

MOVING TO A PSYCHOLOGY FOR COMMUNITY SERVICE¹

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One of the most exciting effects of the community mental health movement in the United States has been the stimulus for psychologists to develop *new* therapeutic activities and to work on *new* social problems. During the past dozen years, there has been a steady evolution in the criteria for what is acceptable professional practice and what the curriculum in graduate training should sound like. There is also increasing discussion about the qualities the psychologist should possess as a community psychologist. It has taken at least a dozen years for the signs of change to be observed, and the real work has just begun.

I would like to offer some personal observations on seven topics that I think are important for defining the elements of community service. For each one of these topics there is a vast number of questions to be researched. Even more importantly, there are consequences for how we carry out community service and how we teach others to do it.

Before presenting these topics, I would like to comment on sources of strain when we move our professional identities from clinical service to community service. I have observed that persons who adopt a career in the clinical professions have real and definite expectations; they wish to help people; they wish to earn the respect of their peers and teachers; and they desire to be rational in what they do. This is a self concept that I think has been congruent in the past with the dominant values of most of the United States culture. As I think about the requirements for community service, however, it occurs to me that there are some different expectations required of us when we shift our focus from the individual client to the community. If we are to help in a community, it is not enough to treat; we should be able to collaborate, to work with members of other professions and citizens. To be respected by our colleagues in the community, it is not sufficient to be a good therapeutic agent; we must take risks and support persons whose values, credentials or culture are divergent from ours. Paradoxically, being a professional in community service does not only mean being rational; it means being clearly aroused when we do our work.

If I cartoon these differences, I think that the good professional shifts from being good, loved and known, to being friendly, tough

and caring. As I sort out the semantic meanings in these shifts in values from clinical to community service, community service calls forth expanded participation, and focused observation of social settings and a community worker's interpersonal style represents shared doing rather than interpreting what is confused or troubled for an individual client. The community psychologist's affect is channeled and expressed *with* his work; his feelings are integrated but his concepts and his soul, if you will, are seldom dormant. I mention these perceptions because if they are plausible, training for community service can contrast with learning formats which have been familiar to most of us in our professional training.

If we are going to shift our professional styles of work from clinical activities to community activities, then there are some styles of living we will be giving up and some new manners we will be adopting. It is likely we will diminish our need to tightly control our own spheres of influence. We may give up our values for seniority and instead align ourselves more emphatically with issues of social justice. We may have to give up some of our views of what life should be, and why the good life isn't so, and express care and devote energies to work for the development of a community.

These changes in life style are critical not only for our behavior but for the field of community service. We have indeed an opportunity to form a new definition of what it means to be professional! What many citizens fear, and what many professionals as well are fitful and disturbed about, is that community psychology is a new label for a type of professionalism that has been very much a part of the symptoms of social problems without advocating and working for real solutions.

Those of us who want to maintain a position of strict professional neutrality may prefer not to adopt a career in community service. If we prefer a role of research without service, or service without community participation, we should not call ourselves "community psychologists." Many segments of the community will expect, quite naturally, that the new word does mean that new and different deeds will be performed.

Here then are seven topics that I believe can help us reflect on what we are doing, where we are going, and what we mean by community service. These seven topics are suggestions for designing and evaluating community services. At the same time, they represent new research topics but, most importantly, I hope can offer criteria for training for a psychology of community service.

A PSYCHOLOGY OF SOCIAL CONCEPTS

To me, one of the critical points in thinking about the differ-

ences between clinical services and community services is that we not think of the content of our services—be they for children or adults, or for clients or consultees—or not think about the ways we behave to achieve a goal. We must also think about the site, and the social settings where we do our work. The social context defines the limits for what we do and cannot do. One of the consequences of knowing the culture of the setting is that we learn to improvise what problems we work on, what groups of persons we work with, and how much time and effort we must devote to learning about the context before the real work begins.

