

THIRD EDITION

COMMUNITY PSYCHOLOGY

Linking Individuals and Communities



Kloos · Hill · Thomas · Wandersman · Elias · Dalton

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Community Psychology: Linking Individuals and Communities, Third Edition

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Library of Congress Control Number: 2011923313

ISBN-13: 978-1-111-35257-8

ISBN-10: 1-111-35257-7

Wadsworth

20 Davis Drive

Belmont, CA 94002-3098

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Printed in the United States of America

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Community Psychology

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WHAT IS COMMUNITY PSYCHOLOGY?

Welcome to community psychology!

Humans seek communities. Relationships with others are a central part of human existence. People cannot live in complete isolation from each other; individual lives and community life are intertwined. This book is about the many ways in which that intertwining occurs.

Community psychology is different from other fields of psychology in two ways. First, community psychology offers a different way of thinking about human behavior. We focus on the community contexts of behavior. That shift in perspective (which is the first thing we will discuss in this chapter) leads to the second difference: an expansion of the definition of what are appropriate topics for psychological study and intervention. Community psychologists are interested in effective ways to prevent problems rather than treat them after they arise. The field emphasizes promoting healthy functioning

for all members of a community rather than intervening when problems develop for a few of those members. And they focus their research on factors at the neighborhood, community, and societal level that support or impede healthy development rather than internal psychological processes or biological factors.

In this chapter, we will discuss the shift in perspective that is central to community psychology and the values of the field. In Chapter 2, we present the historical context that gave rise to the field. Chapters 3 and 4 deal with the research methods that underlie community research and how those methods derive from the basic values of the field. Chapters 5 through 8 present some underlying concepts of the field and the theories and research related to them. These chapters present the field's approach to understanding communities. Chapters 9 and 10 present a major focus of intervention in community psychology: the prevention of disorder and the promotion of wellness. Chapters 11 and 12 focus on intervention at the community and society levels, and Chapter 13 presents some theories, models, and skills used to develop, evaluate, and improve those interventions. In the final chapter, we talk about some challenges and opportunities facing the field.

At the beginning of each chapter in this book, we present an opening exercise that is designed to help you explore these two aspects of community psychology. The exercise might present an opportunity for a shift in perspective or an expansion of what it means to engage in psychology. In many of the chapters, we also present stories of "Community Psychology in Action," focusing on the personal stories of people doing community work.

While we hope that at the end of this book some of you will consider further education in community psychology, we realize that for many of you, this may be your only formal involvement with the field. However, it is our firm belief that all of you will—at various times in your life—be involved in initiatives that will benefit from the theories, research, and skills we present in this book. While the number of people who formally identify themselves as community psychologists may be relatively small, the influence of the field is much larger than those numbers would suggest. Community psychology theories and research are reflected or directly cited in the work of public health experts, social workers, sociologists, public officials, and other psychologists. Snowden (1987) wrote about the "peculiar success" of community psychology; its approaches are widely adopted, but as a field, it is not well known.

We hope that you finish this book with several accomplishments: a better understanding of community psychology; increased skills for working effectively in diverse contexts and communities; a greater appreciation of the intertwining of individual, community, and society; a greater awareness of your own values; a willingness to consider with respect the many sides of community and social issues; and a passionate engagement in changing your communities and society for the better. We came to community psychology because it engaged our minds, our values, and our lives. We hope this book does that for you.

OPENING EXERCISE: MUSICAL CHAIRS

She's 97 years old and homeless. Bessie Mae Berger has her two boys, and that's about all. She and sons Larry Wilkerson, 60, and Charlie Wilkerson, 62, live in a 1973 Chevrolet Suburban they park each night on a busy Venice street. Bessie spent her young adulthood in Northern California and worked as a packer for the National Biscuit Co. until she was in her 60s. Charlie worked in construction and as a painter before becoming disabled by degenerative arthritis. Larry was a cook before compressed discs in the back and a damaged neck nerve put an end to it. Twenty-six years ago, he began working as a full-time caregiver for his mother through the state's In-Home Supportive Services program. That ended about four years ago, when the owner of a Palm Springs home where they lived had to sell the place. At the same time, the state dropped Larry and his mother from the support program, he said. The three have tried at various times since to get government-subsidized housing. But they have failed, in part because they insist on living together. (Pool, 2009)

On one night in January 2009, an estimated 643,067 people were homeless in the United States (U.S. Department of Housing and Urban Development [HUD], 2010). Of those people, only 63% were in shelters or other types of transitional housing. The remaining 37% were living on the street, in their cars, or other places where people are not meant to live. Increasingly, homelessness in the United States is affecting families, including those with children. Consider the news stories you have heard about the problem of homelessness or perhaps the homeless people you have met yourself. Why do you think these people are homeless? Take a minute to list what you think are the top three contributing causes to homelessness.

If you are like many people, you listed such things as substance abuse, mental illness, and domestic violence—problems affecting the lives of the people who become homeless. These are indeed contributing factors. But they are not the primary factor. All these variables are more common among persons who do not become homeless than among those who do (Shinn, Baumohl, & Hopper, 2001; Shinn, 2009). The single most important factor contributing to the problem of homelessness in the United States has nothing to do with the character of the individuals who become homeless. It is a lack of affordable housing in our communities.

The best predictor of the extent of homelessness in a community is the ratio of available, affordable housing units to the number of persons and families seeking them (Shinn, Baumohl, & Hopper, 2001; Shinn, 2009). This finding has been repeatedly supported by the Hunger and Homelessness Survey conducted yearly by the U.S. Conference of Mayors. Lack of affordable housing is always the most frequently cited reason for family homelessness—even above poverty (U.S. Conference of Mayors, 2009).

Listing factors such as substance abuse, mental illness, and domestic violence as the main causes of homelessness represents an *individualistic* perspective, focused on how homeless persons and families are different from those with housing. While

this viewpoint is an important one, as individual factors do matter, we are going to ask you to consciously make a perceptual shift and to analyze problems in living through a *structural* perspective as well. Using this perspective requires you to think about how organizations, neighborhoods, communities, and societies are structured as systems and how those systems impact the lives of individuals and families. In community psychology, this is generally presented as taking an *ecological* perspective, and that is how it will be discussed in this book.

This shift in perspective can be made clear by viewing homelessness as a game of musical chairs (McChesney, 1990). In any community, there is a finite number of affordable housing units—just as there is a finite number of chairs in a game of musical chairs. And in both situations, there are more people than there are available chairs (or housing units). While individual variables do influence who becomes chairless (or homeless), these are not the defining factors in the game. These factors determine who gets the available seats and who is left standing *but not how many chairs are available*. The game is structured from the beginning to ensure that someone is left without a chair.

A study of solely individual-level variables in homelessness misses this larger reality. A social program for homelessness that focuses only on such factors as treating individual mental disorders or promoting job-interviewing skills may reshuffle which persons become homeless and which do not, but it does nothing about the availability of housing. This illustrates the difference between first-order and second-order change, which we will discuss later in this chapter. Addressing community or societal problems such as homelessness requires a shift in perspective—from an individualistic perspective to a structural/ecological one. Within this broader perspective, community psychologists have much to contribute (e.g., Shinn, 1992; Shin, 2009; Toro, 1999).

We will revisit the issue of homelessness and what we can do about it in Chapter 12. For now, we would like you to know that after the publication of Pool's article in the *Los Angeles Times*, Bessie Mae Berger and her sons obtained housing from a nonprofit organization: the Integrated Recovery Network.

“The formulation of a problem is far more often essential than its solution.”

ALBERT EINSTEIN

The shift from an individualistic to a structural/ecological perspective is related to another issue we would like you to consider in this class: **problem definition**. As we are sure you have learned in other psychology courses, human beings are rarely content to just observe something. We want to understand it, and we will, almost automatically, construct some sort of explanation. These personal explanations then become the basis for how we define social problems. If you view an issue through an individualistic perspective, your definition of the problem will center on individual-level variables.

As the quote from Einstein indicates, the issue of problem definition is not an incidental one. How we define a problem shapes the questions we ask, the methods we use to answer those questions, and the way we interpret those answers. And all those things affect the types of interventions we will consider.

How we define a problem has such far-reaching effects that social scientists have declared problem definition to be an ethical issue (O'Neill, 2005).

Assumptions we make about a problem determine how we define the problem, which in turn determines the ways we approach and try to solve it. This may be particularly true when we are not consciously aware of the assumptions we are making. Our cultural background, personal experiences, education, and biases (and sometimes the biases that came with our education) help shape those assumptions, which may actually prevent effective responses to the problem. Our assumptions can thus become the real problem. If we ignore how problems are framed, the viewpoint through which we derive our definitions, we will be imprisoned by those frames (Seidman & Rappaport, 1986). In this book, we hope to broaden your thinking about framing problems and the process of problem definition. Community psychologists think outside the traditional boxes of psychology to define problems and generate interventions at many levels.

