, H. R., Schmitt, M. T., Garcia, D. M., & Branscombe, N. R. (2009). Coping options:

 Missing links between minority group identification and psychological well-

 being. *Applied Psychology: An International Review, 58*(1), 146–170.

 https://doi.org/10.1111/j.1464-0597.2008.00386.x

Owens, C., Crone, D., Kilgour, L., & El Ansari, W. (2010). The place and promotion of

    well-being in mental health services: A qualitative investigation. *Journal of*

    Psychiatric and Mental Health Nursing, *17*(1), 1-8. https://doi.org/10.1111/j.1365-

    2850.2009.01480.x

Page, M. J., McKenzie, J. E., Bossuyt, P. M., Boutron, I., Hoffmann, T. C., Mulrow, C. D.,

    Shamseer, L., Tetzlaff, J. M., Akl, E. A., Brennan, S. E., Chou, R., Glanville, J.,

    Grimshaw, J., Hróbjartsson, A., Lalu, M. M., Li, T., Loder, E. W., Mayo-Wilson, E.,

    McDonald, S., … Moher, D. (2021). The PRISMA 2020 statement: An updated

    guideline for reporting systematic reviews. *International journal of surgery*, *88*,

    105906. https://doi.org/10.1016/j.ijsu.2021.105906

Paukste, E., & Harris, N. (2015). Using rap music to promote adolescent health: A pilot study

    of VoxBox. *Health Promotion Journal of Australia*, *26*(1), 24–29. https://doi-

    org.pallas2.tcl.sc.edu/10.1071/HE14054

Pavot, W., Diener, E., Colvin, C. R., & Sandvik, E. (1991). Further validation of the

    Satisfaction with Life Scale: Evidence for the cross-method convergence of well-

    being. *Social Indicators Research, 57,* 149–

    161. http://dx.doi.org/10.1207/s15327752jpa5701_17

Pierce, J., Zhdanova, L., & Lucas, T. (2018). Positive and negative affectivity, stress, and

    well-being in African-Americans: Initial demonstration of a polynomial regression

    and response surface methodology approach. *Psychology & Health*, *33*(4), 445-464.

    https://doi.org/10.1016/j.paid.2016.05.254

Prescott, D. S., Maescalck, C. L., & Miller, S. D. (Eds.). (2017). Feedback-Informed Treatment in

    Clinical Practice: Reaching for Excellence. American Psychological Association.

    http://www.jstor.org/stable/j.ctv1chs647

Prichard, S. (2012). Practice makes perfect? Effective practice instruction in large

    ensembles. *Music Educators Journal*, *99*(2), 57-62.

    https://doi.org/10.1177/0027432112458458

Rahman, J. S., Gedeon, T., Caldwell, S., Jones, R., & Jin, Z. (2021). Towards effective music

    therapy for mental health care using machine learning tools: Human affective

    reasoning and music genres. *Journal of Artificial Intelligence and Soft Computing*

    Research, *11*(1), 5-20. https://doi.org/10.2478/jaiscr-2021-0001

Richards, A., Hoskin, N. M., Maddox II, R. P., & Cornelius-White, J. H. D. (2019). A

    qualitative study of group therapy incorporating rap music with incarcerated

    individuals. *Journal of Creativity in Mental Health, 14*(4), 478-491.

    https://doi.org/10.1080/15401383.2019.1632235

Richards, D., Caldwell, P. H., & Go, H. (2015). Impact of social media on the health of

    children and young people. *Journal of Paediatrics and Child Health*, *51*(12), 1152-

    1157. https://doi.org/10.1111/jpc.13023

Roberts, D. F., Foeher, U. G., & Rideout, V. (2005). *Generation M: Media in the lives of 8–*

    18-year-olds. Kaiser Family Foundation. https://www.kff.org/wp-

    content/uploads/2013/01/generation-m-media-in-the-lives-of-8-18-year-olds-

    report.pdf

Robinson, C., Seaman, E. L., Montgomery, L., & Winfrey, A. (2018). A review of hip hop-based interventions for health literacy, health behaviors, and mental health. *Journal of Racial and Ethnic Health Disparities*, *5*, 468-484. https://doi.org/10.1007/s40615-017-0389-2 Epub 2017 Jul 1. PMID: 28667501; PMCID: PMC6319262.

