Cultivating Critical Consciousness: Ways to Support and/or Constrict the Magic of Critical Dialogue

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Abstract: *Anti-Black racism, rooted in white supremacy, is a public health crisis in the US that infects and affects every aspect of life. Critical consciousness (CC) and its derivatives, such as Transformative Potential, have been elucidated as the antidote to the disease of white supremacy. Further, with the current focus on anti-racism and diversity, equity, inclusion, and belonging (DEIB) initiatives, strategies aimed at raising CC are becoming the norm. One strategy to develop critical consciousness is engaging in critical dialogue, difficult conversations that connect macro and micro contexts by exploring issues of power, privilege, and oppression. This paper considers a case study of participant data obtained from the critical dialogue component of Community Wise, an innovative, multilevel, behavioral health, group intervention grounded in critical consciousness theory. The purpose of the paper is to identify and discuss the best practices for critical dialogue facilitation that emerged via a qualitative analysis of the selected Community Wise sessions.*

Keywords: *Critical dialogue, critical consciousness, facilitation, anti-Black racism, qualitative research*

White supremacy perpetuates dehumanization by upholding a constructed racialized hierarchy that places white-presenting individuals at the top—as the norm, those deserving of power—and everyone else as "less than" (Billings, 2016; Daniels, 1997; Mills, 2014), and thus, unworthy of humane treatment (Jemal, 2021). Persistent race-based disparities in health/mental health, educational attainment, wealth, and employment, as well as hyper-surveillance by law enforcement and subsequent overrepresentation in the legal/carceral and "family policing" (Roberts, 2022) systems demonstrate the perniciousness of Anti-Black racism (Alexander & West, 2012; Bailey et al., 2017; Bonilla-Silva, 2017; Carratala & Maxwell, 2020; Hill, 2004; Oliver & Shapiro, 1995). Anti-Black racism, rooted in white supremacy, has been recognized as a public health crisis in the US that infects and affects every aspect of life (Center for Disease Control and Prevention, 2021; Jee-Lyn García & Sharif, 2015).

In response to the racial justice uprisings after the murder of George Floyd in May 2020, as of August 2021 there were 209 declarations of racism as a public health crisis made by public health boards and/or government entities within 37 states in the US (American Public Health Association, 2021, p. 1). The disproportionate violence against people of color by law enforcement, characterized as modern-day lynching (Goffe, 2014) and the perpetuation of race-based health inequities necessitate a public health intervention to address systemic racism (Bailey et al., 2017; Carratala & Maxwell, 2020; Hudson &

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Gehlert, 2015; Jee-Lyn García & Sharif, 2015). However, these trends of racial disparities are too often understood as individual deficits, which fail to connect the individual experience to the systemic structures of inequity. Individuals are blamed for their own oppression and this focus on individual-level causal factors leads to individual-level solutions. When determining interventions to address race-based health disparities, solely focusing on the individual (intrapersonal and interpersonal) level ensures dehumanization will continue, as anti-Black racism is structural and systemic (Feagin & Bennefield, 2014).

Critical consciousness (CC) and its derivatives, such as Transformative Potential (TP) (Jemal, 2021; Jemal & Bussey, 2018), have been elucidated as the antidote to the disease of white supremacy. While critical consciousness interventions can occur at the intra- and interpersonal levels, their focus is multi-level (micro-macro), highlighting how individual experiences are a microcosm of larger, systemic forces at work (e.g., interpersonal racism is rooted in a historic racist structure in which individuals are socialized and through which racist outcomes persist). Further, with the current focus on anti-racism, diversity, equity, inclusion, and belonging (ADEIB) initiatives, approaches aimed at raising CC are becoming more prevalent (Binkley, 2016; Corneau & Stergiopoulos, 2012; Nichol, 2004; Pender Greene, 2007).

Given structural racism continues to plague the United States, it is enmeshed in social work's history and clinical practice (Bussey, 2019). Thus, at times social work practice has acted to expand social rights, and at other times constrained them (Ehrenreich, 1985; Thompson, 2002; Walter et al., 2017). Paradoxically, social justice is integral to social work practice and professional identity. The National Association of Social Workers (NASW, 2021, paragraph 2) *Code of Ethics* preamble states, "social workers promote social justice and social change with and on behalf of clients…and strive to end discrimination, oppression, and other forms of social injustice." For the social work profession to make consistent ADEIB progress, which includes interrogating its oppressive history and contemporary practices, the field must be intentional about how it educates future social workers.

According to Kang and O'Neill (2018), oppressive dynamics "are inevitably embedded in all interactions and conversations, including those in social work classrooms" (p. 187). Social work students must confront structural, relational dynamics that impact their practice and orientation of the profession. Ideally, social work education should incorporate critical conversations on structural racism and other forms of oppression. Gutierrez, for example, highlighted the personal-social action link, stating that "the development of a group consciousness...results in a critical perspective on society that redefines individual, group, or community problems as emerging from a lack of power. This consciousness allows students (or those engaged in CC raising efforts) to focus their energies on the causes of their [service users'] problems rather than changing their subjective internal states" (Gutiérrez & Ortega, 1991, pp. 26-27). Further, in social work practice and in tandem with CC development, these CC approaches aid workers and service users in countering oppressive forces through individual and collective actions (Fay, 2011). Accordingly, social work theorists have promoted critical consciousness and critical dialogue as integral components of social work education and practice (Knipe, 2020).

Critical Dialogue

One strategy to develop critical consciousness is engaging in difficult facilitated conversations known as critical dialogue. Critical dialogue may consist of group meetings in which participants reflect on historical/sociopolitical contexts and engage in dialogue to develop a deeper understanding of how marginalizing processes (e.g., racism, sexism, classism) impact their lives and behavior (Diemer et al., 2006). The critical dialogue components in group work might incorporate pictographs, reflective questioning, and co-learning in the group process. Although useful for professionals engaging in group work, it is also relevant to difficult conversations on a stoop, on a street corner, within families, and across community groups. Further, critical dialogue is beneficial for individuals committed to anti-racism and anti-oppressive work as one method to bridge divides, as discussions are had without feelings of judgment or alienation of those involved. Meaningful dialogue creates space for individuals to examine and critique different perspectives, narratives, and engrained beliefs through the framework of love and respect. As such, the authors view critical dialogue as a tool that can help us reclaim our humanity, dismantle white supremacy, support our healing process from dehumanization, and move us forward in the journey towards liberation.

Different from discussion (wherein the purpose is to voice thoughts, beliefs, and opinions) or debate (wherein the purpose is to convince others that a certain perspective is right), critical dialogue promotes critical analysis and questioning. This questioning occurs within a power analysis, challenging how thinking and believing certain ideas and in certain ways benefits/disadvantages various groups/statuses and serves to maintain a hierarchical status quo. Paulo Freire's (1970/2000) critical pedagogy theory is foundational to critical dialogue as it fosters a rigorous interrogation of the relationships in peoples' lives and their oppressive potential (Jemal, 2017). Freire promoted knowledge-sharing within democratic spaces where questioning is encouraged and where expertise is spread amongst all the participants (Freire, 1970/2000), decentering the teacher as the bearer of truth and expertise. As such, critical dialogue is about creating democratic spaces and processes, and "examin[ing]… differences, which are embedded in privilege and power, and work[ing] toward shared meanings and actions for social justice" (Laman et al., 2012, p. 198). Respectful argumentation and disagreement can lead to meaningful social analysis and understanding of self and others. Critical dialogue promotes critical introspection via the awareness of power relations and dynamics among participants and society (Kang & O'Neill, 2018). Through consciousness raising and locating oneself within social relationships, an individual's identity can no longer be separated from the environment or relational networks (Corrigan & Leonard, 1978/1983; Dominelli, 2002).

Concerningly, numerous scholars highlight that social work professors may not be prepared to effectively facilitate critical dialogue and self-reported discomfort with leading critical conversations (Finn, 2020; Garcia & van Soest, 2000, 2006; Goldingay, 2020; Sue et al., 2009). Initiating or compounding this issue of comfort and preparedness is a lack of support, resources, training, cultural norms, and workable strategies for incorporating critical dialogue in many academic institutions. Further, depending on the level of support of the academic institution, critical dialogue may make faculty the object of exclusion or

retribution. More specifically, faculty of color face a disproportionate burden of addressing issues of race, power, and oppression, which make them the target for micro-aggressions and structural violence (particularly in historically/predominantly White institutions). Potential micro-level consequences include not getting tenure, decreased productivity, increased stress, and decreased health/wellness. So, although researchers found that social work academics from disenfranchised social or ethnic groups were better equipped to respond to uncomfortable but essential conversations on racism, doing so may be detrimental to their career and/or physical/mental health (Garcia & van Soest, 2000, 2006).

The Facilitator's Role: Supporting a Culture of Critique

A potential key aspect of critical dialogue is the presence of a facilitator. Facilitators have a unique opportunity to support the CC-development process. If done poorly, however, facilitation may cause individuals' critical consciousness to not develop or regress. Problematic facilitation can lead to confrontation (calling out individuals with no opportunity to hear countering points/different perspectives); and/or debate (power struggles in which each party is trying to win/convince others that their side/position is "right"). Of note, facilitation is a role that is presented in different ways across groups, communities, professions, and spheres. Facilitators come from all walks of life and the facilitated critical dialogue skill is not limited to "trained professionals," such as social workers or group counselors.

A group engaged in facilitating critical dialogue functions as a microcosm of broader societal trends and power dynamics (Gregory & Philosophy Documentation Center [PDC], 2007). Consequently, facilitators' social identities impact group dynamics and power relations and must be deconstructed. Critical conversations are more than likely to be difficult and challenge the core assumptions of participants. The facilitator's role is to normalize critique, foster reflections, model dialogic etiquette, promote questioning, and help participants communicate constructively (Gregory & PDC, 2007). Although critical dialogue requires open and transparent communication, the facilitator should not be overly permissive (Guilar, 2006). As such, the facilitator's expertise is not in the substantive parts of the conversation as subject matter experts but rather in supporting the conversation flow and ensuring the dialogue is constructive. The facilitator's role is to steer the conversation away from inflammatory or provocative remarks (Guilar, 2006). Facilitators promote critical introspection and help participants identify underlying assumptions. The conversation should invite participants to be critical of each other and themselves while being respectful and open to changing their thoughts or beliefs. This does not mean the facilitator acts as a censor or autocrat but rather helps the participants learn to listen and foster mutual respect. Accordingly, Nagda and Roper (2019) state that facilitators are "bridge-builders, border-crossers, and boundary-challengers. Intergroup dialogue facilitators work to build bridges of communication, understanding, and collaborative action across divides marked by social identities and status" (p. 124).

Unlike other pedagogical approaches, critical dialogue is non-hierarchical; therefore, everyone in the room is equal, contributes to the power dynamics, and their roles require exploration. As an extension of this work, facilitators respect the autonomy of participants

and are encouraged to ask open-ended questions to help the group identify social problems, focus on structural inequities, and be sources of information and knowledge. With this approach, facilitators may "identify important alternative views not raised by the group" but refrain from telling participants how to think (Gregory & PDC, 2007, p. 61). Importantly, critical dialogue participants learn critical reflection over time and should not be coerced in adopting the facilitator's ideology or position (Gregory & PDC, 2007). In other words, the trajectory of a critical dialogue cannot be predetermined. Still, the facilitator should be open about time allotment and constraints, and participants should feel free to critique those boundaries while respecting them (Guilar, 2006). Gregory and the Philosophy Documentation Center (2007) posit that a core goal of dialogical facilitation is to lead the group to self-management. Eventually, participants in critical dialogue groups will learn to supportively question each other, interrogate the group's power dynamics, and collectively self-manage. Participants are learning experientially how to facilitate critical dialogue, which increases opportunities for more people to engage in critical dialogue in various settings.

Social Work and Critical Dialogue Facilitation

One strategy that may disarm or circumvent defense mechanisms is for social work practitioners and educators to facilitate critical questioning (with service users or students, respectively). This entails encouraging participants to think about the socio-political construction of their situation and address internalized oppression (Allan et al., 2003) or establish connections between their challenges and their socio-political context via the constant reflection on these issues (Heron, 2005). These methods have been supplemented with a realization that critical practice can sometimes move forward only in small steps through conversations that honor service users' perspectives as constitutive and primary (Gallop, 2018).

Contextual Constraints

It is probable that many formal critical dialogue facilitators operate within oppressive institutions imbued in white supremacist tenets, which constricts effective critical dialogue as challenging these norms is dangerous (Golden & Jorgenson, 2022; Dismantling Racism [DR], 2016). Golden and Jorgenson (2022) purport that employees are never relationally or ideologically separated from their employer's identity or structure. In other words, the employing institution confines and greatly determines the actions of the employees. Similarly, academics and non-profit workers are employees and subject to material precarity, which can be enacted in the classroom and with service users. For example, Zembylas (2018) argued that power dynamics in the classroom could never be overcome; egalitarianism in the classroom was impossible. The existing power dynamics must be highlighted during critical dialogue facilitation.

In summary, existing scholarship points to the value of facilitating critical dialogue—how it creates a space for participants to identify, critique, and develop collective action to counter oppressive dynamics. While critical dialogue is crucial to challenging dominant oppressive social frameworks and imagining more inclusive and equitable spaces, the

existing scholarship does not specify whether structured critical dialogue, the facilitation approach, or both, promote critical consciousness amongst a heterogeneous population. One central barrier to successful critical dialogue is effective facilitation within a context where liberatory thinking is possible. Existing literature highlights that the quality of facilitation may be critical to the success of critical dialogue. Experimentation around and assessment of facilitation methodologies are needed. This research addresses this gap by exploring effective and ineffective facilitation approaches for efficacious critical dialogue. This paper offers a case study of session data obtained from the facilitated critical dialogue component of *Community Wise,* an innovative, multilevel, behavioral health, group intervention grounded in critical consciousness theory (see Jemal et al., 2022; L. Windsor et al., 2014; L. C. Windsor et al., 2014) for in depth discussions of the Community Wise intervention). The purpose of the paper is to better understand, discuss, and identify the best practices for critical dialogue facilitation that emerged via a qualitative analysis of this session data. The findings will help inform critical dialogue facilitation both in social work classrooms and in the field.

Methods

The Parent Study

This study derives from a parent study (for further details see Windsor et al., 2018) that was grounded in critical consciousness theory, community-based participatory research principles (CBPR), and the multiphase optimization strategy (MOST). The parent study used a $2 \times 2 \times 2 \times 2$ factorial design to build out the Community Wise intervention in an efficient and effective manner, with scalability in mind. This approach enabled the intervention to be provided for no more than $250 per participant. The study was tailored to serve a sample of men (n=528) residing in Newark, NJ, USA with legal and substance misuse histories. Additional inclusion criteria included being 18 years or older; being English-speaking; having been released from a closed-custody facility in the past four years; willingness to be audio recorded throughout the Community Wise sessions (audio recording occurred for the purpose of assessing intervention fidelity); and having the capacity to provide consent. A primary aspect of the study design was the capacity to detect changes in the participant's alcohol and/or injection drug use. Randomized assignment stratified participants into 16 conditions comprised of some combination of these intervention components: peer or licensed facilitator, group dialogue, personal goal development, and community organizing. The study setting was a community-based agency (also in Newark) that offered services including but not limited to medical and behavioral health services. The project had one peer facilitator and two licensed facilitators. The number of attendees in each session varied from week to week with an average of two participants.