Actually, there are no truly individual problems or interventions. Everything that humans do takes place in social contexts: in a culture, a locality, a setting (such as a workplace, school, playground, or home), and in a set of personal relationships. For example, a child matures within many social contexts. When a client arrives for a psychotherapy session, he or she brings a personal set of life experiences (in social contexts), as does the therapist. They form a relationship that is rooted not only in who they are as persons but also in cultural, gender, social, economic (e.g., who pays for treatment, and how does that affect it?), and other contexts. Even the atmosphere of the waiting room, interpreted in cultural terms, makes a difference.

In this chapter, we will first discuss how community psychology involves a shift of perspective from the viewpoint of most of psychology. We then elaborate on the community psychology perspective by describing some of its basic assumptions about persons, contexts, and two types of change. We offer a definition of community psychology and then discuss two conceptual frameworks central to the field: ecological levels of analysis (multiple layers of social contexts) and seven core values of the field. This chapter is the first of two that introduce and define community psychology in Part 1 of this book. In Chapter 2, we trace the historical development of and current practice in community psychology.

COMMUNITY PSYCHOLOGY: A SHIFT IN PERSPECTIVE

We hope that the problem of homelessness is a clear example of how a shift from an individual perspective to a structural/ecological perspective changes how we define a problem and what types of interventions we consider. Next, we will provide an example of how to apply this shift to a problem that we are sure you have been taught to understand at an individual or perhaps a family level: depression. In this example, we hope to provide a more detailed analysis of how individual and social problems are intertwined.

Elaine: Multiple Contexts of Clinical Depression

“Elaine” (a pseudonym) telephoned a counseling center to ask if they had anyone on staff like Dr. Kevorkian, the physician known for assisting suicide. Her husband was terminally ill, and Elaine wanted to end his life and then hers. Under the circumstances, she reasoned, everyone would be better off. When seen at the center, Elaine felt no pleasure in life, could not eat or sleep, and lacked energy to do even simple tasks. She met the diagnostic criteria for major depressive disorder in the *DSM-IV-TR* (American Psychiatric Association, 2000). Although Elaine’s problems seem like a simple case of depression, examining the contexts of her problems reveals important stressors, resources, and avenues for interventions (Wandersman, Coyne, Herndon, McKnight, & Morsbach, 2002).

Elaine’s family and community contexts seemed bleak. Her husband had responded to his illness by extensive alcohol abuse and impulsive spending. When a major flood damaged their home, he spent the government disaster grant instead of making repairs. The only family income was his disability payments, too little to pay the debts, and which would end with his death. Although the family was in danger of losing its home, her husband did not want Elaine to work, drive, or become involved in financial affairs. Elaine had no friends or support outside the family. She lived in a rural area with no neighbors within walking distance, and she could not drive. She had no history of employment, had left school at age 15, and had few marketable skills. Her rural Southern U.S. community was geographically dispersed and offered few community services.

Intervention: An Ecological Approach Staff at the counseling center took a contextual, ecological approach to shift their focus from clinical treatment alone. Staff developed a plan to address multiple stressors: medication and counseling for Elaine, family home visits, help identifying and using community resources for financial assistance, promoting better communication with the medical system treating her husband, and encouraging Elaine to seek wider sources of support. Elaine benefitted from this approach. Elaine and her husband began attending a nearby church and made supportive friends. With her son’s help, Elaine learned to drive, broadening her sources of support. The family’s money problems did not disappear, but together, they were managing them better. With family life improved, Elaine’s “sunny disposition” and coping skills returned, and medication was discontinued (Wandersman et al., 2002, p. 22). These approaches shifted perspective from focusing only on Elaine’s personal and family situation to promoting involvement with community resources.

Potential Community and Macrosystem Approaches While an ecological approach can change how professionals intervene, community psychology’s shift of perspective leads to further reaching questions: What can communities do to prevent or lessen the suffering of people like Elaine? How many cases like Elaine’s go unnoticed, and what is the cost to society? Can we afford to train and employ enough professionals to treat everyone with psychological problems? Is clinical treatment the only effective intervention? What other

interventions might be helpful? As a field, community psychology is dedicated to offering practical and conceptual approaches to intervention so citizens, psychologists, and decision-makers can address health needs and resources at community and societal levels, not just focus on individual cases.

Wider social forces cannot be ignored in cases like Elaine's. Economic decisions by powerful others have hit U.S. communities hard, as jobs have disappeared while executives and investors benefit. Global and local economic forces help create many personal and family difficulties as well as limit public and private funding for community services. Also, while Elaine's family members contributed to their personal and financial problems, wealthier people with similar failings have far more resources for dealing with such problems. Inequalities of wealth and opportunity are growing in many societies, including the United States. This inequality is associated with poorer health and other negative outcomes for everyone, not just those with low incomes (American Psychological Association, 2010; Kawachi & Kennedy, 2006; Lott & Bullock, 2001).

Gender beliefs and practices, from family to society, created a context in which Elaine became the overburdened caretaker in her family. She had no sources of outside support and little voice in family decisions, while the men did little work but exercised control. Like many women in her circumstances, Elaine had not been encouraged to pursue education, make connections outside the family, make financial decisions, or even drive.

How can psychologists address issues such as these? In this book, we will discuss a number of responses to this question. Here is an overview:

- *Prevention/promotion programs* reduce the future likelihood of problems—for example, by strengthening protective factors and reducing risk factors in individuals, families, schools, organizations, and communities.
- *Consultation* focuses on roles, decision making, communication, and conflict in organizations to promote employee job satisfaction or effectiveness of human services, social change organizations, or schools.
- *Alternative settings* arise when traditional services do not meet the needs of some populations (e.g., women's centers, rape crisis centers, and self-help organizations for persons with specific problems). In Elaine's situation, a women's center and self-help groups for persons in recovery from addictions or coping with disabilities would have been helpful. For instance, Liang, Glenn, and Goodman (2005) discussed Reaching Out About Depression, a community program for women based on a feminist model. It pairs women advocates with low-income women coping with depression, providing personal support and advocacy based on feminist concepts and sharing power in relationships.
- *Community organizing* at grassroots levels helps citizens organize to identify local issues and decide how to address them. *Community coalitions* bring together citizens and community institutions (e.g., religious congregations, schools, police, business, human services, government) to address a community problem together instead of with separate, uncoordinated efforts.

- *Participatory research*, in which community researchers and citizens collaborate, provides useful information for action on community issues. *Program evaluation* helps to determine whether community programs effectively attain their goals and how they can be improved.
- *Policy research and advocacy* includes research on community and social issues, efforts to inform decision-makers (e.g., government officials, private sector leaders, mass media, the public) about courses for action, and evaluation of the effects of social policies. Community psychologists are engaged in advocacy regarding homelessness, peace, drug abuse, positive child and family development, and other issues. One goal of this book is to introduce you to tools for advocacy, as a citizen or professional, at levels from local to international.

Any reader of this book is quite likely to participate in community initiatives such as these in the future, whether as a community psychologist, clinical counseling psychologist, or another health professional, educator, researcher, parent, or citizen. One goal of this book is to give you tools for doing so.

Understanding diverse cultures, including your own, may require another shift of perspective. Cultural traditions of individuals, families, and communities provide personal strengths and resources for effective action. Community psychology emphasizes understanding each culture's distinctiveness while not losing sight of that culture's core values and shared human experiences. A further goal of this book is to provide you with some tools for learning about and working in diverse cultures.

CENGAGE **brain**.com PERSONS, CONTEXTS, AND CHANGE

The shifts of perspectives that we have described involve underlying assumptions about two questions. How do problems arise? How can change occur? Every day, each of us acts on our own assumed answers to these questions. Next, we describe some assumptions among community psychologists about these questions.

Persons and Contexts

Some of our most important assumptions about problems concern the importance of persons and contexts. Shinn and Toohey (2003) coined the term **context minimization error** to denote ignoring or discounting the importance of contexts in an individual's life. Context (a term we will use throughout this book) refers to the encapsulating environments within which an individual lives (e.g., family, friendship network, peer group, neighborhood, workplace, school, religious or community organization, locality, cultural heritage and norms, gender roles, social and economic forces). Together, these make up the structural forces that shape the lives of individuals. Context minimization errors lead to psychological theories and research findings that are flawed or that hold true

only in limited circumstances. These errors can also lead to therapy interventions or social programs that fail because they attempt to reform individuals without understanding or altering the contexts within which those individuals live.

A key concept of social psychology is the fundamental attribution error (Ross, 1977)—the tendency of observers watching an actor to overestimate the importance of the actor's individual characteristics and underestimate the importance of situational factors. When we see someone trip on a sidewalk, we often think “how awkward” or wonder if the person has been drinking. We seldom look to see if the sidewalk is flawed. Context minimization is similar but refers to contexts and forces that include those beyond the immediate situation. Cultural norms, economic necessities, neighborhood characteristics, and the psychological climate of a workplace are examples. Contexts influence our lives at least as much as individual characteristics do. This is not to say that personal characteristics do not matter or that individuals are not responsible for their actions but to recognize the impacts of contexts. Community psychologists seek to understand people within the social contexts of their lives and to change contexts in order to promote quality of life for persons.