Schuldt, M. R., & Silverman, M. J. (2020). Lyric analysis in adult mental health settings: An exploratory interpretivist study of music therapists' clinical decision-making processes. *The Arts in Psychotherapy*, *71*, 101712. https://doi.org/10.1016/j.aip.2020.101712

Sellers, S. L., Neighbors, H. W., & Bonham, V. L. (2011). Goal-striving stress and the mental health of college-educated Black American Men: The protective effects of system-blame. *American Journal of Orthopsychiatry*, *81*(4), 507. https://doi.org/10.1111/j.1939%200025.2011.01116.x

Shamseer, L., Moher, D., Clarke, M., Ghersi, D., Liberati, A., Petticrew, M., Shekelle, P., & Stewart, L. A. (2015). Preferred reporting items for systematic review and meta-analysis protocols (PRISMA-P) 2015: Elaboration and explanation. *BMJ : British Medical Journal*, *349*(jan02 1), g7647–g7647. https://doi.org/10.1136/bmj.g7647

Siegmund, L. A., & Siedlecki, S. L. (2021). Ensuring data fidelity in quantitative research. *Clinical Nurse Specialist*, *35*(6), 284-287. https://doi.org/10.1097/NUR.0000000000000627

Snyder, S., & Fisk, T. (2016). Applying Bandura's model to identifying sources of self-efficacy of teaching artists. *Research in the Schools*, *23*(2).

Spitzer. (2000). Predictors of college success: A comparison of traditional and nontraditional age students. *Journal of Student Affairs Research and Practice*, *38*(1), 82–98. https://doi.org/10.2202/1949-6605.1130

Stephens. (2009). What Is This Black in Black Diaspora? *Small Axe : a Journal of Criticism*, *13*(2), 26–38. https://doi.org/10.1215/07990537-3697238

Stewart, & Chambless, D. L. (2009). Cognitive-Behavioral Therapy for Adult Anxiety Disorders in Clinical Practice: A Meta-Analysis of Effectiveness Studies. *Journal of Consulting and Clinical Psychology*, *77*(4), 595–606. https://doi.org/10.1037/a0016032

Tennant, R., Hiller, L., Fishwick, R., Platt, S., Joseph, S., Weich, S., Parkinson, J., Secker, J., & Stewart-Brown, S. (2007). The Warwick-Edinburgh mental well-being scale (WEMWBS): Development and UK validation. *Health and Quality of life Outcomes*, *5*(1), 1-13. https://doi.org/10.1186/1477-7525-5-63

Toland, M. D., Li, C., Kodet, J., & Reese, R. J. (2021). Psychometric properties of the outcome rating scale: An item response theory analysis. *Measurement and Evaluation in Counseling and Development*, *54*(2), 90-105. https://doi.org/10.1080/07481756.2020.1745647

Travis, R., Gann, E., Crooke, A. H. D., & Jenkins, S. M. (2019). Hip hop, empowerment, and therapeutic beat-making: Potential solutions for summer learning loss, depression, and anxiety in youth. *Journal of Human Behavior in the Social Environment, 29*(6), 744-765. https://doi-org.pallas2.tcl.sc.edu/10.1080/10911359.2019.1607646

Uhlig, S., Groot, J., Jansen, E., & Scherder, E. (2019). Rap & sing music therapy and sleep in

    adolescents: A single-blind cluster randomized controlled trial. *Nordic Journal of*

    Music Therapy, *28*(1), 60–70. https://doi.org/10.1080/08098131.2018.1542613

Uhlig, S., Jansen, E., & Scherder, E. (2016). Study protocol rap music therapy for emotion

    regulation in a school setting. *Psychology of Music, 44*(5), 1068-1081. https://doi-

    org.pallas2.tcl.sc.edu/10.1177/0305735615608696

Uhlig, S., Jansen, E., & Scherder, E. (2018). "Being a bully isn't very cool…": Rap & sing

    music therapy for enhanced emotional self-regulation in an adolescent school setting

