

Community Psychology and Community Mental Health: A Call for Reengagement

Greg Townley,¹ Molly Brown,² and John Sylvestre³

Highlights

- Community psychology has made important contributions to community mental health research and practice.
- The field has reduced its focus on well-being and liberation of adults with serious mental illnesses.
- These 12 articles highlight promising directions for reengaging with community mental health.

© Society for Community Research and Action 2018

Abstract Community psychology is rooted in community mental health research and practice and has made important contributions to this field. Yet, in the decades since its inception, community psychology has reduced its focus on promoting mental health, well-being, and liberation of individuals with serious mental illnesses. This special issue endeavors to highlight current efforts in community mental health from our field and related disciplines and point to future directions for reengagement in this area. The issue includes 12 articles authored by diverse stakeholder groups. Following a review of the state of community mental health scholarship in the field's two primary journals since 1973, the remaining articles center on four thematic areas: (a) the community experience of individuals with serious mental illness; (b) the utility of a participatory and cross-cultural lens in our engagement with community mental health; (c) Housing First implementation, evaluation, and dissemination; and (d) emerging or under-examined topics. In reflection, we conclude with a series of challenges for community psychologists involved in future, transformative, movements in community mental health.

Keywords Community mental health · Community psychology · Serious mental illness · Transformative change

✉ Greg Townley
gtownley@pdx.edu

¹ Department of Psychology, Portland State University, Portland, OR, USA

² Department of Psychology, DePaul University, Chicago, IL, USA

³ Center for Research on Educational and Community Services, University of Ottawa, Ottawa, ON, Canada

Introduction

Early on, community psychology was closely linked with the field of community mental health, and in particular, the challenges faced by people living with serious mental illness in the community (Nelson, Kloos & Ornelas, 2014; Reich, Riemer, Prilleltensky & Montero, 2007). Dissatisfied with their training in clinical psychology and the available deficit-focused, individual-oriented service modalities, community psychologists sought to innovate and develop new concepts, new practices, and new programs better suited to the complex social problems they encountered working in community mental health settings. Since then, community psychologists have made numerous contributions to the advancement of community mental health research and practice through early frameworks, such as George Fairweather's Lodge program (Fairweather, Sanders, Cressler & Maynard, 1969) and Barbara Dohrenwend's influential ecological model of stress and coping (Dohrenwend, 1978), as well as more recent recovery-oriented interventions, such as Sam Tsemberis' Housing First model (Tsemberis, 2010).

There is now an evidence-base supporting key programs for enabling people with serious mental illnesses to work toward recovery and live more satisfying lives in the community. These include Assertive Community Treatment, Housing First, supported employment, peer support, and family support and education. Community psychologists have played important roles in studying or developing these programs. Yet, evidence for these programs is often based on outcomes of interest to policy-makers, such as cost-effectiveness, as opposed to indicators of individual and community well-being. Outcomes that may be of greater importance to people living

with serious mental illness, such as their ability to live the lives they wish for themselves and their full and equal inclusion and participation in society, are less commonly examined. Furthermore, a critical examination of community psychology's history and scholarship suggests that the field has reduced its focus on promoting mental health, well-being, and liberation of individuals with serious mental illnesses over the past several decades (Kloos, Nelson & Ornelas, 2014). For many scholars, providers, and individuals with lived experience, progress in community mental health has stalled.

Regardless of currently available evidence-based programs, many individuals continue to confront seemingly intractable problems of poverty, social isolation, discrimination, and marginalization. Nonetheless, community psychology can bring to bear its foundational values of social justice, diversity, empowerment, citizen participation and collaboration, as well as its methods and theories, to move the field of community mental health forward to address these problems. Equally important, new generations of community psychologists are exploring new theories, new methods, and new technologies that can further enhance the potential of community psychology to contribute to this critical area of study.

Recognition of the ongoing barriers faced by individuals with lived experience, as well as the ability of community psychology values, theories, and methods to promote broader inclusion, empowerment, and recovery, led to our call for papers for a special issue of the *American Journal of Community Psychology (AJCP)* focused on a reengagement of community psychology with community mental health. We endeavored for the issue to address a series of important focal areas, including discussions of new and emerging theories or concepts in the field of community mental health; a focus on how community psychology values can improve community mental health research and action; participatory research methods and projects focused on lived experience and its role in program planning, research and policy development; research or program evaluations of innovative and promising interventions to promote wellness, self-determination, and community inclusion; articles focusing on the role of diversity and intersectional social identities that impact community mental health research, practice, and policy at a global and local level; and the demonstration of how new or emerging research methods or techniques can inform community mental health research and service delivery.

Along with the formation of the Society for Community Research and Action (SCRA) Transformative Change in Community Mental Health Interest Group and two recently published texts from the SCRA Book Series on transformative change in community mental health (Nelson et al., 2014) and housing, citizenship, and communities for

people with serious mental illness (Sylvestre, Nelson & Aubry, 2017), this special issue aims to further stimulate discussion, inform research and practice, and shape policy related to improvements in community mental health, and to the community experiences of individuals with mental health challenges more broadly. The issue presents 12 empirical, theoretic, and review articles highlighting areas for intervention at multiple levels of analysis. Authors from a range of stakeholder groups are represented, including service providers, persons with lived experience, and academics. While the majority of articles reflect North American perspectives, two articles from Ireland and Portugal help to suggest possibilities for the reengagement of community psychology with community mental health internationally. The contributions to the special issue hold strong to the values of community psychology. They challenge us to critically examine the current state of community mental health and identify approaches to moving the field forward. We hope this issue offers a starting point for community mental health scholars in search of future directions for impactful work in this area.

Overview of Contributions to the Special Issue

The special issue begins with a critical review of community mental health research published in the *American Journal of Community Psychology* and *Journal of Community Psychology* from 1973 to 2015 (Townley & Terry, 2018). The authors document a downward trend in published articles pertaining to community mental health from the mid-1980s to mid-2000s, with a substantial increase in published work between 2006 and 2015. Despite this increase, community mental health research remains low (6.7% of published pages in AJCP and JCP between 2006 and 2015). The authors encourage community psychologists to increase their commitment to community mental health research, both to continue the momentum achieved over the past decade and also to gain more traction in the two primary community psychology journals.

The next three papers examine the community experiences of individuals with serious mental illnesses, with a focus on citizenship, capabilities, and community participation. Ponce and Rowe (2018) present the definition and principles of their citizenship framework—the 5Rs—focusing on the rights, responsibilities, roles, resources, and relationships that society bestows upon its members. The authors review their citizenship research and practice at multiple ecological levels of analysis, including the impact of their Citizens Project on individuals' psychiatric symptoms, alcohol and drug use, and quality of life (Clayton, O'Connell, Bellamy, Benedict & Rowe, 2013), as well as

ways in which citizenship concepts can be integrated into mental healthcare settings and systems (Ponce, Clayton, Gambino & Rowe, 2016). The article concludes with a discussion of the alignment between citizenship goals and community psychology, particularly given the field's core values of collaboration and empowerment and its focus on members of society who often experience stigma and marginalization.

The capabilities framework (e.g., Nussbaum, 2011) has been suggested as a way to direct social programs toward restoring service users' agency, social roles, and community integration (Davidson, Ridgway, Wieland & O'Connell, 2009). In their article, Sacchetto, Ornelas, Calheiros and Shinn (2018) focus on the adaptation of Nussbaum's capabilities framework to community mental health and propose a contextualized measure of the extent to which mental health programs foster functionings, or achieved capabilities. Developed in collaboration with consumers of mental health services, the Achieved Capabilities Questionnaire for Community Mental Health (ACQ-CMH) demonstrated good psychometric properties and was associated with measures of recovery, quality of life, and psychological distress. The authors encourage collaboration between community psychologists, mental health consumers, and service providers in evaluating the extent to which housing and service programs enhance independence, self-sufficiency, and capabilities for participants. They conclude by noting that adaptation of Nussbaum's capabilities framework can help shift models of intervention from a deficit-orientation to an emphasis on community psychology values of empowerment, inclusion, social justice, and self-determination.

Similar to the capabilities approach, community participation frameworks emphasize rights, competencies, and collaborative relationships rather than needs, deficits, and hierarchical relationships. Advances in our knowledge of community participation may come from taking advantage of newer research methods and technologies. Noting that individuals with serious mental illnesses often face physical and social barriers to participating in valued social roles and activities, Townley, Brusilovskiy, Snethen and Salzer (2018) present an innovative geospatial approach to examine the relationship between community participation and resource accessibility and availability. The authors report significant associations between community participation and the accessibility and availability of resources needed for participation and emphasize the importance of transportation access for individuals residing in both urban and non-urban settings. They conclude by outlining suggestions for community psychology research investigating multiple levels of analysis that impact participation, including microsystems (e.g., support from family members, friends, and other mental health consumers),

localities (e.g., neighborhood safety and access to public transportation), and macro-system influences (e.g., societal attitudes about mental illness and economic inequality).

Two articles in the special issue use a participatory cross-cultural lens to examine how community psychology can reengage with community mental health. First, Hartmann, St. Arnault and Gone (2018) detail an ethnography conducted with an American Indian community behavioral health clinic which examined how culture and culture concepts (e.g., cultural competence) shaped clinical practice and informed transformative change efforts in community mental health. The authors argue that community psychology must reengage the clinic setting to combat the "reductionist biomedical narratives of human hardship that pathologize and de-politicize human suffering" (Hartmann et al., 2018, p. 69). Lessons learned regarding strategies for reengaging with clinic settings include identifying exceptional clinicians or administrators who are versed in ecological thinking and adept at contextualizing discourses of human suffering, and encouraging relational approaches to clinic collaborations that are responsive to the socio-political concerns of culturally marginalized communities.

In a second article emphasizing participatory methods, Kidd, Davidson, Frederick and Kral (2018) provide three illustrative case studies of work in the areas of youth homelessness, consumer/survivor engagement, and Indigenous research to argue that participatory, action-oriented approaches to research are needed to combat inertia in the field of community mental health. Furthermore, the authors recommend that we must move away from the typical Participatory Action Research (PAR) "project" frame that aligns with academic publication, grant, and career timelines and instead encourage a PAR "attitude"—that is, using participatory ways of working to bring about social change *with* marginalized communities over the course of many years. Kidd and colleagues conclude by suggesting that PAR offers a tool to respond to systemic inequities and "wicked problems" (e.g., staggering health disparities experienced by individuals with serious mental illnesses) that cannot be adequately addressed with more traditional approaches to research in community mental health (e.g., clinical trials and biologic psychiatry).

Research and practice pertaining to homelessness and housing interventions, particularly Housing First, has become a prominent area of focus for many community psychologists. Continuing this trend, three articles in this issue focus on implementation, evaluation, and dissemination of Housing First programs to illustrate ways in which community psychologists can reengage with community mental health while also responding to a pressing social issue impacting communities around the world. Manning and Greenwood (2018) report on a mixed-methods study examining the relationship between homeless service

providers' work-related values and service users' recovery experiences. Findings confirm that microsystems of support (specifically support provided by service providers) have an important influence on recovery for individuals using homeless services. The authors note the importance of championing evidence-based programs such as Housing First operating by consumer-led values of individual strengths increasing choice, and personal growth to promote recovery. Manning and Greenwood also highlight the need for community psychologists to conduct more research that applies an ecological lens to homeless services. Given the overlapping influence of micro-, meso-, and macro-system factors, second-order change across these levels is necessary for adults experiencing homelessness with mental illness to fully realize their recovery.

Pruitt et al. (2018) present findings from a community-based participatory evaluation of a Housing First program on the Hawaiian Island of O'ahu. In their study, clients in a Housing First program used Photovoice to evaluate the program and advocate for housing policy change. Echoing the importance of applying an ecological lens to homeless services noted by Manning and Greenwood (2018), the authors discuss the outcomes of their Photovoice project at multiple levels of analysis, including the individual level (e.g., increased client engagement in the program and connectedness to the community); the program level (e.g., increased inclusion of client voice, including project participants becoming a permanent part of the program as an evaluation team); the community level (e.g., impacting media coverage and community attitudes toward homelessness); and the policy level (e.g., advocating for sustained program funding and influencing the Governor of Hawai'i's pledge to end homelessness by 2020). Importantly, this study engaged Housing First tenants in the entire research process, from study design to analysis, and particularly in the dissemination of findings, as numerous project participants were involved as co-authors on this article.

Recognizing that wide-scale adoption of innovations like Housing First will require changes in complex mental health systems, Worton et al. (2018) draw upon concepts from implementation science and systems change theory to examine how to promote Housing First implementation. The article describes case studies in six Canadian communities receiving Housing First training and technical assistance (TTA) and reports on findings related to facilitators and barriers to early implementation, the influence of TTA on implementation, and the "levers" used to bring about broader systems change. The authors argue that reengagement of community psychology with community mental health can be achieved through the implementation of complex community interventions that disrupt the status quo and infuse service systems with values and competencies

(e.g., understanding and acknowledging power, developing partnerships, and empowering consumers) that promote capacity and create transformative change.

The final group of articles included in the special issue highlights new and emerging, or under-examined areas of community mental health that inform research and practice agendas for community psychologists in the years to come. First, Ecker, Cherner, Rae and Czechowski (2018) review the literature on sexuality among individuals with serious mental illness who have experienced homelessness. This topic has received very little attention in the research literature, and findings from their review highlight the importance of intimate relationships to recovery and well-being. The authors discuss policy implications for homeless shelters and housing interventions, including providing individuals with living situations that offer more autonomy and choice regarding sexual relationships; using empowerment-focused intervention strategies to address internalized stigma and self-confidence issues that may result in a reluctance to form intimate relationships; and encouraging more open discussion of sexuality between clients and clinicians. The article concludes with an important discussion of ways in which the community psychology value of diversity is critical to address the intimacy needs of LGBTQ individuals, and the discrimination these individuals often face.

Sensitivity and attention to the diversity of human experience is also a critical component of a trauma-informed care (TIC) service delivery approach that is important in settings serving individuals with serious mental illnesses. According to Mihelicova, Brown and Shuman (2018), TIC is a principle-driven approach that overlaps substantially with community psychology values and competencies, including ecological frameworks, second-order change, empowerment, and citizen participation. Although community mental health settings are moving toward TIC services, there is a lack of consensus regarding its operationalization, which leads to implementation challenges. The authors provide numerous suggestions for ways that community psychologists can contribute to TIC's empirical support and implementation by building coalitions that bring together key stakeholders across systems of care, consulting with organizations to shift social regularities instead of focusing on individual-level change, and evaluating trauma-informed interventions with a focus on participant experiences and strengths-based outcomes, such as empowerment.

Finally, Sylvestre, Notten, Kerman, Polillo and Czechowski (2018) examine a seemingly intractable problem—poverty among people with serious mental illnesses. They argue that community mental health programs and systems are not currently able to address poverty, as they are overly focused on individual-level interventions that cannot, on

their own, raise people out of poverty. The values, skills, theories, and methods of community psychologists are well-suited for bringing about changes in community mental health systems to better address poverty. For example, values of empowerment, citizen participation, and social justice can inform policymaking by ensuring the inclusion of those most directly influenced by policy in the process. Community psychologists can also provide expertise related to developing alternative settings (e.g., consumer-run organizations) that act as mediating structures for marginalized individuals, and build coalitions that bring together partners with diverse perspectives and skillsets. While specific solutions are not yet clear, a reengagement in community health by community psychologists will hopefully provide much-needed energy to address poverty and other significant social problems discussed throughout this special issue.

Key Challenges for Future Movements in Community Mental Health

When community psychologists first engaged with community mental health issues, the challenges were both similar and different from those we face today. At the time, in the face of deinstitutionalization, the primary challenges were related to putting in place the programs and services needed to ensure people could live successfully in the communities of their own choosing. Faced with the lack of sufficient planning and resources, community-based programs and services, along with local, state, and federal level programs, systems, and policies, seemingly emerged improvisationally. New strategies emerged in response to unexpected challenges, or to replace programs which appeared to not be working, but were not informed by a clear plan, let alone clear guiding principles. Today, we have established community mental health systems which undoubtedly provide people with much better opportunities than they might have had 40–50 years ago. Yet, some significant challenges remain. Too many people with serious mental illness live in poverty, with minimal participation in work or education, and socially isolated from their neighbors. For too many, there is the same challenge that faced the community mental health field so many years ago—ensuring people can live successfully in the communities of their own choosing.

Although the challenge may appear to be the same, it is also notably different and more complex in some respects. First, most people will not experience the long periods of institutionalization that were more common in earlier generations. In contrast to the community integration challenges faced by someone who might have spent years in an institution, today people may have more

complex experiences of social inclusion and exclusion. For people who have been homeless, for example, the challenge may involve the loss of connections to their previous communities on the street or in shelters, while also integrating with new communities over time. Moreover, many of our assumptions of community participation are place-based, such as in the local neighborhood, whereas people may wish to participate in a variety of other kinds of communities, including those that are virtual.

Second, there is increased recognition that those requiring support are not a homogenous group. Whereas much past concern appears to have been with single men, particular services and supports are required for the full diversity of people who experience mental illness. In addition to ensuring that an adequate range of services and supports are available for women and families, attention must be paid to the full diversity of the LGBTQ community, and to the membership of the North American ethno-racial mosaic. Approaches to intervention must acknowledge all possible intersections of individuals' identities that interplay with their experience of mental illness and must avoid patterns of oppression that may parallel their experiences in broader society.

Third, the challenges lie not only in the development of a new community mental health system, but in reforming, reshaping, and in improving the management of complex, oftentimes fractured, and seemingly knitted together systems. Constituents of existing systems may be resistant to change, even when they admit that the status quo does not work. New programs and services must compete for resources with those with vested interests in current approaches. Moreover, proponents of new programs and services must figure out how to fit their ventures within existing local systems.

Finally, to continue to improve and move forward, we must strive to see challenges beyond the individual level. Although a number of challenges are personal, a number are also rooted in broader community, system, and policy levels. Collective action, system-level change, and marshaling of research evidence are some of the tools we can use to solve problems at these higher ecological levels. Action beyond the individual level must include working to modify cultural views of individuals with psychiatric disabilities to ensure their inclusion in society. To continue to move forward, we must ensure the leadership of people with lived experience. Their insights and their direction can ensure that proposed solutions will have the greatest impact.

Conclusion

The articles collected in this special issue are keenly representative of a community psychology perspective on

community mental health and set us apart from fields driven by a medical model of mental illness. Consistent with our values, the papers focus on citizen participation, empowerment, and social justice as inherent to the promotion of recovery. The contributions identify several ways in which our current systems of care fail to address recovery in these ways, and they offer hope for the field by balancing critical analysis with potential solutions. Methods of shaping community mental health both within and outside of traditional service settings are presented, pointing to diverse opportunities for reengagement with the field that can draw on our expertise as community psychologists.

This special issue illuminates the challenges the field must face moving forward. Over the past half-century, efforts of our field and related disciplines have demonstrated our capacity to develop and study interventions in community mental health that align with our values. We have had important successes in influencing policies for widespread dissemination of such interventions. Over the next half-century and beyond, we must further challenge ourselves to shift our focus from ameliorative interventions to transformation. Although the challenges remain great, with renewed focus, better insights, improved theories and methods, and with greater resolve, the promise for the transformational change we all desire will become more achievable.

Acknowledgments We wish to acknowledge the support of the Society for Community Research and Action Transformative Change in Community Mental Health Interest Group for their encouragement of, and contributions to, the Special Issue.

Conflicts of Interest

We have no conflicts of interest to disclose. The work described in this manuscript complies with ethical standards.

References

- Clayton, A., O'Connell, M. J., Bellamy, C., Benedict, P., & Rowe, M. (2013). The citizenship project part II: Impact of a citizenship intervention on clinical and community outcomes for persons with mental illness and criminal justice involvement. *American Journal of Community Psychology, 51*, 114–122.
- Davidson, L., Ridgway, P., Wieland, M., & O'Connell, M. (2009). A capabilities approach to mental health transformation: A conceptual framework for the recovery era. *Canadian Journal of Community Mental Health, 28*, 35–46.
- Dohrenwend, B. S. (1978). Social stress and community psychology. *American Journal of Community Psychology, 6*, 1–14.
- Ecker, J., Cherner, R., Rae, J., & Czechowski, K. (2018). Sexual intimacy, mental illness, and homelessness. *American Journal of Community Psychology, 61*, 131–140.
- Fairweather, G. W., Sanders, D. H., Cressler, D. L., & Maynard, H. (1969). *Community life for the mentally ill: An alternative to institutional care*. New Brunswick, NJ: Transaction.
- Hartmann, W. E., St. Arnault, D. M., & Gone, J. P. (2018). A return to “the clinic” for community psychology: Lessons from a clinical ethnography in urban American Indian behavioral health. *American Journal of Community Psychology, 61*, 62–75.
- Kidd, S., Davidson, L., Frederick, T., & Kral, M. J. (2018). Reflecting on participatory, action-oriented research methods in community psychology: Progress, problems, and paths forward. *American Journal of Community Psychology, 61*, 76–87.
- Kloos, B., Nelson, G., & Ornelas, O. J. (2014). Community psychology history and theory as resources for transformative change in community mental health. In G. Nelson, B. Kloos & J. Ornelas (Eds.), *Community psychology and community mental health: Towards transformative change* (pp. 23–50). Society for Community Research and Action Book Series. New York: Oxford University Press.
- Manning, R. M., & Greenwood, R. M. (2018). Microsystems of recovery in homeless services: The influence of service provider values on service users' recovery experiences. *American Journal of Community Psychology, 61*, 88–103.
- Mihelicova, M., Brown, M., & Shuman, V. (2018). Trauma-informed care for individuals with serious mental illness: An avenue for community psychology's involvement in community mental health. *American Journal of Community Psychology, 61*, 141–152.
- Nelson, G., Kloos, B., & Ornelas, O. (2014). *Community psychology and community mental health: Towards transformative change*. Society for Community Research and Action Book Series. New York: Oxford University Press.
- Nussbaum, M. C. (2011). *Creating capabilities: The human development approach*. Cambridge, MA: Harvard University.
- Ponce, A. N., Clayton, A., Gambino, M. J., & Rowe, M. (2016). Social and clinical dimensions of citizenship from the mental health care provider perspective. *Psychiatric Rehabilitation Journal, 39*(2), 161–166.
- Ponce, A. N., & Rowe, M. (2018). Citizenship and community mental health care. *American Journal of Community Psychology, 61*, 22–31.
- Pruitt, A. S., Barile, J. P., Ogawa, T. Y., Peralta, N., Bugg, R., