Because of the many social problems in modern American society, scholars have suggested that America is a nation at risk. Although this claim may seem hardly credible for the richest and most powerful nation in the world, empirical data suggest that a significant number of young Americans suffer the consequences of social ills that jeopardize future possibilities for meeting the challenges of a participatory democracy. Poverty, homelessness, HIV/AIDS, child maltreatment, adolescent parenting, substance abuse, school dropout, suicide, imprisonment, delinquency, and violence have all been identified as social problems that threaten the psychological, social, and physical health of American youth and the integrity of American society (McWhirter, McWhirter, McWhirter, & McWhirter, 1998). Of special concern is that many social problems disproportionately afflict people of color. As such, the most vulnerable populations have the least social and economic resources, thereby limiting genuine prospects for social mobility. Accordingly, scholars contend that young African American males fueled, by their inability to claim a legitimate stake in society, become involved in illegal drug use during early adulthood. What is more, once drug careers have developed, they are easily maintained by a drug infrastructure that promotes violence and profiteering (Gibbs, 1988; Stevens, 2001; Wallace, 1999; Wilson, 1987).

Reasonably, some scholars have therefore raised questions concerning the utility of a risk construct, suggesting that it represents a deficit model that “blames the victim” (Swadener & Lubeck, 1995). Arguably, when risks are viewed as a consequence of problems in society as a whole, there is little need to “blame the victim.” Furthermore, despite adverse social conditions, some youth—perhaps all too few in such circumstances—nonetheless, do exhibit a power of endurance and competence that enables them to transcend environs replete with risks (Ford, 1994; Garmezy, 1993; Jarrett, 1995; Stevens, 1997; Wallace, 1999; Williams & Kornblum, 1985, 1994). Thus, I suggest elsewhere that resilience and risk are functional constructs that help clarify the intersection of social context...
and behavioral responses (Stevens, 2002). Given the vagaries of life, mundane circumstances are never all bad or all good but, rather, a mixture of both favorable and unfavorable conditions. Notwithstanding, I make use of the at-risk concept to refer to those circumstances that are heavily weighted on the side of being unfavorable or toxic and, as such, pose grave threats to safety and well-being. Although there are several models of risk (cumulative, additive, interactive), being at risk is ordinarily understood to indicate exposure to circumstances of harm or jeopardy in environs in which individuals and families are situated. Resilience on the other hand is achieving a good outcome from harsh circumstances as well as the management of risks to avoid misfortune or harm.

In this chapter, I suggest that the concepts of both risk and resilience have veritable utility for understanding marginalized youth in inner-city communities where many neighborhoods are characterized by unsafe environments, economic impoverishment, and depleted social resources. First, I contend that the ecological framework is a conceptual tool that brings into focus the intersection of persons, process, and social context and thus clarifies the manner in which the concepts of risk and resilience are operative in lived experience. Second, I will argue that the gravity of present-day challenges that economically disadvantaged youth face necessitates change in how we understand the nature of their achievements and strengths. Hence, I propose that practitioners can learn a great deal from resilient inner-city African American youth and their families about what is needed to succeed in adverse environments. Based on research, attributes of resilience that play a part in self-affirmation and social mobility will be discussed. Last, I suggest that youth are helped best by supporting their attributes of resilience.

**RESEARCHING RESILIENCE: A CULTURAL ETHNIC STANDPOINT**

The interpretation of ethnographic or qualitative data may be conducted from a standpoint epistemology—that is, from the lived experiences of the research participants themselves.

This interpretative method requires the researcher to work from the outside to the center (Collins, 1986, 1990; Denzin, 1997; hooks, 1984). A standpoint text starts from the lived experiences of those considered to be “other” or outside mainstream society. This form of reporting narrative renders data less objective and abstract (Smith, 1989). In this regard, respondents’ texts reflect intersections of class, ethnicity, and gender, yielding a multivocal text. All things considered, a multivocal text is created when the researcher is located inside the cultural narrative and carries on extensive dialogue as if a member of a valued cultural group. As a researcher, it has been a humbling learning experience and a privilege to enter the lives of African American female research participants to gain knowledge of their “ways of knowing” how to cope with adverse conditions. Moreover, as an African American female, I have the privilege of being situated inside the historical cultural narrative of the “black experience”; I too am marginalized in the larger societal context as “other.”