    – a randomized controlled trial. *Psychology of Music*, *46*(4), 568–587.

    https://doi.org/10.1177/0305735617719154

Villegas, C., Ibabe, I., & Arnoso, A. (2021). People at risk of social exclusion: mental health,

    structural-economic factors and sociocultural factors (Personas en riesgo de exclusión

    social: salud mental, factores económico-estructurales y socio-

    culturales). *International Journal of Social Psychology*, *36*(1), 122-148.

    https://doi.org/10.1080/02134748.2020.1840235

Washington, A. R. (2018). Integrating hip hop culture and rap music into social justice

    counseling with Black males. *Journal of Counseling & Development, 96*(1), 97-105.

    https://doi-org.pallas2.tcl.sc.edu/10.1002/jcad.12181

Watkins, D. C., Allen, J. O., Goodwill, J. R., & Noel, B. (2017). Strengths and weaknesses of

    the Young Black Men, Masculinities, and Mental Health (YBMen) Facebook

    project. *American Journal of Orthopsychiatry*, *87*(4), 392.

    https://doi.org/10.1037/ort0000229

Watkins, D. C., Green, B. L., Rivers, B. M., & Rowell, K. L. (2006). Depression and black

    men: Implications for future research. *Journal of Men's Health and Gender*, *3*(3),

    227-235. https://doi.org/10.1016/j.jmhg.2006.02.005

Wenzel, A. (2011). Basic strategies of cognitive behavioral therapy. *The Psychiatric Clinics*

    of North America, 40(4), 597–609. https://doi.org/10.1016/j.psc.2017.07.001

Wolfe, K., Dickenson, T. S., Miller, B., & McGrath, K. V. (2019). Comparing visual and

    statistical analysis of multiple baseline design graphs. *Behavior Modification*, *43*(3),

    361-388. https://doi.org/10.1177/0145445518768723

Appendix A: Hip Hop and Rap Music Interventions to Enhance Client Mental Health

and Well-Being (Individual Therapy)

Part I: Therapeutic session structure

Part 2: Pre-survey questionnaire

Part 3: Theoretical framework

Part 4: Curriculum and references

Part 5:   References

Part 6: Appendix 1: Song suggestions

<u>Part I</u>

Welcome: **Hip Hop and Rap Music Interventions to Enhance Client Mental Health and Well-Being within individual settings.**

Information for the Facilitator(s):

Session Structure

1. Purpose

Participants will participate in a research study that uses Hip Hop/Rap lyrics as an intervention to enhance a client's mental health and wellbeing.

2. Targeted Population
   1. Individuals who listen to hip hop/rap music.
   2. Individuals that want to enhance their areas of well-being which include:
individual, interpersonal, social, and overall well-being (Tennant et al., 2007)

3. Theoretical approach to the sessions and rationale supporting this specific design
   - Cognitive Behavioral Therapy (CBT). The idea is to focus on thoughts, emotions, and behaviors and learn to channel positive thoughts regardless of the situation. The therapist would need to build trust. It would be imperative to build a good rapport with the client because CBT is a collaborative therapy (Wenzel, 2011). The therapist can function as a teacher, leader, and coach.
   - Rap therapy uses tenants of social learning theory and Cognitive Behavioral Therapy to utilize rap as the intervention and technique to use (Gonzalez & Hayes, 2009).
   - Social Learning theory to understand the learning process and self-efficacy to change behaviors (Bandura, 2006)
4. Ethical issues applicable to therapy. The ethical issue that would apply:
   1. Confidentiality-Participants need to be assured that they are safe, and that all information would be held secure.
   2. Autonomy-Client needs to have the freedom of choice
   3. Nonmaleficence-to not cause harm
   4. Beneficence-doing good diligence
   5. Justice-meeting participants where they are and treating participants equal
   6. Fidelity- providing loyalty, trust, and empathy to participants
   7. Screening criteria and informed consent
   Informed consent:
      - Individuals will read and sign a consent form discussing ethics and confidentiality, rights, and responsibilities.
   Screening criteria
      i. Individuals who fit the requirements from completion of the pre-screening. Participants should influence by hip hop and/or rap music (Elligan, 2000)

      ii. Screening Methods

- Outcome rating scale (ORS)
- Satisfaction with life scale (SWLS)
- Post session questions for feedback and meaningfulness of the session(social validity)
- Pre-screening of demographics, interest in hip hop, mental health background

     iii. Recruitment

Through referrals, self-referrals, and recommendations from the selected cite.