Understanding the context will make a difference in whether the community thinks of us as offering professional or community service. Since most communities can absorb an infinite amount of clinical services, public and private agencies can contract with us for our clinical competences—our skills to evaluate the intellectual range of children as clients for special education services, to lead a therapeutic group with married couples, or to help the police do a better job in their civil response to public demonstrations. If we are working as clinical psychologists, the provision of such services is a valid end. For the community psychologist, the work is just beginning. What we are aiming for in community service is to develop *salient and multiple programs* that, for example, help the school administration, not only to examine educational deficiencies in children, but more importantly to insure that a humanistic atmosphere is present to teach all children, to work to create promotion policies so that competent teachers are rewarded and remain in the school, and to work so that development of the curriculum does occur—in sum, to work for a responsive and involving school environment. As a community psychologist, it is not enough to test a child; one must spend time in the school actively participating to see how the total resources of that school and community can be directed to help children to learn.

To relate a clinical or social problem to a context is a difficult task because it means that we must spend time going beyond solving immediate tasks. In essence, we need to insure that our clinical services can be presented and related to a social context. The social system can then expand its resources and move to focus on the sticky issues of how the context has contributed and often maintained personal and social problems. The ethic of the community psychologist is: it's not enough to be paid for service, the service must change the system.

We know very little about how the social context affects persons, and we know less how to find out about it. To create knowledge of the social context is the most important single challenge for com-

munity psychology. Understanding how social settings function, how persons can grow in a context, and how the social process within a community can be mobilized hand-in-glove with a specific service are key challenges. The community psychologist knows that he can't do it alone. What he can do is figure out how the social context can insure social and community development.

THE PSYCHOLOGY OF DEVELOPING PERSONS

In addition to knowledge about the context, the provision of a community service must also include knowledge of the potential for persons to change. It has been impressive for me to see the relationship between the rate at which community programs develop and the presence of leaders who can mold the program and relate to varied communities. If there is a good community service program, there are a number of adaptive persons influential in that program. What we should look for are those persons who are capable of growth and who can and will create new resources in a community. Part of the assessment of the social context is to identify those persons who have learned to make their environment work for them.

The community psychologist is faced with a set of complementary assignments. On the one hand he is figuring out how the environment has impact upon a variety of persons, how a culture socializes its members, and how social settings inhibit the performance of individuals. At the same time the community psychologist tries to locate persons who have been able to grow, to change, to be effective in spite of environmental constraints. The premise that directs this search is: a community develops if there are social supports and events that promote growth and if it includes a density of persons who can survive, if need be, without such emotional supports.

Although this axiom is supported by observations of evolutionary changes in lower forms of life, we in psychology have few systematic concepts or methods to devise such a theoretical system. I believe, however, that even though we don't have such a framework at this time, the creation of community services *can* be developed.

When we begin to extend our treatment services into a locale, we should locate persons who can take on new roles, who can work with diverse groups of persons, who are not intimidated by professionals, and who can tolerate ambiguities of all sorts. I have found that when I step out of the university setting, there are many persons who possess these qualities! Our task in designing a community program is to make it possible for such persons to actively participate in planning our work and making community policies. If we can include such persons within our locale, we can demonstrate that *we* as well as others can develop and grow. Another important feature

of our commitment to the development of persons is that we create social settings that offer emotional support for those citizens who wish to learn new roles. We must give as much time and energy to helping those who engage in community work as we give time to the techniques of community work. Providing a community service does mean, then, developing persons as community resources.

THE PSYCHOLOGY OF VARIED INSTITUTIONAL FORMS

For too long we have restricted our definition of the work environment to the environments we are most familiar with, the university department, the mental health clinic or portions of the state or federal government. Each is usually a large and formal organization with long standing and seemingly immutable traditions. These types of organizations often do not help personal development nor can they serve as a resource for the larger community. To carry out community service, we can go beyond the settings of our past and develop a variety of new organizations. If we follow our first criteria of building a psychology of the social context, we will find that as the context varies so does the style of the organization's work. The community psychologist's potential and equity for participating in a community service I think is directly related to his or her ability to work in an unusual setting. There are many available settings, like a community welfare council or a low cost housing unit, and there are many new organizational arrangements that can be created to meet specific services. A typical organization, however, also implies that we learn new definitions and meanings for authority, trust and power.