The situated experiences of ethnic outsiders are manifest concretely within a societal hierarchy distinguished by the social status of racial/ethnic devaluation and oppression. At the same time, however, my cultural ethnicity is one I share with research participants; hence, I am positioned as an “insider.” Recognizably, a researcher’s insider knowledge can be both an asset and a liability (Kanuha, 2000). Being all too ready with assumptions, an insider can presume to know about who research participants are and how they live their lives, minimizing an investigator’s objectivity. For sure, there are limitations regarding my insider position by virtue of class and lack of personal knowledge with reference to the problems under investigation. At the same time, however, these personal characteristics could allow for objectivity and, as such, minimize bias. Indeed, the one most important lesson I learned from study participants over and over again is that resiliency exists in the direst of circumstances. Significantly, this lesson served as a caution to rethink notions of what it means to be at risk and resilient and how the two constructs operate in the lives of poor black females.

For my purposes here, qualitative and quantitative findings from research studies of economically disadvantaged inner-city black females
that include studies of late-aged (17–19 years) pregnant and nonpregnant girls and early-aged (11–14 years) middle school girls provide the data for theorizing about how indigent but resilient black youth deal with adverse environments. Study samples were characterized by social indices suggesting that both groups were from impoverished environments. In the middle school study, a clinical intervention to improve school performance and adjustment was tested in a quasi-experimental design. The clinical group intervention sessions were audiotaped and used as qualitative data. Girls referred to the program displayed at-risk behaviors such as poor academic performance, excessive tardiness, absences, and school suspensions because of fights with peers. The pregnancy research was conducted to contrast and compare pregnant and nonpregnant females with regard to their self-perceptions and perceptions of the surroundings in which they lived. This research has been reported extensively elsewhere, most recently in the text *Smart & Sassy: The Strengths of Inner City Black Girls* (Stevens, 2002). Because research participants were all female, I use corresponding pronouns. As one would expect, the value of qualitative research such as this was that participants’ narratives are contextualized, with the ordinary manner in which most people engage in discourse under study. Information is processed from within the multileveled social contexts in which we find ourselves grounded. The open-ended adolescent pregnancy study questionnaire that was used elicited narrative accounts about a girl’s family, neighborhood, peers, and school. By doing this, stories were contextualized naturally so as to construct meaning and complexity in how I understood these girls’ thinking and behavior. This process is called *contexting* (Hall, 1971).

**A THEORETICAL FRAMEWORK FOR RISK AND RESILIENCE**

Like others (Brunswick, 1999; Spencer, 1995), I draw on the ideas of Bronfenbrenner (1979) to consider an ecological perspective in my theorizing about at-risk social contexts, risk behaviors, and resiliency among African Americans. Briefly stated, Bronfenbrenner suggests that an ecological system includes nested contexts within systemic domains of bio-psycho-social-historical influences that affect individual development. Namely, social contexts are the “nested contexts” of an individual’s life and include a person’s family, school, peers, church, neighborhood activities, and sociocultural structural conditions. The nested contexts within systemic domains are multileveled, bidirectional (reciprocal), and transactional such that the activities and persons within a given context affect the individual, who in turn has a reciprocal impact on the same social context. Consider abstractly Bronfenbrenner’s systemic domains as concentric circles represented by numerical sequencing from center to outer spheres. Each circle represents a different level of abstraction: (1) ontogenetic (the individual person); (2) microsystem (family-kin, neighborhood activities, groups, and institutions); (3) mesosystem (larger community institutions, groups, and organizations); (4) exosystem (national institutions and social structures of health, welfare, business industries, financial centers, mass media); (5) macrosystem (societal attitudes and ideologies that induce structural strain); and (6) chronosystems (aspects of time, patterning of environmental events and transactions over the life course, sociocultural historical conditions, and structural strain). At this sixth level, structural strain refers to the structural barriers that block access to opportunities, privilege, and power over time. An illustrative example might be the perpetuity of “the old boys’ network” of white Anglo-Saxon protestant males who have garnered prime opportunities for amassing wealth in high-status careers. Characterized by transactional intersubjective processes within contexts and between contexts, the ecological perspective is context dependent. Risk and resilience when interpreted in this light are operational within a transactional model of process and social context. What one experiences is conspicuously the result of intersubjective processes between individuals and institutions that make judgments regarding what is adaptive or mal-adaptive. Institutional intersubjectivity may be reflected, for example, in how well social policies and social policy formulation are tailored to meet the needs of individuals (Crossley, 1996). However, we can just as easily ignore the higher
levels of policy and look only at individuals and their maladaptive lifestyles and behaviors, a position that returns us once again to blaming the victim rather than understanding the intersubjectivity of people’s experiences. Individual maladaptation may manifest itself as a lack of compassion (empathy), a lack of a shared sense of care for others and affinity with them (mutuality), a seeking of recognition in viciously destructive behaviors, a lack of assertion, or the affirmation of the self through acts of violence. In this regard, it has been well documented (Anderson, 1999; Bolland, 2001; Bourgois, 1995; Ratner, 1993; Sterk, 1999) that maladaptive lifestyles (e.g., drug kingpins) pose threats (risks) to the quality of life in inner-city communities. This is of course, not debatable. However, we may need to question, from an ecological point of view, the role that social forces play in making these behaviors more desirable to some populations of marginalized individuals.

Benjamin (1990) has argued that intersubjective attunements of recognition and assertion are operationalized reflexively in that they are mirrored and validated through others. Given this, I have chosen to focus this psychosocial inquiry on the following: (a) the nature of a girl’s intersubjective transactions within and between social contexts; (b) the makeup of a girl’s contexting or construction of meaning regarding self and surroundings; (c) the nature, content, and attitudinal perception of those social contexts in which a girl is deeply rooted; (d) the nature, content, and attitudinal perception of the social contexts in which a girl seeks to meet immediate needs; and (e) the nature, content, and attitudinal perception of the social context a girl seeks or desires to negotiate to meet future needs. Practically, this five-point query provides information that depicts portraits about a girl’s self-organization and self-regulation related to her intersubjective responses of empathy, assertion, and recognition and her attitudinal perceptions of others and various social contexts, and a girl’s perception of the significance of a range of social contexts in meeting immediate needs and future goals. Perceptibly, this kind of inquiry yields rich data about risk and resiliency within the contexts of the adolescent’s lived experiences. Thus, participants’ evaluative perceptions reveal judgments about favorable and unfavorable ecological conditions that lead to or inhibit the formation of resiliency.

I claim two basic assumptions that undergird my theorizing in this way. Significantly, the first assumption is the commonplace understanding that human beings by nature are relational and grounded in social context. Equally important, my second assumption is that adolescents commonly covet a relationship with an older adult—one that offers consistent emotional attunement, guidance, and direction and that validates personal and collective experiences. A practitioner, for example, often builds on this normative and expected role modeling function required by adolescents. A primary relationship with a significant adult has been empirically documented as a capacity-enhancing attribute of resilient adolescent girls. Undeniably, a practitioner’s relationship with adolescents can offer an intersubjective experience of fundamental consequence. The following illustrative examples, taken from my research, explore the intersubjective world of African American girls and the interface between them as individuals and the multilevel ecology of the social and political factors that affect their well-being.

**ILLUSTRATIVE EXAMPLES**

Seminal ideas about person, process, and contexts begin to take hold when conducting research in an inner-city neighborhood middle school. Long hours were spent at the school. By chance, I became a participant observer, studying the varied intersubjective transactions among stakeholders (i.e., students, administrators, teachers, and auxiliary staff) that took place in the general surroundings of the school. My observations led me to understand that the school staff was generally not supportive of the girls in the study and did not see them in a good light. The girls’ behaviors generated insensitive gossip among school staff, the content of which denigrated and devalued the girls. Importantly, the girls were well aware that they were viewed negatively by school personnel. The following description, illustrates how recognition, empathy, and assertion operate within two contextual fields among a group of middle school adolescent
The clinician who worked with the girls in the intervention study program was a social work intern.