Current Study

To select the groups from the parent study for this analysis, the authors used the cumulative critical consciousness (CC) scores of the group members assessed by an 11-item assessment tool with a 6-point Likert scale of agreement that was developed by the Newark Community Collaborative Board (NCCB) in 2014. The score was calculated as a summation of individual item scores that ranged from 12 (lowest CC) to 72 (highest possible CC). The measure has recently undergone exploratory factor analysis (EFA) and confirmatory factor analysis (CFA) testing, but those results are forthcoming. EFA results suggested a bifactor model with one general CC factor and two specific subfactors (i.e., knowledge and action). Based on CFA fit indices, the hypothesized bifactor model provided a very good fit for the data. As examples, two items on the measure are "*I challenge the oppressive culture under which we live (messages, images, and language) by learning about the issues that affect my community*" and "*I attend meetings where we discuss issues about my community.*"

To explore the facilitation of the critical dialogue component of Community Wise as a tool for developing critical consciousness, two voice-recorded Community Wise sessions were selected, transcribed, and analyzed. The authors used quantitative methods to determine which two of the 16 Community Wise groups (comprised of service users) had the greatest increase in critical consciousness. A PhD-level statistician provided descriptive statistics for the intervention (individual components and their combinations): a comparison of means of critical consciousness score at baseline, and results of Repeated Measure ANOVA and MANOVA using the number of interventions as the independent variable. The preliminary results suggested no significant differences between the 16 treatment groups ($p=0.5464$, including between those facilitated by peer versus licensed facilitators, as both were offered). The statistician then did a subset analysis which excluded those individuals who started with high baseline values ($\sim \geq 60$) since these individuals were not expected to have significant changes in their critical consciousness.

The summary of the analysis comparing the critical consciousness scores at different time points for the sixteen intervention groups showed no significant differences in mean critical consciousness scores between the 16 groups. Four potential groups were identified as having the biggest increases in mean CC scores. The two with the greatest increase in mean CC scores were selected for the qualitative analysis included in this paper.

The data analyzed were transcripts from the Community Wise intervention completed by the two groups identified as described above. Each group session ran from one-two hours. One group ran for nine sessions and the second group ran for 12 sessions. Using Dedoose (SocioCultural Research Consultants, LLC, 2023), a web-based data analysis program, the three co-authors of the paper coded the data independently. Predetermined codes consisted of concepts related to critical consciousness development identified in the literature (e.g., critical thinking, action, blame, denial). The authors also completed in-vivo coding when a theme emerged related to critical consciousness development. Accompanying the in-vivo coding process, the coders composed coding memos to detail their thinking and explain their interpretations of the data. When comparing codes, the coding team noted the difficulty each person had with coding participants' manifestations

of critical consciousness. In contrast, the in-vivo codes appeared with ease when predominantly focused on the facilitator and the facilitation of the critical dialogue. In other words, the richness of the transcript data offered descriptive codes that captured themes across sessions and most often related to the approach to facilitation.

During this time, third author Jemal (who facilitated critical dialogue sessions of the Community Wise intervention in 2012 and co-authored the Community Wise facilitator manual) found that the Community Wise dose (attendance) did not have a positive correlation with the measure of participants' critical consciousness. This result seemed to explain why there were no significant differences between the 16 Community Wise groups and why the coders were having difficulty coding the data for critical consciousness development. It is very hard, potentially impossible, to code the absence of some phenomena in the data. With this new information in mind (and considering the contrastive experience of coding CC development versus facilitation approaches), the coders decided to pivot focusing on facilitation approaches and potential impact. Common codes and agreed upon codes were identified, discussed, and added to the code book.

The coders determined and confirmed that they reached saturation when new codes ceased to emerge (and by spot-checking additional data for potential new codes). The team exported codes and memos to an Excel sheet. Team debriefing sessions involved discussions of each code, memo, the relationships between codes, any convergences (when raters applied the same code to the same parts of the transcript), and any divergences (when raters applied different codes to the same section). This process led to findings that examine critical dialogue and critical dialogue facilitation. This investigation could shed light on why attending more of the Community Wise groups did not increase critical consciousness while also providing potential facilitation strategies for critical dialogue facilitation.

Findings

There is a gap in knowledge regarding effective critical dialogue facilitation. As introduced above, during data analysis the role of the facilitator and facilitation skills emerged as impacting the potential for participants to engage effectively in critical dialogue (and therefore engage in critical consciousness development). Through the authors' shift to focusing on facilitation instead of participant CC development, the research question became what is the impact of the facilitator/facilitation approach on critical dialogue facilitation; which facilitation strategies might constrict, and which might enhance, critical consciousness development? The authors offer these exploratory findings as a window into understanding the practice of critical dialogue facilitation. Excerpts from the data revealed facilitation strategies that supported transformative critical consciousness development. In contrast, other excerpts provided key moments when facilitation appeared to shut down critical consciousness development. The findings are presented within these two buckets for the purpose of illustration but are not mutually exclusive—in the same interaction, examples of both forms could be found. In addition, these approaches exist on a continuum and these examples are meant to exemplify the findings and are offered as teachable moments. This section opens with a discussion of contextual variables that likely impacted

facilitation. Next, supportive facilitation strategies are discussed, followed by constricting facilitation approaches. Implications are explored in the discussion section.

Table 1. *Themes and Subthemes that Emerged from the Data*

Theme	Subthemes	Brief Description
Problematic contextual variables for facilitation	Manualized	Impact of using a manual when aiming to develop CC
	Time scarcity	Pressure created by a sense of limited time and with end goals prescribed
	Identified as non-therapy	Lost opportunities for connection created when personal histories and emotive reactions cannot be explored
CC supportive facilitation	Clarification	Seeking more information about and clarity around participant experience
	Creativity	Using creative approaches to engage content with participants
	Flexibility	The capacity to prioritize connection and relationship-building within the intervention
	Curiosity	Leading with a curious mind and being responsive; fewer assumptions
	Use of humor	Infusing humor to aid in joining with participants
	Instilling hope	Bringing optimism and possibility into engagement
Constricting facilitation	One-track mind	Hyperfocus on the manual and intervention
	Lost opportunities	Failure to explore, examine, or expound on the participant experience when offered an inroad
	Distancing	Creating a rupture through expressed judgement or assumptions
	Confrontation	Failure to explore the "why" behind a participant's perspective and instead engaging in a power struggle
	Binary thinking	Working from a framework based in mutually exclusive and opposing definitions of a concept or experience

Problematic Contextual Variables for Facilitation

Aspects of the design of the Community Wise intervention had the potential to constrict CC development via the limitations it placed on the facilitators. These include it being manualized, time-limited, and identified as non-therapy. Some facilitation strategies mitigated these problematic contextual variables (outlined in "CC Supportive Facilitation" section below), while other strategies exacerbated them. How the facilitator viewed their role or understood their function within these external confines had the potential to negatively impact the group dynamic.

Manualized

At multiple points the facilitator shut down the conversation by referencing the program manual. Although not the intent by the program developers in having a manual as a guide for the training, if the facilitator interpreted that the participants were not getting the "take home message" intended by the curriculum, the facilitator would have the

participants read it from the manual. This created the impression that the facilitators prioritized the manual content and not the experience of, input from, or feedback from the participants.

> Facilitator: *Do you see a lot of happy families in inner city communities?*
>
> Participant 2: *Only when they drinking.*
>
> Facilitator: *Only when they under substance use. Okay. How would you define a family?*

In addition, one facilitator consistently corrected participants as they read aloud from the manual, which could be experienced as disrespectful (creating distance). This finding raises the question, beyond the scope of this analysis, of how the manual content could be improved to reduce the likelihood of such interactions, versus what was an issue of facilitator training/interpretation.

Time Scarcity

A sense of time scarcity was reinforced by a manualized and time-limited approach. It resulted in the facilitator making the "connections" for the participants and them simply acquiescing and agreeing.

> Facilitator: *So, in this picture right here, do you see any of that happen in 2017? Do you see any Black people being sold?*
>
> Participant 1: *No.*
>
> Participant 2: *No.*
>
> Facilitator: *Any forms of being sold, I mean in any way. Maybe being on a stand, maybe it's just a man in shackles, hands, and feet. He's about to see the judge. Maybe.*
>
> Participant 1: *That's a form of being sold?*
>
> Participant 2: *Yeah, that's a form of being sold.*
>
> Participant 1: *Yeah. We get incarcerated-*
>
> Facilitator: *So, this is still happening.*

Identified as Non-Therapy

Throughout the sessions, minimal space was made, or time allocated, for participant emotions to be processed in the group setting. When participants mentioned traumatic events (i.e., their first experience using a substance, history of molestation), the facilitator moved away from those topics quickly or ignored them entirely. In this way, they kept the group process as an intellectual experience, which reinforced the dis-membering of dehumanization (disconnection from the body and humanity).

CC Supportive Facilitation

The themes explored below (clarification, creativity, flexibility, curiosity, use of humor, instilling hope) encapsulate facilitation strategies that enhanced and/or encouraged CC development.

Clarification

Clarification involved facilitators eliciting more information from the participants about their experience or perspective. It allowed for open-ended discussion and for participants to describe their own reality. Like active listening, it created space for participants to clarify what they meant if the facilitator's interpretation was off (Finn, 2020). This generated a shift whereby the participants' expertise in their life experience was given weight.

Facilitator: *Who's in your social support?*

Participant 1: *My two sisters, my God-brother. I got a God-brother he'd been driving for* [large state transit system] *for three years now. He calls me, come over and that's all he talk about.*

Facilitator: *Really?*

Participant 1: *Yeah. He don't even take the transit clothes off. He's riding around, he goes south with his transit clothes on. Yeah, that's how much he was just...I had class B and he had got his class B. He's younger than me, he's like 37. And he was like, "I'm about to get my class B license." Because, he ain't know what he wanted to do. He worked for...what was the airline that went out?* [large airline company].

Facilitator: [large airline company]?

Participant 1: *Yeah, he was with [large airline company] when he went out. After that, when they went out he got a good piece of money because he's been there for a long time. He ain't know what he wanted to do. This is what he decided to do was drive buses. He got his license like that. Working mad hours and he's still doing a lot of hours. He's been working out there three years. They got him on a 76,* [bus route name]*. He been doing the* [bus route name] *for a while. He's been doing that for a while, like four months now. He love that route. So this is what we talk about.*

Facilitator: *All right now.*

The facilitator's use of open-ended questions and affirmation allowed for greater rapport-building and connection.

Creativity

Creativity of facilitation gave room for nuance, which helped the discussion content fit the needs and interests of the participant group. Further, imaginative examples resonated more effectively with the participants. In moments when the facilitator went off script, group connection, relationship-building, and critical dialogue occurred.

Facilitator: *So, let me change my hat* [go off script]. *I want to be devil's advocate.*

Participant 1: *I see that today, yeah.*

Facilitator: *However, if I'm a White woman, upper. We all from the same... we're all born...today. My name is Sally... no. Matter of fact, I want to be Bill. My name is Bill. I'm a White man. We're all born together. Do we all have the same opportunity?*

Participant 1: *No.*

As this excerpt demonstrates, the facilitator's ability to pivot from the manual and reframe the discussion helped illuminate the social analysis within the group exercise. This made the content more accessible to the participants and engendered greater CC-development.