Consider the multiple contexts that influence a child in a first-grade public school classroom. The personalities of teacher and students certainly influence the classroom context; the curriculum and routine ways that the teacher engages with students are also important. But also consider the relationships of the school principal, faculty, and staff with the child and his or her family. The class occurs in a physical room and school in a wider neighborhood and community, which can support or interfere with learning. Relationships between administrators, school board, and citizens (and taxpayers) certainly influence the classroom environment, as do community, state, and national attitudes and policies about education. These contexts have important influences beyond simple effects of the individuals involved. Actions to improve learning for students in that first-grade classroom will need to change multiple contexts (see especially Weinstein, 2002a).

Persons and Contexts Influence Each Other Community psychology is about the *relationships* of persons and contexts. These are not one-way streets. Contexts affect personal life, while persons, especially when acting together with others, influence and change contexts. Riger (2001) called for community psychology to appreciate how persons respond to contexts and how they can exercise power to change those contexts.

Persons influence context when citizen efforts in a neighborhood lead to improved police coverage, neighboring connections among residents, assistance for battered women, affordable housing, or when citizens act to reduce pollution by a neighboring factory. Persons who share a problem or illness influence context when they form a mutual help group to support each other. Community psychology seeks to understand *and* to improve individual, community, and societal quality of life. One of our goals for this book is to whet your appetite for involvement in community and social action in ways that draw on your personal strengths and community resources.

Reading This Book “In Context” In reading this book, we expect that, at times, you will disagree with or recognize limitations to what we write. Respectful disagreement is important in community psychology. Community psychologist Julian Rappaport playfully yet seriously proposed Rappaport’s Rule: “When everyone agrees with you, worry” (Rappaport, 1981, p. 3). Diversity of views is a valuable resource for understanding multiple sides of community and social questions.

As you read this book, identify your specific life experiences that lead you to agree or disagree, and identify the social contexts of those experiences. If possible, discuss these with your instructor, a classmate, or in class. It is our observation that many disagreements in communities and societies are based on differing life experiences in different contexts. It is important to discuss those experiences with respect and to understand them. That discussion can deepen your own and others’ learning.

What Is Community Psychology? A Definition

At first, the ideas of community and psychology can seem contradictory. Community suggests the idea of persons coming together in some shared endeavor or at least geographic proximity (e.g., groups, neighborhoods, and larger structures). Psychology has traditionally concerned individual cognition, emotion, motivation, behavior, development, and related processes. In Western cultures, individual and community often have been considered opposing interests. Is community psychology an oxymoron—a contradiction in terms?

A paradox exists when two seemingly contradictory ideas turn out, upon further analysis, to be interrelated, not contradictory (Rappaport, 1981). That is true of individual and community, which are intertwined in a number of ways (Shinn, 1990). Community psychologists see quality of life for individuals, for communities, and for societies as inextricable.

Keeping in mind the diversity of community psychologists’ interests and personal views, we offer this definition of the field: **Community psychology concerns the relationships of individuals with communities and societies. By integrating research with action, it seeks to understand and enhance quality of life for individuals, communities, and societies.**

Community psychology is guided by its core values of individual and family wellness, sense of community, respect for human diversity, social justice, empowerment and citizen participation, collaboration and community strengths, and empirical grounding. We elaborate on these core values later in this chapter.

Let us unpack this definition. Community psychology concerns the multiple relationships between individuals, communities, and societies. We define community broadly. An individual lives within many communities and at multiple levels: family, networks of friends, workplace, school, voluntary association, neighborhood, and wider locality—even cultures. All these exist within larger societies and ultimately within a global context. The individual must be understood in terms of these relationships, not in isolation. This means that community psychology is actually interdisciplinary, drawing on the concepts and methods of many

other disciplines, including public health, community development, human development, anthropology, sociology, social work, geography, and other fields. The principal professional society for the field in the United States is the Society for Community Research and Action, in recognition of this interdisciplinary focus. Similar organizations represent community psychology in Europe, the Americas, Africa, Australia, and Asia.

Community psychology's focus is not on the individual or on the community alone but on their linkages (as in the title of this book). The field also studies the influences of social structures on each other (e.g., how citizen organizations influence the wider community). But unlike sociology, community psychology places a greater emphasis on individuals and their complex of interactions with the social structure.

Community psychology is also committed to developing valid psychological knowledge that is useful in community life. In the community psychology perspective, knowledge is constructed through action. The community psychologist's role has often been described as that of a **participant-conceptualizer** (Bennett et al., 1966, pp. 7–8), actively involved in community processes while also attempting to understand and explain them, as aptly summarized in these statements:

If you want to understand something, try to change it. (Dearborn, cited in Bronfenbrenner, 1979, p. 37)

There is nothing so useful as a good theory. (Lewin, cited in Marrow, 1969)

If we are afraid of testing our ideas about society by intervening in it, and if we are always detached observers of society and rarely if ever participants in it, we can only give our students ideas about society, not our experiences in it. We can tell our students about how society ought to be, but not what it is like to try to change the way things are. (Sarason, 1974, p. 266)

Community psychology research is intertwined with community and social action. Findings from research are used to build theory *and* to guide action. For example, a program developed in a high school setting to prevent youth violence can generate greater knowledge of the problem, of adolescent development, of the local school and community, and of how to design future prevention programs. Moreover, community psychology research and action are collaborative, based on partnerships with the persons or communities involved.

Community psychology research and action are rooted in the seven core values listed in our definition. To elaborate on our definition, we next turn to discussing first-order and second-order change, surveying the levels of relationships and social contexts within which we live, and then to detailing those seven core values.

Structural Perspectives and First-Order and Second-Order Change

Developing a comprehensive understanding of the problem of homelessness introduced at the beginning of this chapter requires a conceptual shift from an

individual-level perspective to a structural perspective. This perceptual shift may be particularly difficult for those of us who were raised in the American cultural tradition of individualism. This tradition holds that America, from its founding, has offered equal opportunities for all, so what we make of our lives solely depends on individual talent and effort. While we do not discount the importance of individual knowledge, skills, and effort (and, in fact, actively work to develop programs to increase these attributes in individuals, as you will see in Chapters 9 and 10), we believe that the role of structural forces in human behavior has been undervalued in psychology as a whole. One of the major skills we want you to take away from this class is the ability to look at a problem and ask yourself, “What structural factors influence this problem or behavior? How could those be modified to improve the lives of individuals and families?”

One of the first major studies demonstrating the importance of structural forces was a study of crime and juvenile delinquency in Chicago in the first half of the 20th century. Two sociologists, Clifford Shaw and Henry McKay, looked at official sources of juvenile delinquency rates (arrests, adjudications, etc.) in Chicago neighborhoods during three time periods: 1900–1906, 1917–1923, and 1927–1933. This was a period of rapid change in Chicago: successive waves of immigration by different ethnic groups, increased industrialization, sharp increases in population density, and high levels of mobility. What they found was that, over time, rates of juvenile delinquency remained high in inner city neighborhoods, even though almost the entire population of the neighborhoods had changed! Even when the ethnic makeup of a neighborhood completely changed (due to existing immigrant groups moving to more desirable neighborhoods and new immigrant groups moving in), the high rates of juvenile delinquency persisted. Shaw and McKay concluded that it was structural factors in the neighborhoods (poverty, overcrowding, and the social disorganization that accompanies rapid change) that were causing the high crime rates, not the characteristics of the individuals who lived there (Shaw and McKay, 1969). The theory they developed, Social Disorganization Theory, is still an influential theory in the field of criminology, but the general point about the importance of structural forces has important implications well beyond that field. Their research also illustrates the difference between first-order and second-order change.

Writing of the family as a social system, Watzlawick et al. (1974) distinguished between two kinds of change. **First-order change** alters, rearranges, or replaces the individual members of a group (the neighborhood in Shaw and McKay’s research). This may resolve some aspects of the problem. However, in the long run, the same problems often recur with the new cast of characters, leading to the conclusion that the more things change, the more they remain the same. Attempting to resolve homelessness by counseling homeless individuals without addressing the supply of affordable housing represents first-order change. You may help that individual, but the social problem will persist because you have not addressed all the reasons that homelessness exists.

Try a thought experiment suggested by community psychologist Seymour Sarason (1972) to analyze the educational system. Criticisms of schools, at least in the United States, often focus blame on individuals or collections of

individuals: incompetent teachers, unmotivated or unprepared students, or uncaring parents or administrators. Imagine changing every individual person in the school: firing all teachers and staff and hiring replacements, obtaining a new student population, and changing every individual from the school board to the classroom—yet leaving intact the structure of roles, expectations, and policies about how the school is to be run. How long do you think it will be before the same issues and criticisms return? Why? If you answer “not long,” you are seeing the limits of first-order change. It is sometimes enough, but often, it is not.

A group is not just a collection of individuals; it is also a set of relationships among them. Changing those relationships, especially changing shared goals, roles, rules, and power relationships, is **second-order change** (Linney, 1990; Seidman, 1988). For example, instead of preserving rigid lines between bosses who make decisions and workers who carry them out, second-order change may involve collaborative decision making. Instead of rigid lines of expertise between mental health professionals and patients, it could involve finding ways that persons with disorders may help each other in self-help groups. The point is not that specific interventions need to always be used but rather that the analysis of the problem takes into account these set of relationships and contexts as possible contributing sources of the problems. Here are some more detailed examples.