The study girls were viewed by the school staff as displaying loud, boisterous, and brassy behaviors. Teachers complained that the girls argued and talked back to them. The girls were all given the label of conduct disorder by the school social worker, and the teachers were in agreement with this labeling. Interestingly, the girls in turn saw their teachers as not earning their respect, contemptuous of their scholastic efforts, and not invested in their learning. It was hard to disagree once immersed in the school ecology. Some of the teachers in the school seemed so overwhelmed by what they identified as “too many discipline problems” that their commitment to teaching was compromised by a failure to deal effectively with the many problems students presented. Likewise, the teachers were accurate in their observations of the girls as loud and argumentative. Eventually, the girls accepted responsibility for their confrontational behaviors, admitting that although their actions were defiant, it was a way they had managed to cope with feelings of being “put down.” Being black, the girls questioned whether this was the reason they were treated disapprovingly by their teachers, who were white. From the girls’ perspective, being argumentative or “speaking up” displayed self-affirmation and provided protection against feelings of powerlessness and devaluation.

In another realm, the girls used a very different set of coping strategies. In particular, they were in a quandary about what to do when adult males in their neighborhoods approached them sexually. Such advances offended the girls; unresponsive and frightened, they felt violated. What is more, the girls’ unspoken disinterest provoked rude insults from the men that shocked, angered, and scared them even more. The intern helped the girls to appreciate the varied contextual complexities of their neighborhood and school. In addition, she clarified the girls’ healthy need for self-affirmation (assertion) and their failed attempts to gain the respect (recognition) desired from the school setting. When engaged in this manner, the girls were willing to disclose feelings of helplessness and vulnerability and the social and personal devaluation they felt in both social contexts. As affective disclosures were acknowledged, intersubjective processes of empathy, recognition, and assertion were strengthened to the degree that self-awareness of affinity (mutuality) intensified the bond between them and their caregivers. Moreover, the girls had obtained from each other sympathetic understanding (empathy), respect (recognition), and affirmation (assertion); supported by their peer group experience, the girls enhanced their sense of self-efficacy in other social contexts. As the intern observed, in school, the girls were outspoken and seemingly self-assured, whereas in the context of their neighborhood streets, they were indeed intimidated and angered but silent.

Clearly, the girls’ neighborhood presented them with multiple risks—in one case, sexual harassment and seduction by older men, in the other, a school climate that devalued them and their behavior. Through the group intervention, the girls were helped to evaluate distinctly diverse social contexts, deciding on the appropriateness of their responses within each. The purpose of the intervention was to enhance self-organization and self-regulation to aid the development of more elaborate and meaningful responses in different situations. In addition, the intent was to improve understanding of the best way to respond to varied social contexts. The intern enabled the girls to understand the need to choose different behaviors, assessing the best fit between their behavior and the demands of each context. The intern clarified the meaning of appropriate behaviors, when it was proper to turn up the verbal volume (i.e., to be self-affirming by being outspoken, blunt, candid, and loud when rejecting unwanted sexual advances) and when it was fitting and proper to turn down vocalizations (i.e., a quieter vocal style of self-affirmation in the school environment). Furthermore, clinicians empathically clarified developmental issues underlying each circumstance. For example, developmentally, adolescent girls undergo many physical changes and have many concerns about body image. Girls at this age naturally wish to be seen as attractive. The girls were confused by wishes to be sexually attractive and the anger they experienced at the vulgar lasciviousness of the older men. The social work intern validated the girls’ normal developmental issues as well as pointedly
expressed indignation about the “indecent behavior of the men.” Observably, the girls' natural self-confidence and capacity to discern threats to their well-being were characteristics associated with resilience that were enhanced by the intern’s interventions.

As this example illustrates, even though the individual is the focal point of Bronfenbrenner’s (1979) ecological perspective, the person-process-context paradigm allows for a biopsychosocial-historical systemic assessment of social contexts. The adolescent pregnancy research participants no less than the middle school intervention study participants demonstrated these same qualities of mutuality, empathy, recognition, and assertion in everyday life. One part of the adolescent pregnancy research hypothesized that nonpregnant girls are more likely than pregnant girls to develop links with their communities beyond their immediate families and peers. Such linkages are represented by engagement in church, community, employment, and educational environments. Findings supported this hypothesis. Nonpregnant girls differed from the pregnant girls at a < .05 level of significance on critical behavioral, psychological, educational, and situational variables. Unquestionably, both cohorts displayed what now are identified as resilient behaviors; however, nonpregnant girls consistently exhibited a certain individuality that demonstrated stability and hardiness in engagements with nonpeer and nonkin social contexts, such as church, social clubs, jobs, and college. Surprisingly, study results revealed that nonpregnant girls were more likely to express a strong sense of care and nurturance for others, whereas pregnant girls, although soon to be parents, were less likely to express this same care and nurturance (expressed mutuality and empathy as shared affinity with others). In view of the theoretical model set forth, it could be argued that nonpregnant girls were more likely to have sophisticated contexting experiences than their counterparts because of their involvement in varied social settings. One might conclude that the nonpregnant girls’ diverse contextual experiences provided opportunities for a wide range of occurrences where intersubjective (self-relatedness) processes of empathy, recognition, and assertion could be played out.

Bearing in mind the distinction between the elements of a social context that includes form, intersubjectivity, and content, the adolescent pregnancy research participants provided rich qualitative data about their neighborhoods and families, including information about a vicinity’s or a kin network’s composition and organization, its self-relatedness (intersubjective processes), and its substance or essence (content and quality of life). Importantly, the distinction between context structure, context intersubjectivity, and context content is necessary because critics (Delgado, 2000; Swadener & Lubeck, 1995) of the at-risk construct mistakenly confound form, process, and content. Notwithstanding, the ecological model of context is holistic, intersectional, and transactional, making it possible to differentiate interrelated characteristics of a particular social context’s elements of form, content, and process. Hence, the model can integrate the at-risk concept with specific process and, contextually, aspects of resilience and protective mechanisms. It is not a matter of either assets or risks as the more important focus for study when examining urban neighborhoods or urban families but, rather, the degree to which both are present. If a social context has a greater elemental presence of risks than assets, then it is likely that the social context poses greater dangers than protections of safety and support. On the face of it all, context elements seem equally consequential, but on closer examination, this may not be the case.

Consider for example an economically disadvantaged, single-parent family of five living in substandard rental housing (form) that flagrantly poses dangers to physical safety, yet the family is strong in its history, values, and ethos (content). In the best possible way, the discourse within the family sensitively reflects empathy, care, respect, affirmation, and affinity (intersubjectivity) among members. And yet, there is a great deal of variety in both the risks this family faces and the strengths they bring to bear on coping with their adversity. On the positive side, the eldest daughter graduated from high school, is employed part-time, and attends college and a local Catholic Church. The mother, however, collects disability and is no longer employed. Other factors that must be considered include that the family’s neighborhood is ethnically homogeneous, its occupants African American.
The neighborhood lays claim to economic and social resources, most of which are liquor stores, small groceries, beauty shops and barbershops, and a local YMCA recently renovated with a gym and swimming pool. Most housing in the neighborhood is substandard with the exception of a two-floor, walk-up public housing complex. A storefront church has been conspicuously present to neighborhood dwellers with its loudspeaker service broadcasts for several years; in addition, there is an established Catholic Church that has served the neighborhood for four generations. Drug gang profiteers have commandeered two old neighborhood buildings for selling and smoking crack cocaine. Unlike the more established services just noted, this threat to the community has been a part of the neighborhood for just two years.

On the face of it, the illustration can make no claim with reference to existent risks. It does not suggest that poverty, single-parent households, or the recent infiltration of drug lords automatically mean those in this neighborhood are at risk. Although, empirically, the three demographic indices are indeed associated with neighborhood risk, descriptively, the neighborhood context element discussed thus far is one of form. What is known is a little something about physical structures of social, economic, and religious resources that are conceivably assets to the neighborhood, its families, and their children. What is not known is information about the neighborhood’s substance (content), its perceptions of how neighborhood stakeholders view their environs as an identified entity, especially regarding risks and assets. Importantly, other unrevealed information is the intersubjectivity of the neighborhood, stakeholders’ self-relatedness in the daily praxis of the life of the neighborhood. Although the structure of neighborhood ecologies seems transparently visible for risk and asset identification, without additional data about remaining context elements of content and intersubjectivity, a risk and asset assessment is incomplete.

**DISCOVERING THE STRENGTHS OF INNER-CITY AFRICAN AMERICAN GIRLS**

Often, clinician biases take place when assessing various contextual domains in which African American adolescent girls live. For example, if a girl resides in a drug and crime-ridden neighborhood, the hazardous environment in which she lives may contextually prejudice the clinician. Thus, the clinician’s assessment is likely to emphasize what may appear to be obvious social and psychological pathologies rather than the girl’s less obvious strengths. Too often, African American girls’ demonstrated strengths in assertively dealing with toxic inner-city neighborhoods go unevaluated altogether or are assessed negatively. But it is precisely within the self-relatedness of the nested contexts where a girl is embedded, be they hazardous or risk-free, that her strength and resilience are developed and fostered in meeting maturational challenges. Admittedly, my understanding of this subject was developed from my investigation of adolescent black girls’ self-narratives and reports about themselves and the social ecologies in which they were situated. Some of what I discovered about the girls was refreshingly new information, whereas other findings simply confirmed what other studies have already told us.

Both studies referred to earlier clearly show that resilient African American girls display a personal hardiness—a focused commitment to follow events through—and a strong sense of self-efficacy. They tend to develop coping strategies that make it possible for them to achieve good outcomes despite misfortune as well as steering clear of avoidable dangerous situations (Stevens, 2002). Lest we overlook the abundant evidence, poor African American inner-city families do develop particular strategies to nurture resilient capacities in their children. Jarrett (1995) has defined such families as “defended families.” Accordingly, defended families make available role models in or outside the familial network, restrict peer relationships even within the kin group, and participate in social ecologies outside neighborhood or community boundaries. Furthermore, families protect their offspring from risk environments by enculturating principled values and a future orientation. Such is the case that protected families who exhibit psychosocial strengths, have a strong work ethic, are achievement oriented, have a sense of autonomy and responsibility, and are likely to postpone birthing and marriage until vocations are established and...
jobs secured. Interestingly, protected families go so far as to even restrict relationships with extended family members who share similar values and behaviors. Thus, protected families are ideally situated to support their offspring in meeting developmental challenges through the use of strategies that have proved successful in supporting adolescents in at-risk environments (Hill, 1997; McAdoo, 1997).

African American adolescent girls display various discernible strengths in meeting challenges of maturation that are context dependent. These include a range of core psychological strengths, behaviors, and actions that black, poor, inner-city girls show when dealing with perceived and actual threats to safety and well-being in varied social ecologies. Specifically, resilient adolescent females are likely to do the following:

- Have strong attachments to social and religious institutions that provide communal self-relatedness—insti tutions that serve as havens for identity exploration and the development of leadership skills
- Select appropriate role models as a way to formulate principles and standards that will guide present and future behavior
- Demonstrate efforts in making changes in environmental situations to accommodate more positive and favorable peer affiliations
- Seek self-experiences for the development of cultural flexibility or bicultural competency when moving beyond neighborhood or community boundaries
- Confront racially devalued situations without feeling self-blame
- Assume responsibility for their behavior
- Resist collusion in racial denigration
- Discriminately appraise their social context for experiences of self-efficacy
- Exhibit a stance and attitude of candi dness, courage, and assertiveness in response to racial/ethnic devaluation and life’s daily hassles in general.
- Manifest a discriminating capacity in evaluating the behavior of others
- Demonstrate a capacity for care, loyalty, and nurturance in relation to others
- Have self-expectancies for social mobility to “improve one’s lot in life”

The resilient attributes identified here were drawn from girls’ actual experiences in living out their lives. Such traits can be strengthened and sustained when girls are served by social workers. Even though the girls who displayed the above strengths were dealing with their lives ably, they were on a journey of maturation and could benefit from services that aid in their development. To best serve girls with backgrounds similar to those in my research will require rethinking the ways in which we practice helping. Once again, bearing in mind the person-process-social context paradigm, renewed services demand working with clinical participants contextually and intersubjectively. I conclude with a brief discussion of practice implications based on the argument set forth in this chapter.