Flexibility

Flexibility in facilitation was evident when facilitators put energy towards relationship-building and drawing connection to the humanity of all involved in the group, thus building a foundation of trust. In one instance, a participant relayed the need to get a colonoscopy, but that he had trepidation. The facilitator drew a connection between this experience and historic distrust in the medical system due to the exploitation of African Americans. Following the topic brought forth by the participant and demonstrating critical thinking in this way, validated the participant's emotional state while offering a structural explanation for his micro-level experience (Metzl & Hansen, 2014).

Curiosity

Curiosity allowed the facilitator to explore participants' thinking and perspective in place of seeking out a "right or wrong" answer. Further it helped avoid engaging in a power struggle, which inadvertently causes people to dig in their heels, reinforcing their own perspectives/opinions (DR, 2016; Miller & Rollnick, 2013).

Facilitator: *Who do you think benefits when you are... when a person is backed against the wall and they're forced to sell drugs, who do you think benefits?*

Participant 1: *The person that's selling the drugs.*

Facilitator: *The person that's selling the drugs? Even though they may go to jail? They have no retirement.*

Participant 2: *Either go to jail or get killed.*

Facilitator: *So, who benefits from selling drugs?*

Participant 1: *The dealer still benefits.*

Facilitator: *The dealer.*

Participant 1: *He still benefits. Ain't nobody else benefiting but him.*

Facilitator: *Even when he gets caught?*

Participant 1: *That's the chance he's taken.*

Facilitator: *So that's his benefit?*

Participant 1: *He already know the consequences.*

Use of Humor

Humor was used to break the ice and join with the participants. Humor reduced the intellectualizing of the experience and got participants back into their bodies. Of note, this approach was delicate, because when the joke did not land, it created distance (i.e., in some encounters, the facilitator attempted to joke with the participants, but the jokes didn't resonate, and this strained the group dynamic.). The following example demonstrates banter in which it appears the facilitator was trying to employ humor that did not resonate for the participants.

Facilitator: *So, next week we could agree. I could bring coffee. If you guys...If you want to leave here early and go get some coffee and come back. So, at least it's still hot.*

Participant 1: [inaudible] *been stressing over the coffee.*

Facilitator: *You seem like you're stressing over the coffee. You asked and you talked about the coffee.*

Participant 2: *As soon as you seen her, "You got coffee?"*

Facilitator: *As soon as you seen me, "Where's the coffee?"*

Participant 1: *Yeah, but see, you came in, so I just say, "We ain't really stressing over the coffee."*

Facilitator: *No, because I thought about that. I said, "If I get the coffee, it's not going to be hot by the time they get here at three o'clock." So that's why I said, "No, I don't think they're going to enjoy the coffee."*

Instilling Hope

Freire (1970/2000) believed that hope was needed for building the foundation of CC (followed by love for self and own/other's humanity). The following excerpt demonstrates facilitation skills employed by the participants to one another. It highlights this strategy and serves as a reminder that facilitation does not only occur by professionals. In this excerpt, one participant aimed to instill hope in the mind of the second participant by suggesting they avoid focusing on the negative:

Participant 1: *Could be better, but it always could be better.*

Facilitator: *What could be better?*

Participant 2: *Ain't no use in complaining about it.*

Facilitator: *Complaining about what exactly?*

Participant 1: *The way it is.*

Facilitator: *The way life is or where you are in it?*

Participant 2: *Ain't no use in complaining about it.*

Constricting Facilitation

Constriction via facilitation, or "shutdowns," related to the facilitator (e.g., facilitator's personality or style), to the facilitation strategies or techniques, and to the environment or

impediments of the environment (discussed above in *Problematic Contextual Variables for Facilitation* section above). The themes explored below include one-track mind, lost opportunities, distancing, confrontation, and binary thinking. It is important to note that these findings are not a reflection on the facilitator training process, the intervention, or the manual. These findings do not suggest why these constricting facilitation encounters occurred (e.g., the training endorsed certain practices, facilitators need more training, or facilitator's interpretation of implementation and how they enacted the sessions), only that they did come through in the findings.

One-Track Mind

The "one-track mind" approach came through when the facilitator was hyper-focused on the way in which information was presented in the manual. This resulted in over-generalizations about content, which was counter to CC-development and missed the nuances and complexities of societal forces. For example, when speaking about employment opportunities and race, the facilitator attempted to drive home the point that racism makes employment more difficult for African Americans than white people. Unfortunately, the example offered by the facilitator remained at the individual level, failed to account for systemic oppressive dynamics, and offered a reductionistic (as opposed to intersectional and macro-informed) perspective. A one-track mind approach also appeared when the facilitator attempted to counter presumed distorted thinking on the part of the participant(s). Although prior scholarship notes the importance of challenging cognitive distortions to develop CC (Jemal et al., 2022), the one-track mind response created a power struggle with the participant(s) which inadvertently compounded the constriction of CC-development.