Reaching Higher: Second-Order Change in Schools How can schools create “contexts of productive learning” for all students (Sarason, 1972)? Currently, in the United States, the No Child Left Behind law seeks to reform schools by relying on standardized testing and drastic penalties for students and schools that fail. This represents first-order change within the assumptions and roles of the existing system. The law links a specific outcome, test scores, to a potentially drastic shift in resources and authority. This is first-order change because it ensures that schools will change the way they function, even if the exact nature of those changes cannot be predicted and may actually be harmful.

Articulating a different approach to improving student learning, Rhona Weinstein began her 2002 book *Reaching Higher* with the story of “Eric” (pseudonym), a 10-year-old who had never learned to read. Tests showed no learning disability, but years of tutoring had been no help.

A visit to his classroom, however, provided more of the story. Eric was a member of the lowest reading group, which was called the “clowns.” Among its members were the sole ethnic minority child, a nonreader, an overweight child, and so on. Comparing the climate of the highest and lowest ability reading groups was exceedingly painful. In the highest group, the pace was lively, the material interesting, and the children active. In the lowest group, the work was repetitive, remedial, and dull. Upon following the children out to recess, I found that the friendship patterns matched the reading group assignments, but that the members of the lowest reading group stood alone and isolated, even from each other.

So I suggested changing the context for learning instead of trying to change the child—that is, that Eric be moved up to the middle reading

group. I also insisted on a contract specifying that he remain there for a three-month trial and that I would provide extra tutoring and psychological help to support his learning. A lengthy battle ensued. In a classic catch-22, both Eric's teacher and the principal asked for proof that Eric was capable of handling the material in the middle reading group. I argued that we would not have proof until the educational context was changed and Eric's anxiety about learning was relieved. I finally won approval. Eric was promoted to the middle reading group and slowly but surely began to read and participate in classroom life. By the end of the school year, he had reached grade level in his reading skills and he had friends. He proudly showed them off to me, his arms linked with theirs, as I walked the school halls.

... But I kept thinking about the other Eric's left behind in the lowest reading groups.... (Weinstein, 2002a, pp. 2–3)

Weinstein's experience with Eric inspired her to study and create better contexts for learning in schools. She learned that students from many backgrounds experience poor contexts for learning. For example, her twin sons, one with a visual problem from birth complications, were treated very differently in their public schooling. After only two months of first grade, the principal told Weinstein and her husband that their son with the visual problem would never be "college material like his brother" (Weinstein, 2002a, p. 19). School professionals began offering exciting classes and learning opportunities for the "talented" son but not for the "learning-disabled" son. Parents and son had to fight this disparity throughout his schooling. With determined parental support for each son to learn in his own way, both eventually excelled in school and college.

Weinstein and her associates (Weinstein, 2002a, 2002b; Weinstein, Gregory, & Strambler, 2004) have shown how teachers can use a wider range of techniques to teach and motivate all students, enabling them to become active learners. This leads to gains in their educational achievement. To broaden their skills, teachers need their own contexts of productive learning: administrative and peer support and opportunities to experiment and learn. That will require changes in school systems' routines and in public beliefs to support the view that every child can learn if taught appropriately. All these steps change role relationships, representing second-order change.

Oxford House: Second-Order Change in Recovery from Substance Abuse

Traditional professional treatments for substance abuse have high recidivism rates. Methods that rely more on persons in recovery helping each other offer promising alternatives. One example is 12-step groups, such as Alcoholics Anonymous. Another is Oxford House, a network of residential settings (Ferrari, Jason, Olson, Davis, & Alvarez, 2002; Jason, Ferrari, Davis, & Olson 2006; Suarez-Balcazar et al., 2004).

Many recovery homes (halfway houses) are located in areas of higher crime and drug use, have crowded and time-limited accommodations, and impose rules that limit resident initiative and responsibility. Some of these limitations reflect

the reluctance of the larger society to support or have day-to-day contact with persons in recovery. In contrast, Oxford Houses offer more spacious dwellings in lower-crime residential neighborhoods. Residents are required to be employed, pay rent, perform chores, and remain drug-free. The resident may choose whether to be involved in professional treatment, mutual help groups (e.g., 12-step programs), or both. Separate Oxford Houses exist for women and men. Each house is governed democratically, with leaders chosen by residents but without professional staff. Current residents vote on applications of prospective residents to join the house; a resident who returns to drug use or who is disruptive can be dismissed by a similar vote. The new resident joins a community in which there is support, shared responsibility, and shared decision making.

Oxford Houses represent second-order change because they alter the usual roles of patient and staff, making persons in recovery more accountable for their own behavior and for each other in a context of equality, support, and shared community. Evaluations indicate positive outcomes and reduced recidivism.

Listening Partners: Second-Order Change Among Women The Listening Partners Program blended feminist and community psychology principles to provide peer groups for young mothers in Vermont (Bond, Belenky, & Weinstock, 2000). Its participants were low-income European American women living in isolated rural circumstances, although many of its principles could be extended to other groups.

In Listening Partners, groups of young mothers meet weekly with local women leaders. Groups empower women to construct personal stories of their lives and strengths, learn from and support each other, and develop skills in addressing problems. Leaders minimize status distinctions between leader and participant (altering role relationships). Evaluations showed that women in Listening Partners groups (compared to a control group) strengthened qualities of “developmental leadership” in their lives, families, and communities. As one participant described her progress:

I think a lot more about things and whether or not they can be changed. If they can, then I try to think of [things] I can do to change them. If they can't be changed, then I try to think of ways of dealing with them.... Now I care about other people and myself. I have a new self-assuredness—that I can do it right and that I have rights. (Bond, Belenky, & Weinstock, 2000, p. 720).

Listening Partners involves second-order change because it addresses societal injustice and enables changes in role relationships in women's lives, promoting individual growth within the bonds of community.

Limits of Change in Social Contexts Even second-order change does not “solve” community and social problems. Attempts to resolve community and social issues represent a problem resolution process rather than problem solving. Every resolution creates new challenges and perhaps problems: unintended consequences, altered alignments of human or material resources, or new conflicts

involving human needs and values. This is not a reason to give up. The process leads to real improvements if communities and societies carefully study both history and likely future consequences (Sarason, 1978).

For example, the school reforms discussed previously will create challenges (Elias, 2002; Sarason, 2002, 2003a; Weinstein, 2002a, 2002b). Creating contexts of productive learning for all will surely meet resistance—some of it legitimate. Resources are limited in schools and communities. Questions will include: Who benefits from the inequities and shortcomings of the educational system as it exists now? Who will benefit from proposed changes? Is there any common ground for compromise? Where will the necessary money, skills, and leadership come from? What will happen over time? These and other questions are critical aspects of community change.

ECOLOGICAL LEVELS OF ANALYSIS IN COMMUNITY PSYCHOLOGY

As individuals, we live within webs of social relationships. Urie Bronfenbrenner (1979) originated a concept of levels of analysis (describing levels of social contexts) that is influential in developmental psychology and community psychology. Our discussion of ecological levels is partly based on Bronfenbrenner's approach, but our frame of reference is the community, not just the developing individual. Thus, we differ in some details from his approach. Historically, community psychology has used ecological levels as a way of clarifying the differing values, goals, and strategies for intervention associated with each level of analysis (Rappaport, 1977a; Rappaport, 1977b; Seidman & Rappaport, 1974). In addition, this approach helps us focus on the interactions between systems (see also different concepts of ecological levels in Maton, 2000; Moane, 2003; Nelson & Prilleltensky, 2010).

Thinking in terms of ecological levels of analysis helps to clarify how a single event or problem has multiple causes. For example, factors that contribute to a child's problems in school may include forces at multiple levels. Powerful adults at school, locality, national, and global levels make policy decisions that affect the quality of education the child receives. Family members, friends, and teachers have a great impact, but even their thinking and values are influenced by the school system, locality, cultural, societal, and even global levels.

Thinking in terms of ecological levels of analysis also helps to illustrate multiple answers to an important question for community psychology: What is a community? While originally tied to place or a locality, "community" has come to refer to sets of relationships among persons at many levels—whether tied to place or not. Thus, a classroom, sorority, religious congregation, online community, or cultural group (e.g., the Mexican American community) may be considered a community.

Figure 1.1 illustrates our typology of ecological levels of analysis for community psychology. The most **proximal**, closest to the individual and involving the most face-to-face contact, are closer to the center of the diagram. The more

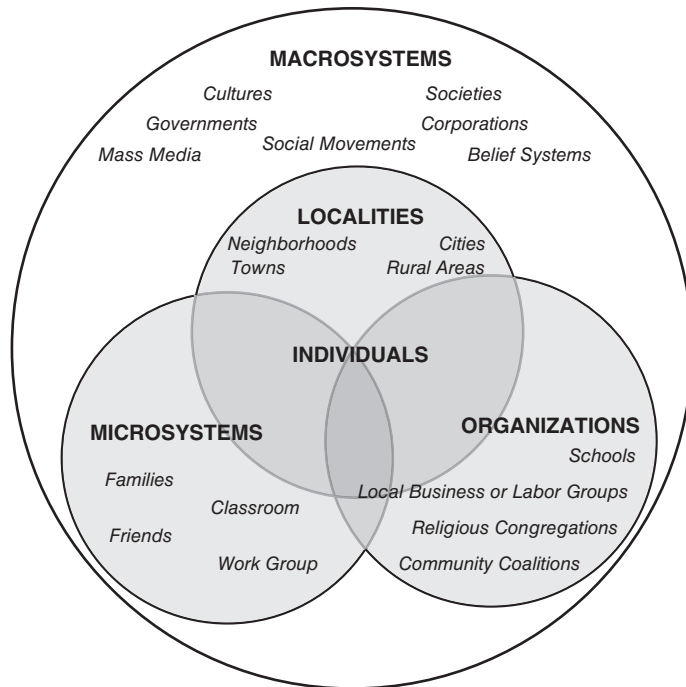


FIGURE 1.1 Ecological Levels of Analysis for Community Psychology

distal systems, less immediate to the person yet having broad effects, are toward the outside of the diagram. As you can see in the diagram, some of these systems overlap; for example, some organizations, such as small businesses or community groups, are so small that they have many of the psychosocial qualities of microsystems. The examples in italics in Figure 1.1 are illustrative and do not represent all groups at each level.

Bronfenbrenner (1979) described the webs of relationships surrounding the individual by using the metaphor of the Russian nesting doll. A nesting doll is egg-shaped and contains a succession of smaller dolls. When opened, each doll reveals a smaller doll inside. The nesting doll metaphor calls attention to how the smallest doll exists within layers of larger dolls—just as each individual exists within layers of contexts. Figure 1.1 is based on this metaphor: Proximal systems are nested within broader, more distal systems. However, the nesting doll metaphor is incomplete, omitting the relationships among levels. Individuals, societies, and the levels between them are interdependent, and their contributions to behavior and social problems may overlap in different ways. Indeed, community psychology is based on that interdependence.

Individuals

Consider the individual person, nested within the other levels. The person chooses his or her relationships or environments to some extent and influences

them in many ways; likewise, they influence the person. Each person is involved in systems at multiple ecological levels (e.g., family and friends, workplace, and neighborhood). Much research in community psychology concerns how individuals are interrelated with social contexts in their lives. For example, a special journal issue examined the human costs of underemployment (Dooley & Catalano, 2003).

Community psychologists and others in related fields have developed individually oriented preventive interventions to increase personal capacities to address problems in communities. These interventions have been documented to be effective in reducing such problems as difficulties in the social and academic development of children, adolescent behavior problems and juvenile delinquency, adult physical health and depression, HIV/AIDS, difficulties during family transitions such as parenting and divorce, and family violence (we will discuss these in detail in Chapters 9–10). Many preventive approaches promote social-emotional competence, skills for adapting to challenging contexts, and ecological transitions from one context to another, such as entering school or becoming a parent (Weissberg & Kumpfer, 2003).

Microsystems

Microsystems are environments in which the person repeatedly engages in direct, personal interaction with others (Bronfenbrenner, 1979, p. 22). They include families, classrooms, friendship networks, scout troops, athletic teams, musical groups, residence hall wings, and self-help groups. In microsystems, individuals form interpersonal relationships, assume social roles, and share activities (Maton & Salem, 1995).

Microsystems are more than simply the sum of their individual members; they are social units with their own dynamics. For example, family therapists have long focused on how families function as systems beyond their individual members (Watzlawick et al., 1974). Members have roles, differential power in making decisions, reactions to the actions of other members, etc. Microsystems can be important sources of support for their members and also sources of conflict and burdens.

The concept of a **setting** is important in community psychology. In this psychological usage of the term, setting is not simply a physical place but is an enduring set of relationships among individuals that may be associated with one or several places. A chapter of a self-help group is a setting, even if its meeting place changes. Physical settings such as playgrounds, local parks, bars or coffee shops may provide meeting places for microsystems. The term *setting* is applied to microsystems and to larger organizations.

Individuals in different contexts use microsystems in different ways. For example, one study at a predominantly European American university found that family support was more important during the first year of college for African American students, who had fewer peers on campus, while peer support was more important for European Americans, who had more peers available (Maton et al., 1996).

What are the most important microsystems in your life? Are these microsystems part of wider settings, such as a neighborhood, university, or business?

Choose one microsystem. What resources does it provide for you? What challenges or obligations does it present?

Name something that you would like to change about one of the microsystems in your life. Why?

Organizations

Organizations are larger than microsystems and have a formal structure: a title, mission, bylaws or policies, meeting or work times, supervisory relationships, and so on. Organizations studied by community psychologists include human service and health care settings, treatment programs, schools, workplaces, neighborhood associations, cooperative housing units, religious congregations, and community coalitions. These are important forms of community in that they affect who people associate with, what resources are available to them, and how they define and identify themselves. Employed persons often introduce themselves by where they work.

Organizations often consist of sets of smaller microsystems. Classes, activities, departments, staff, administrators, and boards make up a school or college. Departments, shifts, or work teams make up a factory or restaurant. Religious congregations have choirs, religious classes, and prayer groups. Large community organizations usually work through committees. However, organizations are not simply the sum of their parts; the dynamics of the whole organization, such as its organizational hierarchy and its informal “culture,” are important.

In turn, organizations can be parts of larger social units. A local congregation may be part of a wider religious body or a retail store part of a chain. A neighborhood association offers a way for citizens to influence city government. The largest organizations (e.g., international corporations, political parties, or religious denominations) are macrosystems, which are discussed later.

What are the most important organizations in your life?

Do you participate in these organizations through smaller microsystems? Are these organizations part of larger localities or systems?

Choose one organization. What resources does it provide for you? What challenges does it present?

Name something that you would like to change about an organization in your life. Why?

Localities

Although the term **community** has meanings at many levels of analysis, one prominent meaning refers to geographic localities, including rural counties, small towns, urban neighborhoods, or entire cities. Localities usually have governments, local economies, media, systems of social, educational and health services, and other institutions that influence individual quality of life.

Localities may be understood as sets of organizations or microsystems. Individuals participate in the life of their shared locality mainly through smaller

groups. Even in small towns, individuals seldom influence the wider community unless they work alongside other citizens in an organization or microsystem. An association of neighborhood residents is an organization, while the entire neighborhood is a locality. That neighborhood may also host microsystems of teen friends, adults who meet for coffee, and parents and children who gather at a playground. However, a locality is not simply the sum of its citizens, microsystems, or community organizations. Its history, cultural traditions, and qualities as a whole community surround each of those levels.

Neighborhoods are important in individual lives, and community and developmental psychologists have begun to study them. A research review (Shinn & Toohey, 2003) concluded that neighborhood conditions (in both urban and rural areas) are linked to children's health, personal distress, academic achievement, employment opportunities, behavior problems, delinquency, teenage childbearing, and being a victim of violence. Parenting strategies that are adaptive in safer neighborhoods differ from strategies adaptive in riskier neighborhoods (Gonzales, Cauce, Friedman, & Mason, 1996). Among adults, neighborhoods affect fear of crime, anxiety, depression, and sense of community (Shinn & Toohey, 2003).

An example of the linkage between organizations and localities is the recent emergence of community coalitions, comprised of representatives of various community groups and organizations and formed to address wider community issues such as drug abuse or health concerns.

What localities are important in your life?

Describe a locality that you live in or have lived in. What are its strengths? Limitations? What would you change about it if you could? What organizations are important in this locality? How is it affected by larger social forces?

Macrosystems

Macrosystems are the largest level of analysis in our system. While Figure 1.1 portrays only one macrosystem, in fact individuals, microsystems, organizations, and localities are all continually influenced by multiple macrosystems. Macrosystems include societies, cultures, political parties, social movements, corporations, international labor unions, multiple levels of government, international institutions, broad economic and social forces, and belief systems. Community psychology's perspective ultimately needs to be global.

Macrosystems exercise influence through policies and specific decisions, such as legislation and court decisions, and through promoting ideologies and social norms. Ideals of individual autonomy greatly influence U.S. culture and the discipline of psychology. Mass media communicate subtle forms of racial stereotyping and cultural expectations for thinness, especially for women. Macrosystems also form contexts within which the other levels function, such as the economic climate affecting businesses. But systems at other levels can influence macrosystems through social advocacy or through actions such as buying locally grown foods.

An important level of analysis that we include under macrosystems is the population. A population is defined by a broadly shared characteristic (e.g., gender, race, ethnicity, nationality, income, religion, sexual orientation, or having a physical or mental disability). Populations can be the basis of a broad form of community (e.g., the Jewish community, the gay community). However, not all individuals within a population will identify with it as a community.

Many studies in community psychology concern more than one level of analysis. For instance, a recent study of children in Head Start programs investigated neighborhood-, family-, and individual-level factors related to educational success. The researchers found that neighborhood-level factors (including the number of families of low or high socioeconomic status and the number of homes in which English was a second language) had significant *direct* effects on the cognition and behavior of children in Head Start (Vanden-Kieman et al., 2010). These direct neighborhood-level effects were not mediated by such family-level factors as family structure, income or ethnicity, and family processes (e.g., amount of social support available to parents, parents' involvement in their children's education). What this means, for example, is that living in a neighborhood marked by concentrated poverty had a significant negative effect on the cognitive and behavioral development on children, even if those children lived in a two-parent home with good income and parents who were highly involved in their education. The negative neighborhood-level effects were strong enough to overwhelm any positive effects the children received from their parents. We will discuss the strong effects of neighborhood context on child development in Chapter 5.

Levels of Intervention

Ecological levels of analysis are helpful tools in shifting perspective about “where to look” to promote change. Systematically examining an issue across levels of analysis can uncover multiple contributing factors to that issue. However, examining social issues across levels of analyses is not sufficient to promote change; that is, understanding “where” to look is only the first step of the community psychology shift in perspective.

One way in which levels of analysis can help suggest appropriate points of intervention is through the concept of mediating structures. Peter Berger and John Neuhaus (1977) were sociologists who developed a strategy to promote well-being for individuals and communities through the development of **mediating structures**. Central to this theory is that society can exert stressful conditions on individuals, some of whom have difficulty coping with these stressors. However, a strategy of promoting the development of mediating structures focuses on settings that can assist individuals coping with society's stressors. In our ecological levels of analysis framework, these might be organizations (e.g., schools, mutual help groups, barbershops/beauty parlors) or less formal settings. Community psychologists have been interested in the potential of settings that can serve as mediating structures—many of which are underutilized resources in communities already. In some cases, they focus on creating

new alternative settings that better meet the needs of the individuals affected by the focal concern.

“What to change” and “how to change” are crucial components of any change strategy. In the coming chapters, we will elaborate on “how” and “what” to change. For this introduction of the community psychology perspective, we emphasize two related points that need to be paired with any consideration of ecological levels of analysis: problem definition and selecting interventions that are linked to ecological levels of analysis.

The focus of any change effort requires a problem definition to organize resources and action. In the example of homelessness presented earlier, if homelessness is defined as a problem with the person only (e.g., addiction, mental health, lack of job skills) or problem of the environment only (e.g., lack of affordable housing), the selected interventions will be quite different (e.g., a treatment for an individual deficit or creating a program to create access to affordable housing). It is critical to examine how a problem is framed and how this dictates interventions. By focusing on a single level of analysis (e.g., individual problems), the intervention strategy is constrained to individual change efforts and will be ineffective in addressing homelessness if aspects of the problem at higher levels of analysis are not addressed (e.g., access to safe, affordable housing). Too often, levels of analysis might be examined for an issue, but the change strategy ignores or does not match this analysis. In North America, many problems are framed at an individual level of analysis. However, from a community psychology perspective, addressing such issues as homelessness or joblessness will require multiple interventions at different levels of analysis. If interventions are not implemented at multiple levels of analysis, they will likely fail to be effective at addressing the issue.

Furthermore, there are three ways that we may fall short of addressing issues even if we examine multiple levels of analyses. First, it may be that action is necessary but not taken (e.g., additional resources for treatment of homeless persons or affordable housing are not committed). Second, it may be that action is taken where it should not be (e.g., arresting homeless persons for sleeping on the street; how does this prevent homelessness?). Third, and perhaps more common, action is taken at the wrong level of analysis (e.g., the only action taken is passing city ordinances to limit panhandling or loitering—observable individual level behaviors of some homeless persons that are troubling to many community members). In community psychology terms, this is referred to as an **error of logical typing** (Watzlawick et al., 1974; Rappaport, 1977). While panhandling and loitering can be problematic, focusing change efforts on this individual level of analysis likely will not reduce homelessness. These efforts may also not reduce behaviors perceived to be problematic; rather, these behaviors will likely be moved to different locations as the root causes for homelessness have not been addressed.

How do community psychologists decide to frame problem definitions? How can you choose which levels of analysis need to be included in an intervention strategy? In the next section, we present core values of community psychology that help guide these decisions.

SEVEN CORE VALUES IN COMMUNITY PSYCHOLOGY

Our personal values about relationships, accountability, social change priorities, and our personal political world view all shape our priorities and agenda for community work. (Bond, 1989, p. 356)

Our work always promotes the ends of some interest group, even if we do not recognize that explicitly. (Riger, 1989, p. 382)

Awareness of values is crucial for community psychology. But what exactly do we mean by values? Values are deeply held ideals about what is moral, right, or good. They have emotional intensity; they are honored, not lightly held. Values may concern ends (goals), or means (how to attain goals), or both. They are social; we develop values through experiences with others. Individuals hold values but so do families, communities, and cultures. Values may be rooted in spiritual beliefs or practices but can also be secular. Many values conflicts involve choices about which of two worthy values is more important in a given situation (Nelson & Prilleltensky, 2010; O'Neill, 1989; Rudkin, 2003; Schwartz, 1994; Snow, Grady, & Goyette-Ewing, 2000).

In community psychology, discussions of values are useful for several purposes. First, values help clarify choices for research and action. Even defining a problem is a value-laden choice, strongly influencing subsequent action (Seidman & Rappaport, 1986). Public definitions of community and social problems reflect the worldviews of the powerful and help to maintain the status quo. Attending to values can lead to questioning those dominant views. For community psychologists, deciding whether to work with a particular organization or community requires attention to values. Sometimes, the community psychologist may conclude that his or her values do not match those of a setting and choose not to work in that setting (Isenberg, Loomis, Humphreys, & Maton, 2004).

Second, the discussion of values helps to identify when actions and espoused values do not match. Consider a community leader who helps to found a neighborhood social center to empower teens who are gay, lesbian, bisexual, or questioning their sexuality. The leader decides how to renovate the space and plans programs, allowing the youth themselves little say. Despite the leader's intent, this actually disempowers the youth (Stanley, 2003). The leader "talks the talk" but does not "walk the walk."

Or consider an alternative high school that seeks to empower students, their families, and teachers (Gruber & Trickett, 1987). But when decisions are to be made, the teachers have sources of day-to-day information and influence that students and parents lack; teachers thus dominate the discussion. Despite the espoused values of all involved, the organizational practices do not empower students and families. The problem is not individual hypocrisy but an organizational discrepancy between ideals and actual outcomes.

Third, understanding a culture or community involves understanding its distinctive values. For instance, Potts (2003) discussed the importance of Africanist

TABLE 1.1 Seven Core Values in Community Psychology

Individual and family wellness	Empowerment and citizen participation
Sense of community	Collaboration and community strengths
Respect for human diversity	Empirical grounding
Social justice	

values in a program for middle school African American youth. Native Hawai'ian cultural conceptions of health are closely tied to values of *'ohana* and *loka'i*, family and community unity, and of interdependence of the land, water, and human communities. A health promotion program in Native Hawai'ian communities needs to be interwoven with these values (Helm, 2003).

Fourth, community psychology has a distinctive spirit (Kelly, 2002a)—a shared sense of purpose and meaning. That spirit is the basis of our commitment and what keeps us going when obstacles arise (Kelly, 2010). It is thoughtful but also passionate and pragmatic, embodied in research and action.

In our experience, the spirit of community psychology is based on seven core values, listed in Table 1.1. We begin with the value most closely linked to the individual level of analysis, proceeding to those more closely linked to community and macrosystem levels. This order is not a ranking of these values' importance. Our discussion of these seven values is influenced by, yet different from, the discussions of values by Isaac Prilleltensky and Geoffrey Nelson (2002; Nelson & Prilleltensky, 2010; Prilleltensky, 1997, 2001). These seven values, based on our experiences, are just one way of summarizing the field's values. Each individual and working group within the field must decide what values will be central to their work. Our discussion here is intended to promote the discussion of these values and the issues they raise for community life. As Bond (1989) and Riger (1989) asserted in quotations at the beginning of this section, community psychology will be guided by some set of values and serve someone's interests, whether we realize it or not. Better to discuss and choose our values and how to put them into action.

Debi Starnes, a community psychologist, provided examples of how she has applied each value in her leadership on the Atlanta, Georgia, city council (Starnes, 2004). These examples illustrate how one committed person can make a difference by speaking out and working cooperatively with others.

Individual and Family Wellness

Wellness refers to physical and psychological health, including personal well-being and attainment of personal goals (Cowen, 1994, 2000a, 2000b, 2000c). Indicators of wellness include symptoms of psychological distress and such measures of positive qualities as resilience, social-emotional skills, personal well-being, and life satisfaction. These and similar indicators are often outcome criteria for community psychology interventions.

Strengthening families can promote individual wellness. Community prevention programs that focus on child development often address parent and family functioning. However, individual and family wellness are not synonymous. For example, when violence or other exploitation of family members is ongoing, preserving the family conflicts with the individual wellness of those victims.

Individual/family wellness is also the focus of clinical psychology and related fields. Community psychology goes beyond, yet complements, clinical methods by placing individual wellness in the context of ecological levels of analysis. One of the events leading to the founding of community psychology in the United States was a study showing that professional clinical treatment for all who need it would be prohibitively expensive and impossible in practice (Albee, 1959). (Albee's analysis is even more believable now in the current health care climate.) Clinical care is valuable but not available to all and often not to those who need it most (U.S. Department of Health and Human Services, 1999, 2001).

To promote individual/family wellness, community psychologists have studied and developed community interventions focused on the prevention of maladaptive behavior, personal and family problems, and illness; promotion of social-emotional competence and of health; social support networks and mutual help groups; intervention programs in such nonclinical settings as schools and workplaces; and advocacy for changes in social services, laws, policies, and programs to promote physical and mental health.

In her work on the Atlanta City Council, Starnes promoted the value of individual and family wellness by heading an action group that produced policies and programs for homeless persons and families. This led to developing services along a continuum of care: emergency shelter care, transitional housing, self-sufficient housing for living independently, job training, supportive housing for homeless persons with serious mental illness, and a resource opportunity center and management information system that coordinated services among 70 agencies serving the homeless. These services also helped cut costs they diverted homeless persons from emergency rooms and jails. (Starnes, 2004, p. 3)

Starnes's efforts benefit homeless persons and families and the community at large. Prilleltensky (2001) proposed the concept of **collective wellness** to refer to the health of communities and societies. Cowen's (1994, 2000c) descriptions of wellness include concepts of empowerment and social justice. Certainly, individual and community well-being are interwoven, and collective wellness is an attractive general principle. It is involved with the next five values that we discuss.

Sense of Community

Sense of community is the center of some definitions of community psychology (Sarason, 1974). It refers to a perception of belongingness, interdependence, and mutual commitment that links individuals in a collective unity (McMillan & Chavis, 1986; Sarason, 1974). For example, community psychologists have

studied sense of community in neighborhoods, schools and classrooms, mutual help groups, faith communities, workplaces, and Internet virtual environments (e.g., Fisher, Sonn, & Bishop, 2002; Newbrough, 1996). Sense of community is a basis for community and social action as well as a resource for social support and clinical work.

The value of sense of community balances the value of individual/family wellness. The emphasis in Western cultures and in their fields of psychology is on the individual, which in its worst forms can foster selfishness or indifference to others (Bellah, Madsen, Sullivan, Swidler, & Tipton, 1985; Sarason, 1974). Building a sense of community goes beyond individualism to a focus on interdependence and relationships. From a community psychology perspective, quality of life for individual and community ultimately depend on each other.

Yet sense of community is not always positive. It can involve distancing “insiders” from “outsiders.” It can be bolstered by ignoring or attacking diversity within a community, creating injustice or a deadening conformity. It is not a cure-all. In especially risky neighborhoods, withdrawal from the community may be adaptive for adults or children (Brodsky, 1996). Thus, this value must be balanced with other values, especially social justice and respect for diversity.

In her work in Atlanta, Starnes (2004, p. 4) promoted this value through several initiatives. Atlanta has become a leader in replacing large, concentrated public housing units with attractive, well-built, mixed-income communities. Starnes was considered naïve for championing the mixing of middle-income and lower-income residents, but the first project in her district was such a success that six more similar public housing communities have been rebuilt. These have increased feelings of community across social class lines. In addition, Starnes helped initiate Community Redevelopment Plans for seven Atlanta neighborhoods affected by the 1996 Olympics development. Finally, she helped initiate new Quality of Life zoning and building ordinances requiring street planning and housing features that encourage neighboring. For instance, those ordinances promote having services within walking distance and having front porches and sidewalks so that people can see each other and chat more.

Respect for Human Diversity

This value recognizes and honors the variety of communities and social identities based on gender, ethnic, or racial identity, nationality, sexual orientation, ability or disability, socioeconomic status and income, age, or other characteristics. Understanding individuals-in-communities requires understanding human diversity (Trickett, 1996). Persons and communities are diverse, defying easy generalizations and demanding that they be understood in their own terms.

This is not a vague respect for diversity as a politically correct attitude. To be effective in community work, community psychologists must understand the traditions and folkways of any culture or distinctive community with whom they work (O'Donnell, 2005a). That includes appreciating how the culture provides distinctive strengths and resources for living. Researchers also need to adapt

research methods and questions to be appropriate to a culture. This is more than simply translating questionnaires; it involves a thorough re-examination of the aims, methods, and expected products of research in terms of the culture to be studied (Hughes & Seidman, 2002).

Respect for diversity does not mean moral relativism; one can hold strong values while also seeking to understand different values. For example, cultural traditions differ in the power they grant to women; religious traditions vary in their teachings about sexuality. Respect for diversity also must be balanced with the values of social justice and sense of community—understanding diverse groups and persons while promoting fairness, seeking common ground, and avoiding social fragmentation (Prilleltensky, 2001). To do that, the first step is usually to study diversities in order to understand them. A related step is to respect others as fellow persons, even when you disagree.

Starnes (2004, p. 5) described how she promoted respect for diversity in Atlanta by strengthening affirmative action policies, insurance coverage for domestic partners in gay and lesbian couples, and related ways of addressing past and present discrimination (matters of both social justice and respect for diversity). The housing initiatives discussed above involved promoting neighboring and community ties among diverse groups. Starnes represents a district with plenty of socioeconomic, racial, and other forms of diversity, and her job requires considerable cultural competence to represent her constituents. Starnes also pointed out that Atlanta now has women in a majority on City Council and as mayor, city attorney, and chief operating officer (playfully known as “chicks in charge”). A familiar experience in community organizations is that most of the volunteers and local leaders are women, and women are now assuming leadership roles in a variety of larger contexts.

Social Justice

Social justice can be defined as the fair, equitable allocation of resources, opportunities, obligations, and power in society as a whole (Prilleltensky, 2001, p. 754). It is central to some definitions of community psychology (Nelson & Prilleltensky, 2010; Rappaport, 1981).

Social justice has two meanings especially important here. **Distributive justice** concerns the allocation of resources (e.g., money, access to good quality health services or education) among members of a population. The community mental health movement that arose in the United States in the 1960s was a distributive effort to provide mental health services to more citizens. Who determines how such resources are distributed? That is the question of **procedural justice**, which concerns whether processes of collective decision making include a fair representation of citizens. Thus, distributive justice concerns the outcomes of a program or social policy, while procedural justice concerns how it is planned and implemented (Drew, Bishop, & Syme, 2002; Fondacaro & Weinberg, 2002).

Psychology's record of support for social justice in the United States has been mixed. It has sometimes been at the forefront of social justice struggles, as

in the involvement of psychologists Mamie and Kenneth Clark and others in research cited in the 1954 school desegregation case *Brown vs. Board of Education*. However, psychological research and practice has also had the effect of supporting sexism, racism, and other injustices, for instance in the area of intelligence testing (Gould, 1981; Prilleltensky & Nelson, 2002). The tradition of liberation psychology, rooted in Latin America, and the related fields of critical psychology and feminist psychology exemplify psychological pursuit of social justice (Bond, Hill, Mulvey, & Terenzio, 2000a, 2000b; Martin-Baro, 1994; Montero, 1996; Prilleltensky & Nelson, 2002; Watts & Serrano-Garcia, 2003).

A social justice perspective is often most concerned with advocacy: for social policies (e.g., laws, court decisions, government practices, regulations) and for changes in public attitudes, especially through mass media. But it can also guide clinical work with members of oppressed populations and research on psychological effects of social injustice or changes in social policy.

Social justice involves concern for wellness of all persons and an inclusive vision of community and recognition of human diversity. Procedural justice is especially related to values we present next: citizen participation in making decisions and genuine collaboration between psychologists and community members.

In practice, the pursuit of social justice must be balanced with other values and with inequalities in power that are difficult to change (Prilleltensky, 2001). For instance, psychologists who have worked with survivors of state-sponsored violence in Guatemala and South Africa have found that pursuing full accountability of perpetrators of past violence and greater power for survivors (social justice) must be balanced with other aims: individual healing (wellness), community and national reconciliation (sense of community), and the realities of who continues to hold power in communities and society (Lykes, Terre Blanche, & Hamber, 2003).

In Atlanta, Starnes (2004, pp. 4–5) and other Council members are addressing their concern with social justice through sponsoring a city living wage policy, which would raise the minimum wage for employees of city services and of contractors serving the city. When business representatives told her that she did not understand the “ripple effects” of that policy, she replied that she did indeed understand ripple effects, and that was why she proposed the raise! Starnes also helped pioneer a system of community courts using principles of restorative justice for nonviolent crimes, such as cleaning up graffiti and performing community service. In a related initiative, arrested prostitutes are now offered help through treatment and services for the homeless. Recidivism and costs have decreased. The housing reforms, affirmative action policies, and services for the homeless discussed above also promoted social justice.

Empowerment and Citizen Participation

Fundamental to a community psychology perspective is the consideration of power dynamics in individual relationships, organizations, and communities. Empowerment is aimed toward enhancing the possibilities for people to control their own lives (Rappaport, 1981, 1987). Empowerment is a process that works

across multiple levels and contexts; it involves gaining access to resources and exercising power in collective decision making. Citizen participation is a strategy for exercising this power. It emphasizes democratic processes of making decisions that allow all members of a community to have meaningful involvement in the decision, especially those who are directly affected (Prilleltensky, 2001; Wandersman & Florin, 1990). Grassroots citizen groups, neighborhood organizations, and community-wide prevention coalitions promote citizen participation. Citizen participation also refers to the ability of a community to participate in decisions by larger bodies (e.g., macrosystems) that affect its future. Empowerment and citizen participation are related to the concept procedural justice (Fondacaro & Weinberg, 2002; Rappaport, 1981; Zimmerman, 2000).

Citizen participation does not automatically lead to better decisions. Sometimes, citizens do not consider the rights and needs of all individuals or groups, and empowerment has been used to justify the strengthening of one group at the expense of another. Thus, this value must be balanced with values of sense of community, social justice, and respect for diversity. This can lead to conflict among competing views and interests. However, simply avoiding conflict by limiting opportunities for meaningful citizen participation is often worse for those values than promoting free debate.

Atlanta is divided into 24 neighborhood planning units. Proposed city policies (e.g., zoning) are sent to these groups for discussion and input. Starnes (2004, p. 4) referred to these sessions as “raucous democracy,” but that passionate involvement of citizens means that their voices are heard, that elites find it difficult to make decisions in private, and that citizens and neighborhoods have a say in decisions that affect them. Starnes herself is a former chair of one of these groups. The community development plans growing out of the Olympics (mentioned earlier) also brought citizens and professional planners together as partners in making decisions.

Collaboration and Community Strengths

Perhaps the most distinctive value of community psychology, long emphasized in the field, involves *relationships* between community psychologists and citizens and the *process* of their work.

Psychologists usually relate to community members as experts: researchers, clinical or educational professionals, and organizational consultants. That creates a hierarchical, unequal relationship of expert and client—useful in some contexts but often inappropriate for community work. Psychologists also traditionally address deficits in individuals (e.g., diagnosing mental disorder), while community psychologists search for personal and community strengths that promote change. Community psychologists do have expertise to share with communities. However, they also need to honor the life experiences, wisdom, passionate zeal, social networks, organizations, cultural traditions, and other resources (in short, the community strengths) that already exist in a community. Building on these strengths is often the best pathway to overcoming problems (Maton, Schellenbach, Leadbeater, & Solarz, 2004).

Furthermore, community psychologists seek to create a collaborative relationship with citizens so community strengths are available for use. In that relationship, both psychologist and citizens contribute knowledge and resources, and both participate in making decisions (Kelly, 1986; Prilleltensky, 2001; Tyler, Pargament & Gatz, 1983). For example, community researchers may design a study to meet the needs of citizens, share research findings with citizens in a form that they can use, and help use the findings to advocate for changes by decision-makers. Developers of a community program would fully involve citizens in planning and implementing it.

Collaboration is best pursued where psychologist and community share common values. Thus, it is crucial for community psychologists to know their own values priorities and to make careful choices about with whom to ally in the community. It also means that differences in views that emerge must be discussed and resolved fairly.

Community psychologist Tom Wolff was engaged by a community health coalition to work with local citizens to plan health initiatives. He held an evening meeting open to all citizens. At such a meeting, one might expect to discuss community health education campaigns, the need for a community clinic, early screening programs, or mutual help groups. Instead, the most important need identified by many citizens was for street signs! Wolff barely contained his amazement. Yet recently in this community, emergency medical care had been delayed several times, with serious consequences, because ambulances could not locate residences.

Wolff duly noted this concern, then sought to turn the conversation to matters fitting his preconceptions. However, the local citizens would not have it; they wanted a plan for action on street signs. When that need had been met, they reasoned, they could trust the health coalition to work with them on other issues. Wolff then shifted to working with the citizens to get the municipality to erect street signs. Instead of pursuing his own agenda, he worked with citizens to accomplish their goals. His actions illustrate the values of citizen participation and collaboration. (Wolff & Lee, 1997)

In Atlanta, Starnes (2004, p. 4–6) noted how her work as an elected official often involves listening to and mediating between competing interests whose advocates hold strong emotional views. She cited a pressing need in government for community psychologists with mediation skills. Starnes uses her community psychology process and collaborative skills every day, and has a lively appreciation of the strengths of her constituents and of the city at large.

Empirical Grounding

This value refers to the integrating research with community action, basing (grounding) action in empirical research findings whenever possible. This uses research to make community action more effective and makes research more valid for understanding communities. Community psychologists are impatient with theory or action that lacks empirical evidence and with research that ignores the context and interests of the community in which it occurred.

Community psychologists use quantitative and qualitative research methods (we discuss both in Chapter 4). Community psychologists prize generating knowledge from a diversity of sources, with innovative methods (Jason, Keys, Suarez-Balcazar, Taylor, & Davis, 2004; Martin, Lounsbury, & Davidson, 2004).

Community psychologists believe no research is value-free; it is always influenced by researchers' values and preconceptions and by the context in which the research is conducted. Drawing conclusions from research thus requires attention to values and context, not simply to the data. This does not mean that researchers abandon rigorous research but that values and community issues that affect the research are discussed openly to promote better understanding of findings.

Starnes (2004, p. 5–6) has advocated basing decisions of Atlanta government on empirical evidence whenever possible. She admitted that she had only mixed success. Yet methods abound for using research evidence to inform government decisions, evaluate community programs, and assist neighborhood associations. Moreover, Starnes noted that community problems and decisions are growing more complex, requiring more knowledge and analytical ability and providing a challenge for community psychologists.

CONCLUSION: VALUES IN CONTEXT

No discipline commands unanimity among its members, and community psychologists in particular can be a skeptical, questioning lot (recall Rappaport's Rule). These core values therefore must be understood in terms of how they complement, balance, and limit each other in practice (Prilleltensky, 2001). For example, individual wellness must be balanced with concern for the wider community. Collaborating with local community members is a time-consuming approach that can slow the completion of research. Promoting a local sense of community or cultural identity does not necessarily promote a wider concern for social justice. Community life and a wise community psychology require accommodations among these values rather than single-minded pursuit of one or two.

Moreover, such abstract ideas as individual/family wellness, social justice, respect for diversity, and sense of community can mean very different things to different persons or in different contexts. These seven core values must be elaborated and applied through example and discussion. As you read this book, seek a way to discuss values questions respectfully with others. Part of the appeal of community psychology is that values issues are “on the table” to be discussed.

CHAPTER SUMMARY

1. Community psychology concerns the relationships of individuals with communities and societies. By integrating research with action, it seeks to understand and enhance quality of life for individuals, communities, and societies. Community psychology emphasizes collaboration with community

members as partners in research or action. Community psychologists are *participant-conceptualizers* in communities, engaged in community action and in research to understand that action.

2. Compared to other psychological fields, community psychology involves a shift in perspective. The focus of community psychology is not on the individual alone but on how the individual exists within a web of *contexts*—encapsulating environments and social connections. Persons and social contexts influence each other. Discounting the influence of social contexts is the *context minimization error*.
3. *First-order change* alters or replaces individual members of a group or community; *second-order change* alters the role relationships among those members. Examples of second-order change include changing schools to provide contexts of productive learning for all students, changing systems for recovery from substance abuse, and empowering young mothers. For social and community issues, problems are not “solved” but changed. Every action creates new challenges, but these can be an improvement over time.
4. Community psychologists study *ecological levels of analysis*. *Individuals* interact within such *microsystems* as families, friendship networks, classrooms, and small groups. Microsystems often are nested within such *organizations* as schools and workplaces. Microsystems and organizations may exist in specific *localities*, such as neighborhoods. All these systems exist within such *macrosystems* as societies and cultures. Microsystems are the most *proximal* (closest) level to individuals, while macrosystems are the most *distal*—but all influence individual lives. A *setting* is an enduring set of relationships among individuals that may be associated with one or several physical places. It may apply to microsystems or to organizations.
5. Values are important in community psychology. They help clarify issues and choices in research and action, facilitate questioning of dominant views of social issues, and promote understanding how cultures and communities are distinctive.
6. Community psychology is based on seven core values: *Individual and family wellness*; *sense of community*; *respect for human diversity*; *social justice*; *empowerment and citizen participation*; *collaboration and community strengths*; and *empirical grounding*. *Distributive justice* concerns whether resources in society are allocated fairly, while *procedural justice* includes whether decision-making processes are inclusive. These seven core values are interrelated. Pursuit of one value, without consideration of the others, leads to one-sided research and action.

RECOMMENDED READINGS

- Rappaport, J. & Seidman, E. (Eds.). (2000). *Handbook of community psychology*. New York: Kluwer/Plenum.
- Shinn, M. & Toohey, S. M. (2003). Community contexts of human welfare. *Annual Review of Psychology*, 54, 427–460.
- Trickett, E. (2009). Community psychology: Individuals and interventions in community context. *Annual Review of Psychology*, 60, 395–419.

RECOMMENDED WEBSITES

Society for Community Research and Action:

<http://www.scra27.org>

Website of the international professional body of community psychology. Information on SCRA mission and goals, membership benefits, interest groups, listservs, graduate schools and job opportunities in community psychology, conferences, and activities (including those for students). Useful for students, citizens, and community psychologists.

The Social Psychology Network: Community Psychology:

<http://www.socialpsychology.org/community.htm>

The community psychology page of the Social Psychology Network website. Information on journals, books, careers and graduate programs, service learning, teaching resources, and other topics. Useful for students, citizens, and community psychologists.