One of the important considerations in developing a conception of an adaptive institution is the premise that each of a variety of institutions has a unique and special contribution. I start from the premise that there is no universal or "utopian" organization, but instead there are only a variety of settings capable and designed for different work. A rule of thumb that I have used is that the structured organization is apt for efficient and well-defined tasks while a loose organization is useful when starting an innovative program. The question is: Can structured and tightly controlled settings develop new services, and can a loosely run organization value accountability? If we begin community services with the premise that organizations have different and valid organizational styles, we are in a position to alter the organization when the mission changes. Such a framework can also stimulate us to go even one step further and create new organizations. If we are up to this task, we can actively affirm that large organizations do not, by misdesign or fate, become bureaucratic and limit services for community needs.

THE PSYCHOLOGY OF COMPETENCE

The first three criteria represent concepts for viewing the community service network. I have suggested that there is pragmatic validity in designing a service that is part of the locale and that arranges its work to insure that persons of that locale can develop their talents. There is also validity in building an organization to meet specific criteria. These points get us started on a bill of rights for community service. The next four criteria deal specifically with the methods for community service. The criterion for a psychology of competence for community service is as follows: services should be offered by persons who can deliver. The person who participates in community service also should have more than one basic competence. They should include such competences as: (1) a competence of service delivery; (2) a competence of social system knowledge; (3) a competence of political appraisal; (4) a competence of planning for future service needs. Not all of these competences can be learned in the university; many will have to be learned in collaboration with service units. The community service system, the university and citizens of the local area will need to collaborate in order to jointly plan unknown competences that will be needed.

The competence of a service delivery system represents the baseline from which the others build. Here is where the training can relate to the specific content, e.g., consulting, direct services, or program evaluation for various problems such as mental retardation, alcoholism, or aging, etc. The competence to treat and work on a specific problem enables the service worker to become an integral part of the learning context, e.g., to understand what it is like for a citizen to seek help. Such familiarity makes it possible to learn first-hand the many contexts under which the client lives and which the worker may not share. With this baseline it is possible to learn still more about the dynamics of the service system, the various formal and informal organizations which are helping, and even to learn how some organizations work to actively limit service to individuals.

As this level of competence is learned, the next level is to identify the various political forces that hinder a specific service network and to make it possible for these political forces to be neutralized or work to communicate with those political forces who are opposed to our work. After moving from the competence of service delivery, or organizational knowledge, to political assessment, the community service worker is ready to move to the toughest area of all—that of planning for future service delivery systems. This competence is learned indirectly from the other competences and is strengthened by the worker's ability to see services in multiple contexts, including those of his own agency. As mentioned before, the community ser-

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vice worker does not just give a service; he works to add new skills as the situation demands rather than as tradition has sanctioned.

THE PSYCHOLOGY OF MULTIPLE TREATMENTS

The competences that are learned and mentioned above have a very specific function: they enable the psychologist to perform at many levels in the community. The most unique feature of community service, I think, is that services are designed to serve at all levels of the locale. The issue that separates most clearly the clinician from the community worker is the amount of energy the person devotes to working at many levels of the system. It's not enough to consult with the classroom teacher in an elementary school; resources are also needed to work and interpret the program with the central administration, with the principals, the teacher's union, and parents. Services that contribute to the improvement of the social system must focus on the entire system. If this mandate is realized, another important feature of the competence of the community service worker is expressed: namely, the worker is able to understand the total system and can design services that do work at various levels of the system. For example, a design for changing the morale in central administration of a school system may include arranging for informal and didactic occasions for the staff to develop improved communication skills. A design for elementary school principals may focus upon helping them with improving their evaluations of the competence of classroom teachers. Services for classroom teachers, on the other hand, may focus upon helping to improve their management of classroom behavior. In contrast, services to parents focus upon helping them to tutor children and provide them with points about child development. The aim of a community service *is* to improve the social environment of the school. It will take such inter-related programs, in sequence, to change a social system. While the individual community psychologist may not have the skills to work at all these levels, he has the will and the way to locate and create resources with which he can work so that the treatment program is working at all levels. Learning how to identify and enlist the cooperation of professionals who round out his own skills is the antidote for whatever arrogance still remains.

For the community psychologist to be effective, he must work to create knowledge on precisely how services at different levels *do* affect the values and directions of social systems. In fact, what success we have in arranging the services at multiple levels will not determine whether community psychology does emerge as an intact and viable field. If not, we will remain valued clinicians, yet frustrated over why our services are not adopted, and why we don't make a difference.

THE PSYCHOLOGY OF CONTRASTING PUBLICS

As soon as we move from our familiar terrain of the clinic or the university, and step out into the locale, we try to find out what people believe and why. We are then faced with contradictory positions and reports and, more often than we would like to admit, we meet persons who don't know what our aim or worry is or who don't care to know. The community psychologist needs the methods and the interpersonal skills to understand these differences. There is often an illusion that lingers with us that there is one *real* community. What I have observed instead is a shifting set of overlapping groups who unite or are at odds, depending on the issue. The community psychologist cannot afford to work only with those citizens who are most like himself. He needs to find those persons who have access to still others who may not share his objectives. He definitely does need to know why they think as they do, even though he personally may not embrace their beliefs. It is folly to disregard political beliefs that are foreign to personal values and it is shortsighted to be completely identified with citizens from one political party. The issue facing the community psychologist is to have access to and be up-to-date with the range of public sentiment about controversial issues. If the range of publics is grasped, services can be planned so that things are in touch with and relate directly to the needs of at least some publics without being antagonistic to other publics.

The need for a psychology of contrasting publics is a value for the continuing education of the community service worker. His basic requirement is to move about the locale and listen to the range of concerns and sources of joy and anger. A view of the diversity of beliefs also contributes to an ability to assess what different peoples have in common and what it will take for these different persons to identify with the locale. Making sense of contrasts reveals whether differences are the result of long-standing conflict from a cultural heritage, or more simply the result of few opportunities for social interaction. To know what has prevented groups from working together helps to appreciate the hassles of undertaking a joint effort with them. Appreciating how the publics are in contrast suggests whether our work will separate or unite different community groups. The community worker cannot escape the intrusion of contrasting publics; the issue is whether he can formulate a realistic response. The gullible premise is to believe that all people can be helped or brought together by the work of the community psychologist.

THE PSYCHOLOGY OF BUILDING A COMMUNITY

Of all the hallmarks, this one defines the goal of our efforts: the evolution of a community. This hope is the driving force for

much of what we do; it keeps us focused and helps keep us humble. One of the finest lessons I've learned in working in different communities is that while we may do some good work, the most important effects of our work may show up at a future time when we are gone from the locale. It is work that has been the grist for new occasions. The positive fallout from our deeds, in fact, may be more important than the deeds themselves. What we are banking on is that our services and work build a general readiness for the community to cope with and respond flexibly to future issues. We are in the business of designing social occasions and social settings that add to the increased interaction and mutual help-giving of persons to an increased sense of community. As we create our services, we work to make it possible for citizens to share in the development. We work hard to communicate that the citizen should not feel grateful, but that he is understood; that we are not just tolerant, but that they are influential; and that the citizen is not a token of our service system but a genuine force in our work.

What is important after all are the social settings we create, not the services we deliver. If we can create a community setting while we design services, we are not professionals giving help; we are working to build, in collaboration with citizens, a locale with a capacity to cope.

The time is right for community psychology. None of the other professions of community psychiatry, social work, or urban planning seem to value as much, the person in context. This focus on person in context is perhaps our unique contribution. As our substantive knowledge grows, we can see that our knowledge not only leads to service, but we can relate our knowledge to the development of both person and contexts. There is, then, a promising future for such a psychology. It is a psychology that can be relevant, a psychology that can be humanistic and a psychology that can be enjoyed.

To create such a psychology of community development, our style of work, as these seven topics have affirmed, shifts so that the goal is not simply achieving a service delivery system, but a service that perks up the context, that radiates change, and that activates the community. The reference point for the community psychologist is to develop personal and community resources so that he creates a context for himself and others and serves as an example of how a community changes and develops.

These seven topics are presented for at least three important reasons. They are offered as criteria for the behavior of the individual community psychology; they are suggested as guidelines for the evaluation of community services; and they represent examples of

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the knowledge that is needed for the future development of community psychology.

FOOTNOTES

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