Lost Opportunities

A heightened focus on sticking to the manual and curriculum led to many lost opportunities wherein the facilitator failed to explore, examine, or expound upon what the participants were bringing to the discussion and/or their experiences of being in the group (e.g., being asked to do homework or having a manual that is different than the facilitator's). In one session when the topic was disproving conspiracy theories about the origin of HIV/AIDs, a participant intimated a story about sexual violence leading to false accusations, incarceration, further sexual assault during incarceration, HIV diagnosis, and substance misuse. After sharing this, the facilitator responded with:

> Facilitator: *Don't go to World News. I want to see if you could just type it in a word search and see what comes up.*
> Participant 2: *How did HIV begin?*
> Facilitator: *Yes.*

The opportunity to explore a traumatic memory and connect it to concerns about public health, sexual wellness, healing etc., was lost. Instead, the facilitator directed the participant back to an internet search on conspiracy theories. Evident in this dialogue was how the outcome or product of the curriculum derailed the process of CC development and

blinded the facilitator. It was unclear if the facilitator was skirting the topics raised due to the pressure to stick to the manual, a lack of clinical skill, or other anxiety. Regardless, the outcome was the silencing of the participant and a failure to create connection.

Distancing

Distancing occurred when the facilitator did or said something that created a rupture between them and participants, between participants, or between participants and others. This exemplifies the opposite of relationship-building. In one instance, the facilitator approached sobriety from an abstinence-only framework. This precluded the participant's ability to define their own form of success in relation to substances and countered any potential benefit of a harm reduction approach.

Participant 1: *Every time I wake up in the morning I'm better because I'm going to be able to see another day. And every day that I can stay sober, I'm better.*

Facilitator: *How many days sober?*

Participant 1: *Hm?*

Facilitator: *How long sober?*

Participant 1: *How long sober? I haven't been counting. Well, lately I haven't gotten drunk, so...But I do good. I go to* [outpatient clinic]*, I take my 3 days at* [outpatient clinic]*, and I come here on Saturdays. I don't hang out...I be where I stay all the time. I don't do nothing, I just get tired of being in the streets.*

This excerpt shows the facilitator (potentially inadvertently) policing the participant's behavior after the participant put up a particular façade around sobriety.

Confrontation

With confrontation, the facilitators pitted themselves against the participants (intentional or not). For example, in a discussion around sexuality and parenting, one of the participants stated views about being gay in an apologetic way (gay parents "don't mean to be this way"). The facilitator attempted to unpack this perspective, but it came across in a prosecutorial style, whereby the facilitator fell into a question-and-answer trap (Miller & Rollnick, 2013). Eventually a second participant disclosed "despising gay men." Instead of exploring and trying to understand the "why" beneath that statement, the facilitator responded, "why are you being biased?" This eliminated the possibility for the participant to interrogate the source of their sentiment (labeling it as wrong) and removed the potential for dialogue and/or evolution of perspective. While the facilitator stated that the group was an open space with no judgment, their confrontational approach instead shut the participants down and skewed the group dynamic.

Binary Thinking

Binary thinking is counter to critical analysis and reinforces white supremacist notions of ways of being/knowledge (Hardy, 2022; DR, 2016; Okun, 2010). One example of this occurred when the facilitator recreated racist narratives, categorizing all people of a particular racial identity as uniform, and bolstering the idea of racial groups as monoliths.

Facilitator: *So, do you think this is, so is this yes or no? Doesn't know history, doesn't know self. We're talking about the whole Black community. You think that's a, yes?*

Participant 1: *They don't know their history.*

Facilitator: *So that's a check for that one.*

Binary thinking seemed to shut down critical dialogue whereas expansive thinking may help to open the dialogue to include more perspectives and the potential discovery of the ways in which white supremacy operates. This finding leads to more questions: 1) how could the facilitator have challenged the notion that individuals within one racialized group are a monolith, and 2) would exploration along those lines have benefited participants engaged in critical dialogue?

Discussion

Community Wise serves as a case study for this exploration of facilitation. As a manualized intervention intended to develop critical consciousness and engage its participants in collective community action, one of its main components is facilitated critical dialogue. However, the goal of this analysis was not to evaluate the Community Wise manual or intervention efficacy. Instead, it was to provide exploratory findings around effective facilitation strategies for engaging in critical dialogue. This analysis revealed that the approach of the facilitator has great potency, and that potency lies not so much in their formal education (as there was no difference in outcomes for the groups facilitated by peers versus licensed professionals), but in the facilitation strategies employed within each critical dialogue opportunity. In other words, facilitation effectiveness may be due to expertise in techniques and strategies of facilitation and not intervention content. In addition is the consideration of how dynamics such as race, gender identity, socioeconomic status, and sexuality come into play within group development and critical dialogue (Carastathis, 2014; Crenshaw, 1991).

An earlier paper on facilitation practices for this and similar interventions identified traps that facilitators can fall into that counteract the potential impact of the intervention (i.e., the question answer/trap, the expert trap, the confrontation/denial trap; Jemal et al., 2022). The findings of this analysis identified times when the facilitators fell into these traps (similar to these codes in this analysis: as confrontation, binary thinking, and one-track mind). Our findings indicate how these traps created lost opportunities for CC growth and increased distance between facilitators and participants. Given that facilitators of critical dialogue are not experts or teachers who have hierarchical roles in the traditional ways that many are educated, practice guidelines could support critical dialogue facilitators

in implementing this practice and evaluating their work. For example, practice guidelines on how to avoid binary thinking (e.g., discussing racial groups as a monolith) and engage expansive thinking-wherein facilitators identify the gray area or available options (e.g., by exploring the nuances within racialized groups) could be helpful.

Jemal et al. (2022) suggest a suite of facilitation skills to avoid facilitation pitfalls— Socratic questioning, developing discrepancy, rolling with resistance, reframing, and summarizing. The aspects of supportive facilitation that promoted critical consciousness found through this data analysis (creating connections/relationship building, clarification, creativity, use of humor, and instilling hope) align with these protective facilitation strategies and are necessary components for employing them. In other words, curiosity makes possible engagement in Socratic questioning, flexibility, and humor to be able to clarify meaning to reframe content and instill hope. Further, connection and relationship-building deepen the impact of these skills. Relationship-building aims to create a brave space for dialogue and vulnerability while considering and working through fears. Additional effective strategies involved allowing ideas that arose in the discussion to guide the conversation, which offered participants the opportunity to be the leaders and fostered a learning community (Smith-Maddox & Solórzano, 2002). In this way, facilitators modeled how to think critically (as opposed to identifying the "correct" answer).

The findings indicate that the goal of facilitated critical dialogue may be to create a liminal space between structure and flexibility in which critical thinking, growth, transformative healing, community-development, and risk-taking might occur (see Figure 1).

Figure 1. *Proposed Space for Effective Facilitated Critical Dialogue*
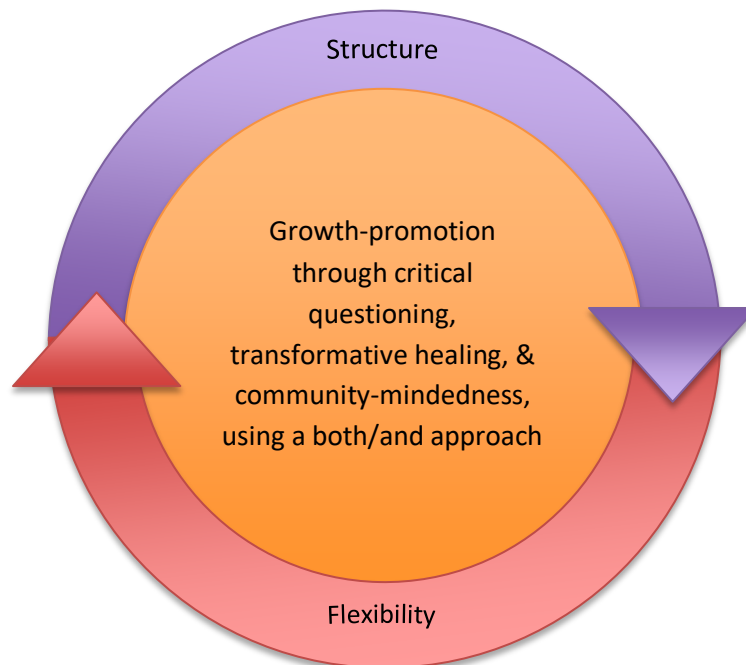
Social work educators, and practitioners in various fields might use critical dialogue in the classroom with students, in private practice with clients, and in institutions with co-workers, collaborators and other service providers, with these facilitation strategies as a guide.

While the findings from this analysis point to the critical role of the facilitator in supporting or constricting the development of critical consciousness, they also serve as a reminder that external variables (e.g., context, training, limitations of intervention framework, time scarcity, professional pressure) have great impact. Specifically, and deserving of further research, manualized interventions with fidelity concerns may pose a hindrance for some facilitators. In Community Wise, the manual provided exercises and takeaway messages, but this approach may not have provided sufficient flexibility for facilitators and participants to engage with the ideas meaningfully or critically or to spontaneously follow the group's interests (perhaps one solution would be to make clearer within a manual where a facilitator has more discretion). Whether due to their perceived pressure to perform, deliver the "right" message to participants, or reach a particular final takeaway, the facilitators potentially lost sight of the dialogic process (and the process itself is where CC cultivates as it allows participants to arrive at their own conclusions in their own way). More research is needed to understand whether the manualized approach undermined the creation of an egalitarian learning community, which placed limits on the potential for co-learning and the deconstruction of larger societal oppressive systems (Freire, 1970/2000; Gutiérrez & Ortega, 1991).

Future Research and Limitations

It is important to note that Community Wise was a research project in which the facilitators were receiving supervision with regards to fidelity to the model. Moreover, the supervisor was the employer of the facilitators. The impact that these factors had on the data and, thus these findings, is unknown and difficult to measure. In addition to being part of a research study, only two of forty-eight groups were selected for study based on the critical consciousness scores as described in the methods section. Further, given this was a case study, the findings may be hard to replicate, and the transferability of the findings are limited. In addition, the dual role of the third author leaves room for increased researcher bias. Additional intervention research would be beneficial to identify alignment with and/or divergences from these findings. In addition, future scholarship could further evaluate forms and methods for cultivating critical dialogue (including the qualitative aspects of effective critical dialogue). Such research may help elucidate how much flexibility to bake into intervention design to allow for organic group development via the discretion of facilitators. Such an understanding is important due to the need for fidelity in intervention analyses. Formal research inquiries could explore if and how facilitators interrogate their own appropriated racial oppression (Versey et al., 2019) and whether alignment is needed between facilitator and participants with regards to race, ethnicity, language, and/or lived experience. Future research could also study the efficacy of a train-the-trainer approach for facilitators. Furthermore, examining supervisory impact on facilitation would be useful. The authors assume that facilitators are influenced by the clinical practice style of their trainer(s)/supervisor(s) (i.e., based on how the trainer would facilitate groups). Research

could unearth how facilitation changes when having supervisors with different practice styles. Last, future research could explore the collaborative development or revision of the manual informed by graduates of the intervention. Those who have experienced the facilitation methods firsthand have invaluable insight. This could inform the development of a facilitation guide that describes processes and strategies for creating the liminal space between structure and flexibility outlined above.

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