**PRACTICE IMPLICATIONS**

**Working Contextually and Intersubjectively**

Working contextually and intersubjectively, the therapist is not limited by the physical characteristics of traditional therapy (i.e., professional office space) or by the therapeutic material being subject to analytical scrutiny. Rather, development is seen in a state of fluctuation that orders complexity and informs how structure and pattern arises from many different aspects of young people’s lives. Plainly, what happens inside the boundaries of the therapeutic relationship as well as what takes place peripherally becomes the playing field for therapeutic work. In the therapeutic field, both conscious and unconscious elements bear on the adolescent’s past, present, organized, and organizing experiences (rigid and flexible). All such elements in this gestalt make it possible to explore unhealthy and healthy aspects of self-relatedness (Orange, Atwood, & Stolorow, 1997).

In working intersubjectively and contextually, the core strengths of African American inner-city girls delineated here can be put to effective use in the clinical relationship. For example, when doing clinical work, empirically demonstrated strength-based characteristics could be used as assessment guidelines or therapeutic goals with girls who require the building
up of their capacities to meet maturational challenges more effectively. In other words, when therapeutic work is completed, a client will have developed a set of psychosocial skills to live life more fully. In particular, based on the discussion earlier, it is hoped that an adolescent girl at the end of therapy will have a more developed capacity to exercise self-efficacy appropriately in different contexts. Working intersubjectively and contextually, successful and effective clinical work strengthens the adolescent girl in a number of ways. She has a more developed capacity for self-reflection; makes pragmatic and judicious use of coping abilities; has an awareness of her gifts, talents, and strengths; and demonstrates a strengthened capacity for assessment of self and others within varied social contexts.

Social work clinical interventions take place in a relational matrix of self-relatedness, a mutually relational, culturally nuanced space where the clinician joins with the adolescent as an empathic insider. In so doing, the clinical relationship grows to be one of collaboration, and a significant piece of the clinical work becomes contexting. Recall that contexting is defined as the enhancement of the adolescent’s capacity to develop meaning and complexity in thinking and behavior. Thus, the adolescent girl’s self-journey within the therapeutic relationship becomes one of identity exploration and self-discovery as the clinical work addresses mutually agreed-on issues, problems, and concerns. In undertaking this learning journey collaboratively with the client, the clinician communicates to the adolescent girl quite simply the nature of the work that they will accomplish together. For instance, she or he might say,

We can work together as we both learn who you believe yourself to be here and now—how you want to grow to be what you want to be and learning what you want for the future and how you hope to accomplish what you want. In our work together, you may experience many different kinds of feelings—anger, pain, joy—as we try to figure out answers to these questions.

Such is the case that the therapeutic journey is one where the adolescent has the opportunity to create meaning construction and meaning synthesis. The clinician and adolescent girl are engaged in a therapeutic relational matrix consisting of person-process-context.

Cultural Implications

Commonly, social workers understand the need for cultural awareness when working with different ethnicities and/or racial groups. Our contextual worlds are systemically influenced by culture. Recall my second assumption that the clinical work takes place in a relational matrix of intersubjectivity or self-relatedness, a mutually relational shared space, within a contextual field influenced by culture. This second assumption, I believe, speaks directly to issues of culture, ethnicity, and racial or cross-cultural differences. The clinician tries to understand the adolescent, emphasizing who she is and the social context that surrounds her.

Nonetheless, I wonder if social work efforts to help poor adolescents in inner-city communities are as successful as they might be. Many of the students I teach do not seek clinical jobs in inner cities. I am led to believe that many clinical social workers feel that inner-city adolescents are not necessarily good candidates for clinical work. Students complain that the many social problems in inner-city communities compromise effective clinical work. Also, most novices feel that they do not have the training and cultural competency required to work with adolescents of color. When working intersubjectively and contextually, however, such cultural competency can be achieved without extensive training. Certainly, when the clinician assumes the role of empathic insider, he or she has a cultural standpoint or some fundamental level of cultural awareness. However, even when the therapist is different from the client, creating a space for intersubjectivity through recognition that the client and clinician are contextually embedded in similar surroundings may help create a sense that they both belong to one larger community and hold much in common.

Still, when working intersubjectively and contextually, clinician biases, misperceptions (i.e., cultural, theoretical, professional, or personal) do transpire. Both anecdotal and empirical evidence suggests that in cross-race clinical dyads, practitioners with immature racial/ethnic identities themselves are not as likely to help
clients achieve positive therapeutic outcomes (Carter, 1997; Helms, 1990). Obviously, when racial/ethnic biases exist, empathic failures happen. The clinician is obligated to examine why failures in empathy have occurred. Misapplication of clinical principles and human behavior theory may also result when racial/ethnic biases occur in the therapeutic relationship.

Effective clinical work demands that clinicians learn to manage tensions inherent in the nature of sameness and differences in the human condition (Dean, 2001). To be truthfully empathic, the clinician must be able to recognize difference in sameness. We like to think that empathic individuals are uniquely attuned to the mental and emotional state of another. Certainly, empathy is an imaginative process that involves mutual recognition of the other (i.e., I can perceive that the other is like myself), characterized by an attitude of care and understanding. Empathy involves both imagination and perspective taking and, thus, allows an individual to imagine himself or herself living in the context of the other.

Dean (2001) has argued, however, that cross-cultural competence, social work’s standard for cultural practices, is a concept deeply flawed. She challenges social workers to adopt a postmodern view of “not knowing” and embrace a model of cultural noncompetence. Such a model, Dean asserts, enables the clinician to accept his or her lack of competence rather than striving to achieve a false sense of cultural competence. I agree with Dean in that the notion of cultural competence suggests a goal that is unrealizable. In my own clinical work, not knowing means I am poised, alert, and open to learning all that I can in the context of a subject-to-subject relationship. When I assume an attitude of not knowing, I am simultaneously engaged in “desiring to know.” Thus, I am open to learning from myriad perspectives, one of which is the adolescent girl herself, who is, in fact, the expert witness regarding her life experiences. For that reason, I am humbled to be accepted and invited to participate in her world (Stevens, 1998). It is a world with which I want to become acquainted.

Practically speaking, absolutism, certainty, or expertness embodied in concepts of either “knowing” or “competence” applied to cultural practices infer power, dominance, and superiority, all elements of the therapeutic relationship that distance us from our subjectivity. I recognize that the objectification of clinical work belies working intersubjectively. I suggest that clinicians must have sufficient humility to enter the client’s world. Understanding, acceptance, and a non-judgmental attitude—elementary components of sound clinical practice—underscore this humility (Stevens, 1998). Moreover, in desiring to know, there is a certain willingness on my part to “be known.” Consequently, I can be open and (cautiously) transparent with a client.

Self-Disclosure and Engagement When Working Intersubjectively and Contextually

The clinician, when working intersubjectively and contextually, commits to the likelihood of therapist self-disclosure. Unquestionably, clinician self-disclosure has limitations, and the appropriateness of sharing personal information must be determined in advance. Clearly, the purpose of any shared material always serves the interest of the client and the therapeutic process; it stands to reason that any personal information shared should be sufficiently innocuous as to do no harm but still be of help to the client. The clinician’s therapeutic position of openness, transparency, and humility reduces instances of cultural or personal bias and hence empathic failures. Not surprisingly, when empathic inquiry is sustained through clarification, interpretation, or any such therapeutic intervention, self-disclosure can advance the therapeutic work. The point to make here is that uninterrupted empathic inquiry is the crucible of working intersubjectively and contextually. Moreover, the use of nontraditional practices strengthens the clinician’s role of empathic insider and offers opportunities for augmenting knowledge of the adolescent’s social contexts.

REFERENCES


THEORETICAL PERSPECTIVES