Intake forms

Use Intake forms that are custom to your practice or organization (i.e., HIPPA, professional disclosure).

Forms included: Demographic form and Pre-survey questionnaire.

Client Demographic Form
Please Print Clearly
Client Information

Name   _____

        DOB:_____/_____/_____

Address_____

        SSN_____/_____/_____

City   _____   Zip Code _____

Email _____   Mobile # _____

Marital Status _____   Gender   M   F   Ins#_____

Parent/Guardian Information

Name   _____DOB _____/_____/_____

Address_____ (if different from above)

City   _____   Zip Code _____

Email _____   Mobile # _____

Emergency Contact

Name _____   Mobile # _____

_____

Address_____   Relationship _____

City   _____   Zip Code

_____

IN ORDER TO FOLLOW UP WITH YOU DURING AND AFTER SERVICES, CHECK EACH APPLICABLE BOX

Permission to Call   ☐ Yes ☐ No   Telephone _____

Permission to Text   ☐ Yes ☐ No   Telephone _____

Permission to Email   ☐ Yes ☐ No   Email   _____

Please initial each line item to indicate your understanding:

☐ I, the undersigned, have voluntarily applied for and agree to participate in counseling, psychological, and/or psychiatric services.

☐ I, hereby authorize Carolina Assessment Services LLC. to release treatment and psychological information to my primary medical physician and health insurance carrier, if necessary. I understand that I am fully responsible for all fees relating to my treatment, which are not covered by my insurance plan, and I further agree to pay my co-payment at the time of each visit.

☐ I have read and received a copy of the Notice of Privacy Practices, Confidentiality Agreement, Client Rights, Service Contract, Professional Disclosure Statement, and the 24-hour Emergency Procedure.

Client's Signature:_____

Date:_____/_____/_____

Parent/Guardian Signature:_____

        Date:_____/_____/____

Part III

Pre-Survey Questionnaire

Please take a moment to complete this survey. All answers will be kept confidential.

Please select your age group.

☐ 18-30   ☐ 31-40   ☐ 41-50   ☐ 51+

Level of education

☐ High School

☐ College

☐ Graduate

☐ Other

How would you best describe your gender identity?

☐ Male

☐ Female

☐ Non-binary

☐ Gender-fluid

☐ My Description (please explain)

How would you best describe your ethnicity?

☐ African American or Black

☐ American Indian or Alaskan Native

☐ Chicano/Mexican American/Puerto Rican

☐ East Indian/Southeast Asian/Pakistani

☐ Japanese/Japanese American

☐ Korean/Korean American

☐ Latino or Hispanic

☐ Middle Eastern

☐ Native Hawaiian or Pacific Islander

☐ Vietnamese/Vietnamese American

☐ White/Caucasian

☐ Multi-racial/Multi-ethnic

☐ My Description (please explain)
What brings you into therapy?
Have you ever been to individual therapy or a support group before?
☐ No | ☐ Yes, please explain
Do you listen to Hip Hop/Rap music?
☐ No | ☐ Yes, please explain
How would you rate your enjoyment of Hip Hop/Rap culture?
☐ Highly enjoyable   ☐ Occasionally enjoyable   ☐ Seldom enjoyment
☐ Not enjoyment
How would you rate how often you listen to Hip Hop/ Rap?
☐ daily   ☐ varies daily   ☐ weekly ☐ once a month
Do you feel you are suffering from a mental illness?
☐ No | ☐ Yes, please explain
Do you have a support system?
☐ No | ☐ Yes, please explain
Do you have a safe place to attend sessions, if virtual?
☐ No | ☐ Yes
Please share any additional comments and/or concerns

Part IV
Theoretical Framework

Rap Therapy was founded by Don Elligan in 2000. Rap therapy has its foundational roots in social learning theories in combination with cognitive behavior therapy (Gonzalez & Hayes, 2009). Social learning was constructed by Albert Bandura in 1977. Social learning theory's main tenant was observational learning, which Don Elligan shares a big impact on hip hop and rap music (Elligan, 2000). Cognitive behavioral therapy (CBT) explores the thoughts that are tied to a particular emotion that results in behavior. Rap therapy follows that notion by exploring the interconnection a client can have to a lyric through their exposition, identifying their emotion and behavior to change outcomes (Gonzalez & Hayes, 2009).

