

History of the Development of Community Psychology

Robert J. Gregory

School of Psychology, Massey University, Palmerston North, New Zealand

email: R.J.Gregory@massey.ac.nz

KEY WORDS Community; psychology; history; development; origins; social change.

ABSTRACT This article addresses the social forces and factors that encouraged the development of a new discipline, community psychology. Psychologists typically treat aberrant individuals, and in a society where the social system operates well for the majority, psychology plays an important role. When a society itself encounters problems, whether internally or externally induced, psychologists must turn their attention to larger social and contextual issues. Some prescient psychologists did exactly that, with a meeting held at Swampscott, Massachusetts in 1965 to initiate the discipline of community psychology. This new discipline offers conceptual and practical ways of dealing with severe social problems, including those likely to emerge in the near future.

EARLY HISTORY

Where and when did community psychology begin? What forces created this new discipline, and moulded early directions? This story has to go back to the origin of shamanism and the mists of times long past. Shamanism, the story of individuals who served as "healers" to individuals and to tribal groups, remains central to any deep interest in the origins of psychology and more recently of community psychology (Eliade, 1964; Eliade, 1987; Harner, 1980). However, this relationship of shamanism to psychology itself must be dealt with elsewhere. Some connections are too far distant to be easily traced.

Another less distant point of origin may have begun with the King George III, reigning in Great Britain at the time of the American Revolution. He unwittingly served as one of the starting points of and for both psychiatry and psychology. Physicians studied the bizarre and insane behavior of this King of Britain, thereby opening up the study of other strange behaviors by aberrant individuals. They also began offering treatment for those who exhibited strange

behaviour at clinics. As with the King the early efforts were oriented primarily to recommendations for a complete change of scene (Rappaport, 1977). Physicians and psychologists followed along at the time with further investigations and similar recommendations for other people. Later still, they continued to be entranced by the study of bizarre behavior in individuals. They further developed what became called, the "clinical" method, which was based on the treatments in vogue at the time of King George III. They also focused on treatment of individuals, seemingly without awareness of or interest in families, groups, communities, culture and society.

Another and even more recent aetiology for community psychology derives from the mental hygiene and later, the mental health movement. Mental health ideas derived from similar impulses as efforts to induce religious conversions - trying to make others similar, whether in beliefs or lifestyles, as oneself or one's culture. Rappaport (1977: 47) commented on how Thomas Szasz "traces the history of the inquisition and the mental health movement as one unbroken line of events, each movement serving the same function at different times in history." The concept of mental illness was used by physicians as one means to control deviants and deviant behaviour. They stigmatized those patients who they labelled as mentally ill. The physicians served the state by finding ways to control individuals, just as religious institutions controlled beliefs held by individuals. The psychiatrists and the psychologists again followed along, ensuring that every individual conformed to the same cultural beliefs and lifestyles. These so-called helpers had a common membership in what became a mono-cultural trance. Those who differed were frequently labeled as sick, deviant, or abnormal, and then treated accordingly, as outcasts.

MORE RECENT ORIGINS OF COMMUNITY PSYCHOLOGY

The yin and yang of political and social life is exemplified no better than in that curious time period between World War II and the 1990's. Schizophrenic in behavioral terms, the people of Western Civilization and especially the United States, emerged from World War II, loudly proclaiming individualism and freedom, with experiences of and appreciation for the advantages of working together, uniting together, to accomplish a common purpose. Most individuals were unaware of these contradictions. Large corporations spawned by the military endeavours of the war effort emerged triumphant, powerful, and ready to roll further. In the 1950's they expanded rapidly, with progress as their most important product. Political leaders such as McCarthy and Nixon sought to quell any divisiveness or deviancy, and financial profit became the standard or bottom line to measure success.