The theory can be used in group and/or individual settings (Gonzalez & Hayes, 2009). Rap therapy is a great way to practice cultural competence as it is based on cultural responsiveness. The concept of rap therapy has been explored through psychotherapy, school counselors, and social workers (Gonzalez & Hayes, 2009). Rap Therapy has five applications (Elligan 2000). According to Elligan (2000), the five applications consist of: a) assessment, complete assessment on the client to commence the session to ensure they are a right fit and have been influenced by rap or hip hop. For the CBT aspect, assessment is an ongoing process, in case the interest of the participant changes (Ay et al., 2019), b) alliance is the rapport-building stage. The main goal is to show empathy and support for participants' attentiveness to rap and hip hop. CBT considers building a rapport an ongoing activity through the therapeutic relationship (Wenzel, 2011), c) reframing and restructuring, identifying the negative emotion, what thoughts are around that emotion and what behaviors arise for change of behavior (Kazantzis et al., 2017), d) role paying, one of the techniques used in CBT and can be beneficial through written exercises (Kazantzis et al., 2017), and e)

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action and maintenance which is using positive emotions that were found in lyrics to help

with decision making and behavior modification (Okamoto, 2019; Wenzel, 2011). It is good

to note that after the assessment stage, the other applications may be out of order depending

on the foci needed for the client (Elligan, 2000). Learning goals are based on a music therapy

technique called Lyric analysis (Rahman et al., 2021). Each session should have set goals to

help with the exploration of songs/lyrics that fit the set goal.

Choose different hip-hop/rap styles to assess different emotions in the lyrics.

Explore different ways to present lyrics.

**The curriculum is for 8 sessions; however, the sessions may take more than one session to complete.

Part V: Curriculum

Session I: Assessment Stage, Mic Check
- Session Topic: Welcome   - Introduction of clinical professional disclosure   - Goals and Objectives   - Psychoeducation about Hip Hop/Rap counseling.   - Build rapport with participants (Elligan, 2000; Wenzel, 2014)   - Discuss the purpose of the intervention. Complete informed consent, confidentiality, roles, and expectations.   - Materials   - Pen, paper, rap lyrics.   - Activities/Interventions   - Icebreaker games (ex: Asking clients who are their top five rappers or hip-hop artists and why? Does the client share the same values as the rappers)   - Complete post sessions questions inspired by Richards et al. (2019)   - How did you feel about the session?

Session II: Therapeutic Alliance "Music Replay"
- Session Topic: building trust and rapport   - Goals and Objectives   - Work on rapport building and trust, and free association (Isaksson et al., 2021).   - Explore music that inspires and motivates through life experiences (O'Callaghan, 2014)   - Materials   - Sample of song lyrics, computer, internet for song lyrics and other visuals, journals, and paper.   - Activities/Interventions   - Perform weekly measurements (Isaksson et al., 2021)   - Do a Check in- can use different ice breakers (ex: exploring value)   - Choose a song (The therapist can bring a song/or participants). (Note 2 or 3 songs per session)   - Work through discussing lyrics to identify common themes, meanings, and individual perspectives (Gonzalez & Hayes, 2009).   - Complete post sessions questions inspired by Richards et al. (2019)   - How did you feel about the session today?   - Is there anything about the session that could improve?

- o Was there anything about the session that stood out today?
- o Were there any impactful lyrics?
- o Was there anything helpful/unhelpful

Session III: Emotional Identification

- ● Session Topic: "Catching Feelings"
- ● Goals and Objectives
  - o Use the "Catching Feelings" exercises by Armstrong and Ricard (2016) which consist of reviewing and identifying themes from lyrics to identify emotions.
  - o Introduce the concept of reframing and restructuring
- ● Materials
  - o Sample of song lyrics, computer, internet for song lyrics and other visuals, journals, and paper.
- ● Activities/Interventions
  - o Perform weekly measurements (Isaksson et al., 2021)
  - o Do a Check-in
  - o Choose a song (therapist can bring a song/or participant). (Note 2 to 3 songs per session is ideal for flow.)
  - o Work through discussing lyrics to identify the emotions for discussion.
    1. What were the identified emotions?
    2. How did you connect with the song lyrics?
    3. Is there a better song that describes your emotional experience?
    4. Describe some coping skills you use for different emotions.
- ● Complete post sessions questions inspired by Richards et al. (2019)
  - o How did you feel about the session, today?
  - o Is there anything about the session that could improve?
  - o Was there anything about the session that stood out today?
  - o Were there any impactful lyrics?
  - o Was there anything helpful/unhelpful
  - o How were you involved in the session today?

Session IV: Values and Strengths

- ● Session Topic: "Dollars and Dreams"
- ● Goals and Objectives
  - o Use the "Dollars and Dreams" exercises by Armstrong and Ricard (2016), which consist of identifying values and belief

systems
- Continue building a therapeutic alliance (Elligan, 2000)
- Introduce negative automatic thoughts and reframe thoughts
- Materials
  - Sample of song lyrics, computer, internet for song lyrics and other visuals, journals, and paper.
- Activities/Interventions
  - Perform weekly measurements (Isaksson et al., 2021)
  - Do a Check-in
  - Choose a song (the therapist can bring a song/ or participant). (Note 2 to 3 songs per session is ideal for flow.)
  - Work through discussing lyrics to identify mental positivity and imagery for visual interpretation.

    1. What was this experience like?
    2. Could you identify values and beliefs in the lyrics? Do they connect to your values and beliefs?
    3. How do your negative thoughts affect who you are and how you see others and your future?
    4. Is there a better song that describes your values and beliefs system?

- Complete post sessions questions inspired by Richards et al. (2019)
  - How did you feel about the session today?
  - Is there anything about the session that could improve?
  - Was there anything about the session that stood out today?
  - Were there any impactful lyrics?
  - Was there anything helpful/unhelpful
  - How were you involved in the session today?

Session V: Reframing and Restructuring
- Session Topic: Understanding negative emotions
- Goals and Objectives
- Psychoeducation of the symptoms of Depression, Anxiety, and Stress
- Psychoeducation of well-being
- Role-Play reframing negative thoughts and implementation of restructuring negative views
- Materials
- Sample of song lyrics, computer, internet for song lyrics and other visuals, journals, and paper.

- Activities/Interventions
  - Perform weekly measurements (Isaksson et al., 2021)
  - Do a Check-in
  - Choose a song (the facilitator can bring a song/or a client). (Note 2 to 3 songs per session is ideal for flow).
  - Work through discussing lyrics to identify the different symptoms of depression, stress, and anxiety to understand the impact of negative symptoms

    1. What was this experience like?
    2. Could you identify negative symptoms in the lyrics? Do they connect to your experiences?
    3. Can you reframe some of the lyrics to more optimistic thinking?
    4. If you picked your lyrics, what is the connection to your choice?
    5. Is there a better song that describes your values and beliefs system?
- Complete post sessions questions inspired by Richards et al. (2019)
  - How did you feel about the session today?
  - Is there anything about the session that could improve?
  - Was there anything about the session that stood out today?
  - Were there any impactful lyrics?
  - Was there anything helpful/unhelpful?
  - How were you involved in the session today?