Psychology as a discipline and psychologists as practitioners traditionally focused on individuals who, in comparison with the majority of people in society, were deviant, who differed, who were paranoid or depressed or anxious or who had character disorders. Malingerers were those who could not get along with the progress and programs, and so psychologists, along with medical teams, evaluated them, to determine why these individuals were not motivated, why they could not get along with others, and if and why their intelligence was somehow limited. They also made decisions about what to do with these people. Their choices were limited, but the major resource became removal from society and placement in institutions. They sought to put these people in warehouses where they could not do harm to others, nor to themselves. This freed up the rest of the community to carry on without the problems presented by those who acted, or behaved or thought differently. Soon, special schools mimicked state run institutions, to rid so-called normal society of these deviants, and place them where they could be controlled. No one questioned the larger society, nor its institutions, nor the social structures that provided the umbrella in and under which individual people lived.

Psychology as a discipline, and psychologists as practitioners, had very little awareness of or interest in social and community issues, for the cultural trance that held the people together, kept academics, scholars, scientists, artists, humanitarians and all others from examining and doing something about these larger scenes. The powers that be were even able to label social or economic or political interventionists as "social engineers," or "stirrers," or "trouble-makers," or even in capitalist countries, communists.

Psychology focused within these set limits quite successfully on the behavior of aberrant individuals: testing, adjusting, and treating individuals to fit more precisely into acceptable groups and corporations, and figuring out how and why some individuals were more successful than others. For those who were unsuccessful or for those who showed up somehow different in intelligence, personality, or aptitude tests, assessment and then therapy could help. Therapy, *a la* Freud (1904, 1963), could enable these people to become more capable, with self insight available from not only Freud but also a plethora of psychological theorists engaged in studying human behavior (Rogers, 1942, 1951). This era of conformity put thousands of people into mental hospitals and institutions, but released them with the advent of new powerful drug therapies. Many people ended up maintained in communities with an appropriate fee for service - monitoring their drug intake as pharmaceutical companies expanded their scope with new and powerful chemicals.

Social systems for the most part worked well for the majority of people, and psychology as well as other disciplines, ignored or were simply unaware of the structures and dynamics of ordinary society. The relatively few individuals who could not adapt were the exceptions. The conceptual maps of the time were able to deny that societies themselves could be problematic. World War II ended that innocence, and increasingly, people have been aware that societies and social systems themselves are sometimes "sick." The idea that there was a relationship between a sick social system and individuals came of age.

President Dwight Eisenhower's warning of the business-industrial-military complex was too

little, too late . . . or was it? The 1960's brought an era of diversity, growth, and excitement. A strong reaction against conformity and big business came about, partly due to resistance to the Vietnam War, and perhaps also the advent of LSD and other drugs. A breakdown in rewards from the prevailing political, financial and social system occurred, affecting especially the newcomers. The already vested, or the powers that be, had gained plenty of rewards and controlling positions in society but they were unwilling to expand those rewards to include Blacks, women, young people, the elderly or other minorities.

Kennedy, an activist president, asked people to do things for their country, rather than wait for their country (read corporations) to do things for them. And the people did do things, with the Civil Rights movement initiating direct action against injustices. At least the people did try to change their social and political systems. The Mental Health Center Act in 1963 gave promise to those who were labelled different. Rather than be relegated to the state institutions, or to use of chemical controls, the theory was that people would be treated and helped and supported in their own local communities. After all, psychotherapy did little good for the long institutionalized schizophrenics being released from mental hospitals. Too, psychotherapy did little good for the social problems emerging at the time - no longer could treatment of a few individuals maintain the small, homey, happy, healthy communities idolized as part of the American tradition and past, if indeed, they ever existed. On an international scene as well, the Peace Corp gave opportunity for young people to go forth in the world and carry the American message, and in that process, attempt to do good things for people. The Peace Corp, the mental health centers, and the prevailing mood of social activism gave hope to young people previously captured by corporate powers. They went forth, challenging the world and themselves. When Kennedy was shot, Lyndon Baines Johnson not only expanded Vietnam, but also switched some of the focus to poverty and encouraged activism to combat the individual reasons for poverty. This led to a curious recognition that the individual reasons were insufficient,

for the social and financial and even the political structures of society were in the way. Indeed, these social structures were in the way of much more - and a crunch began taking place. The young activists - hippies and dreamers and activists - ran straight into the arms of the police, acting on behalf of the powers that be - the by now corporate giants.