Session VI: Interpersonal Relationship

• Session Topic: "Love, self-love, and relationships through rapper J. Cole's lyrics
• Goals and Objectives
  ○ Open discussion on intimate, interpersonal relationships, and self-love.
  ○ Psychoeducational on Reframing and Restructure (Elligan, 2000).
• Materials
  ○ Sample of song lyrics, computer, internet for song lyrics and other visuals, journals, and paper.
• Activities/Interventions
  ○ Perform weekly measurements (Isaksson et al., 2021)
  ○ Do a Check-in
  ○ Choose lyrics from J Cole that are relationship-based (the facilitator can bring a song/or a client). (Note 3 to 4 songs per session are ideal for flow).
  ○ Homework: Bring in lyrics that are personally empowering
  ○ Work through discussing lyrics to identify the types of concerns in relationships (self, personal, public)
 	
       1. What was this experience like?
       2. Could you identify the self, personality, and public relationships?
       3. If you picked your lyrics, what is the connection to your choice?
       4. Is there a better song that describes your self-love, intimate relationships, and/or personal relationships?
• Complete post sessions questions inspired by Richards et al. (2019)
  ○ How did you feel about the session today?
  ○ Is there anything about the session that could improve?
  ○ Was there anything about the session that stood out today?
  ○ Were there any impactful lyrics?
  ○ Was there anything helpful/unhelpful?
  ○ How were you involved in the session today?

Session VII: Roleplaying
● Session Topic: Empowerment through the microphone
● Goals and Objectives
○ Finding lyrics that empower your goals and inner motivation
○ Performing stage of the session-working well together (Tuckman's stages of Group)
○ Reframing/Restructuring (Elligan, 2000; Wenzel, 2014).
○ Roleplay (Elligan, 2000)
● Materials
○ Sample of song lyrics, computer, internet for song lyrics and other visuals, journals, and paper.
● Activities/Interventions
○ Discuss the termination phase of sessions and prepare for the last session
○ Perform weekly measurements (Isaksson et al., 2021)
○ Do a Check-in
○ Choose lyrics that empower you. Clients are encouraged to bring their songs in. (Note 3 to 4 songs per session are ideal for flow).
○ Work through discussing lyrics to identify common themes of empowerment and the importance of positive thoughts through reframing.
1. What was this experience like?
2. Could you share times of low motivation and how your song has helped you?
3. If you picked your lyrics, what is the connection to your choice?
4. How can you relate to your choice of lyrics?
● Complete post sessions questions inspired by Richards et al. (2019)
○ How did you feel about the session today?
○ Is there anything about the session that could improve?
○ Was there anything about the session that stood out today?
○ Were there any impactful lyrics?
○ Was there anything helpful/unhelpful?
○ How were you involved in the session today?
Session VIII: Action and Maintenance
● Session Topic: Termination, Referrals,
● Goals and Objectives
○ Termination and maintenance
● Materials
○ Sample of song lyrics, computer, internet for song lyrics and other visuals, journals, and paper.

- Activities/Interventions
    - Discuss termination of the counseling relationship and referrals
    - Perform weekly measurements (Isaksson et al., 2021)
    - Do a Check-in, welcome final thoughts of termination
    - Ask for Feedback from the client through participation and involvement questions inspired by Richards et al. (2019).

        1. What did the therapist do during the beneficial session?
        2. What did the therapist do during the session that was harmful? Helped you?
        3. Were there aspects of the session that you feel could be beneficial to others and not you?
- Complete the concluding questions inspired by Richards et al. (2019)
    - Was this session a success?
    - What did you gain from this experience?
    - Is there anything that should be added to the session?
    - Would you be willing to participate in a similar intervention?
    - Is there a particular cultural group that you feel would benefit?
    - Did you have any challenges being a part of this study that you are willing to share?

Part VI: Song Suggestions

Empowerment Songs
Think too much-Russ
Fix it-Russ
Dreams and Nightmares-Meek Mills
Stronger-Kanye West
Love yourself, Eminem
Juicy-Biggie Smalls
I know I can-NAS

Emotional Identification Songs
Juice- Lizzo
Till I Collapse-Eminem
Dreams and Nightmares-Meek Mills
1-800-273-8255- Logic
My Stress NF
Warning-Biggie Smalls
Keep your head up-Tupac

Relationship Songs
Kevin's Hart-J. Cole
FRIENDS-J. Cole
4:44-Jay Z

Rags to Riches
Juicy-Biggie Small
Bad and Bougie-Migos

Values and Beliefs
All that I got-Ghost Face Killah
Y.O- Talib and Mos Def

Appendix B: Intervention Fidelity Checklist

Before Intervention	Check if occurred
Overview of research study: purpose	
Review of professional disclosure	
Psychoeducation on well-being	
Overview of confidentiality, ethics, and consent forms	
Overview of roles expectations	
Treatment planning	
Rapport Building	
Discussion of the next session's goals and objectives	
Session I: Mic Check	Check if occurred
Overview of research study: purpose	
Review of professional disclosure	
Psychoeducation on rap counseling	
Overview of confidentiality, ethics, and consent forms	
Weekly measurements performed	
Overview of roles expectations	
Evidence of Rapport building-discussion of individuality through ice breaker	
Post session questions	
Discussion of the next session's goals and objectives	
Session II: Therapeutic Alliance	
Review goals and objectives	
Evidence of rapport building	
Weekly measurements performed	
Check-in	
Review of the first song	
Identify meanings, and individual perspectives	
Complete post-session questions	
Discussion of next session goals and objectives	
Session III: Emotional Identification	
Review goals and objectives	
Evidence of rapport building	
Weekly measurements performed	
Check-in	
Identify emotions, meanings and individual perspectives from song lyrics, social perspectives	
Complete post-session questions	
Discussion of next session goals and objectives	
Session IV: Values and Strengths	

Review goals and objectives	
Evidence of rapport building	
Weekly measurements performed	
Check-in	
Identify mental positivity, imagery, metaphors through lyrics	
Identify values/Strengths	
Complete post-session questions	
Discussion of next session goals and objectives	
Session V:Reframing and Restructuring	
Review goals and objectives	
Discussion of wellbeing vs mental health	
Weekly measurements performed	
Check-in	
Discussion of mental health in songs, identifying negative emotions, examples of reframing	
Complete post-session questions	
Discussion of next session goals and objectives	
Session VI: Interpersonal Relationships	
Review goals and objectives	
Reframing/restructuring of negative thinking	
Weekly measurements performed	
Check-in	
Discussion of interpersonal relationships	
Complete post-session questions	
Discussion of next session goals and objectives	
Session VII: Role Playing	
Review goals and objectives	
Reframing/restructuring of negative thinking	
Weekly measurements performed	
Check-in	
Discussion of motivation, empowerment	
Complete post-session questions	
Discussion of next session goals and objectives	
Session VIII: Termination and maintenance	
Review goals and objectives	
Weekly measurements performed	
Check-in	
Discussion of lyrics	
Feedback on the therapy experience	
Complete post-session questions	
Discussion of termination, follow-up on maintenance, and referrals	

Appendix C: Outcomes Rating Scale

Outcome Rating Scale (ORS)

Name _____ Age (Yrs):____ Sex: M / F
Session # ____ Date: _____
Who is filling out this form? Please check one: Self_____   Other_____
If other, what is your relationship to this person? _____

Looking back over the last week, including today, help us understand how you have been feeling by rating how well you have been doing in the following areas of your life, where marks to the left represent low levels and marks to the right indicate high levels. *If you are filling out this form for another person, please fill out according to how you think he or she is doing.*

Individually
(Personal well-being)

I--I

Interpersonally
(Family, close relationships)

I--I

Socially
(Work, school, friendships)

I--I

Overall
(General sense of well-being)

I--I

The Heart and Soul of Change Project

_____
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Appendix D: Satisfaction with Life Scale

Below are five statements that you may agree or disagree with. Using the 1 - 7 scale below, indicate your agreement with each item by placing the appropriate number on the line preceding that item. Please be open and honest in your responding.

- 7 - Strongly agree
- 6 - Agree
- 5 - Slightly agree
- 4 - Neither agree nor disagree
- 3 - Slightly disagree
- 2 - Disagree
- 1 - Strongly disagree

_____ In most ways my life is close to my ideal.

_____ The conditions of my life are excellent.

_____ I am satisfied with my life.

_____ So far I have gotten the important things I want in life.

_____ If I could live my life over, I would change almost nothing.

- 31 - 35 Extremely satisfied
- 26 - 30 Satisfied
- 21 - 25 Slightly satisfied
- 20   Neutral
- 15 - 19 Slightly dissatisfied
- 10 - 14 Dissatisfied
- 5 - 9 Extremely dissatisfied