THE IMMEDIATE CAUSES OF COMMUNITY PSYCHOLOGY

Psychology as a discipline suddenly ran into a paradox. Psychology could continue targeting, testing, labeling, treating, and encouraging individuals to return to the fold, or as an alternative, join the emerging social revolution. Psychology could act to confront and challenge the rather unjust social institutions and the so-called leaders maintaining their vested interests, created by, for and among the corporate giants.

Notably, most psychologists continued with their work to support the vested interests, largely by focusing on individuals and disease episodes and assessment and therapy. They continued with activities such as psychological testing and virtually ignored the by now quite virulent social situation created by Vietnam, Civil Rights, and the gathering feminist movement. In 1965 however, a small group of concerned psychologists called a meeting at Swampscott, Massachusetts. This meeting served as the scene for an intellectually stimulating gathering of clinical psychologists no less, who argued the merits of their personal experiences and the epidemic range of problems faced in larger social situations. They discussed the problems of and prospects for psychology and mental health, particularly focusing on the training of yet more psychologists. The conference, "to delineate the education of psychologists for a role in community mental health" quickly formed the base of the community psychology movement (Rickel, 1987: 511).

At Swampscott, the role of the psychologist, or at least some psychologists, was freshly reconceptualized (Rickel, 1987; Heller, Price, Reinharz, Riger, and Wandersman, 1977). No longer would the treatment and clinic approach, traceable back to King George III and his bizarre

behaviour, be the rule. "Forrest Tyler created the phrase "participant conceptualizer," . . . the psychologist as a problem solver," and in so doing, created "an identity of the psychologist as one engaged and active in creating working relationships with citizens and other colleagues for carrying out research and practice" (Kelly, 1987: 515).

Prior to Swampscott, disease was an individual matter caused by pathogens of a physical nature, not something derived from environmental, cultural, social or even psychological factors (Strother, 1987: 521). Physicians used their clinical training to provide services for fees paid by individuals and the role and practice of public health was severely restricted. At this conference, however, it became clear that "it was indeed valid to inquire into the impact of social innovation, community development, and other social factors on mental health as well as mental illness. A broader research agenda for psychology was clearly articulated" (Kelly, 1987: 517). As a result, "it is now generally accepted that illness may involve a multiplicity of factors - genetic, environmental, biological, cultural, social, and psychological - with complex interactions" (Strother, 1987: 522). Rather than treat specific disease episodes, far greater interest in maintaining health quickly emerged (Strother, 1987).

Many middle class psychologists, highly trained in clinical methods, were ill prepared to deal with minorities and lower class people. They were similarly ill equipped to understand or intervene in community based social structures. Most could not go beyond their limited single discipline training and skills to engage in complex political and social tasks and work with multidisciplinary teams. They could not engage with those political and economic and environmental issues that threatened large groups of people. At Swampscott however, the participants were "not limited to community mental health but encompassed a broader conception of social interventions" (Walsh, 1987: 528). Walsh (1987: 428) further stated that "the founders agreed that community psychologists would serve as proponents of the concept of community in community mental health work, advocates for the poor and minorities, and active participants

in and contributors to social and political life."

In fact, a set of themes has emerged over the years since in the journal literature and other writings of community psychologists. The key ideas, with representative references attached, that now appear to characterize the discipline of community psychology include at least the following notions: prevention rather than treatment (Heller, 1984), appreciation of context and environment (Barker, 1968), knowledge of and use of relationships, general systems theory, or ecological perspectives (Barker, 1968; Kelly, 1990), participation with the people (Jason, 1991), active intervention into social problems (Murrell, 1973), social structural change in addition to changes in individual's life situations, empowerment of people to take charge of their own lives and communities (Rappaport, 1987; Riger, 1993; Fairweather and Fergus, 1993), awareness of and use of multiple levels of assessment and intervention (Bronfenbrenner, 1979), multi-disciplinary approaches with appreciation of the knowledge base of many other professions, competency and use of positive strengths (Albee, 1980), reflection or self-awareness of the role of the psychologist in society, and at least some awareness of the strategic advantages of diversity and complexity (Trickett, Watts, and Birman, 1993). Ideas from psychology and traditional psychological approaches that community psychology managed to discard or downplay include: an artificial laboratory base, the clinical approach, the traditional experimental design that focused on interactions of discrete variables, the focus on individuals, and such archaic approaches as the passive waiting for individuals to apply for services and help so typical of psychological practice.

In addition to themes, associations of individual psychologists led to professional groups and bodies, specific teaching and training programmes at a variety of universities, and two journals (the *American Journal of Community Psychology* and the *Journal of Community Psychology*). A large number of books have appeared over recent years with the words, community psychology, in the titles. Truly, a new discipline emerged as a result of the Swampscott meeting.

In the United States, the individualism, activism, and the American tradition as outlined

in the Bill of Rights and the U.S. Constitution but not always followed in practice has led to a continuing social ferment since the 1960's. Around the rest of the world as well, the global changes taking place create other forms and styles of flux. These larger economic, social and political situations and their profound changes have many implications for the further development of community psychology, for this new discipline is intricately bound to context - the communities and societies and nation-states. Community psychology is also bound to the health and well-being of these communities and societies, and many of them are experiencing severe problems. Psychology itself, rooted to the scientific study of individuals and the behavior of individuals, is almost immune to these larger issues, but not so community psychology. And therefore, the opportunities for this new discipline are opening up rapidly.

FUTURE OPPORTUNITIES

Some of the issues that will present opportunities include the technologically based shuffles that will likely emerge from the Millennium Bug or year 2000 computer problems, for this will inevitably lead to severe social disruptions. Further, not long after 2000, the realization that supplies of oil and gas and therefore energy are limited will hit, causing further and severe social disruptions again. Finally, the future is highly likely to be disrupted with continuing problems of pollution, global warming, soil erosion, lack of clean water, and other issues related to the limits of growth as presented by over population in relation to resources. Societies and social systems will be deeply affected by these fundamental problems in the coming years, and as a result, major social changes will take place. Community psychologists may be able to help steer and manage or at least interpret during these social restructurings.

One of the most intriguing arenas of massive change will be the human response to global corporatization. The large businesses that grew from the military mobilization of the World War II era have become international corporate giants. Mander (1995) provides an account of the rules that appear to govern corporations.

These include: (1) the profit imperative, (2) the growth imperative, (3) competition and aggression, (4) amorality, (5) hierarchy, (6) quantification, linearity, segmentation, (7) dehumanization, (8) exploitation, (9) ephemerality, (10) opposition to nature, (11) homogenization. He believes that "we must abandon the idea that corporations can reform themselves. To ask corporate executives to behave in a morally defensible manner is absurd. Corporations, and the people within them, are following a system of logic that leads inexorably toward dominant behaviors. To ask corporations to behave otherwise is like asking an army to adopt pacifism."

And thus community psychologists can and must again face similar problems - the power elite and vested interests continue to represent blocks that prevent equitable distribution of the wealth and resources available in society. Exclusion versus inclusion, distribution of power, allocation of resources, divides between rich and poor, and advocacy for human rights are all aspects of the conceptual and practical work of a community psychologist. Individuals are all too frequently powerless in the face of the economic giants, and so, a fundamental challenge is present. Opportunities for community psychologists, with their understanding of individual and group behavior and their enthusiasm to take charge of social change processes, are many, and the time is now.

REFERENCES

- Albee, George W. 1980. "A Competency Model Must Replace the Defect Model," (Pp 75-104) in L. A. Bond and S. J. Rosen (eds.), *Competence and Coping during Adulthood*. Hanover, NH: University Press of New England.
- Barker, Roger G. 1968. *Ecological Psychology: Concepts and Methods for Studying the Environment of Human Behavior*. Stanford, CA: Stanford University Press.
- Bronfenbrenner, Urie. 1979. *The Ecology of Human Development*. Cambridge, MA: Harvard University Press.
- Eliade, Mircea. 1964. *Shamanism: Archaic Techniques of Ecstasy*. London: Routledge and Kegan Paul.
- _____. 1987. *The Encyclopedia of Religion*. New York: Macmillan.
- Fairweather, G. W. and E. O. Fergus. 1993. *Empowering the Mentally Ill*. Austin, TX: Fairweather Publishing.
- Freud, Sigmund. 1904 (1963). "On Psychotherapy," (Pp. 63-76) in S. Freud (ed.), *Therapy and Technique*. New York: Collier Books.
- Harner, Michael. 1980. *The Way of the Shaman*. San Francisco: Harper and Row.

- Heller, Kenneth. 1984. "Prevention and Health Promotion," (Pp. 172-210) in K. Heller, R.H. Price, S. Reinharz, S. Riger, and A. Wandersman (eds.), *Psychology and Community Change*. 2nd Edition. Homewood, IL: Dorsey.
- Heller, K., R.H. Price, S. Reinharz, S. Riger and A. Wandersman. 1984. *Psychology and Community Change*. 2nd Edition, Homewood, IL: Dorsey.
- Jason, Leonard A. 1991. "Participating in Social Change: A Fundamental Value for Our Discipline," *American Journal of Community Psychology*, 19 (1): 1-16.
- Kelly, James G. 1987. "Some Reflections on the Swampscott Conference," *American Journal of Community Psychology*, 15 (5): 515-517.
- . 1990. "Changing Contexts and the Field of Community Psychology," *American Journal of Community Psychology*, 18 (6): 769-792.
- Mander, Jerry. 1995. "Eleven Inherent Rules of Corporate Behavior," article appearing over "wholesys-l@netcom.com" on 2 May 1995, excerpted from: In the absence of the sacred: The failure of technology and the survival of the Indian nations, Sierra Club Books, 730 Polk St. San Francisco, CA, from Winter, 1995, Earth Island Journal, San Francisco, CA.
- Murrell, Stanley A. 1973. "Interventions," (Pp. 181-191) in *Community Psychology and Social Systems: A Conceptual Framework and Intervention Guide*. New York: Behavioral Publications.
- Rappaport, Julian. 1977. *Community Psychology: Values, Research, and Action*. New York: Holt, Rinehart and Winston.
- . 1987. "Terms of Empowerment/Exemplars of Prevention: Toward a Theory for Community Psychology," *American Journal of Community Psychology*, 15 (2): 121-144.
- Rickel, Annette U. 1987. "The 1965 Swampscott Conference and Future Topics for Community Psychology," *American Journal of Community Psychology*, 15 (5): 511-513.
- Riger, Stephanie. 1993. "What's Wrong with Empowerment," *American Journal of Community Psychology*, 21 (3): 279-292.
- Rogers, Carl R. 1942. *Counseling and Psychotherapy*. Boston: Houghton-Mifflin.
- Rogers, C. R. 1951. *Client-centered Therapy*. Boston: Houghton-Mifflin.
- Scheff, T. J. (ed.). 1975. *Labelling Madness*. Englewood Cliffs, NJ: Prentice-Hall.
- Strother, C. R. 1987. "Reflections on the Stanford Conference and Subsequent Events," *American Journal of Community Psychology*, 15 (5): 519-522.
- Trickett, Edison J. Roderick Watts and Dina Birman. 1993. "Human Diversity and Community Psychology: Still Hazy After All These Years," *Journal of Community Psychology*, 15 (2): 121-144.
- Walsh, Richard T. 1987. "A Social Historical Note on the Formal Emergence of Community Psychology," *American Journal of Community Psychology*, 15 (5): 523-529.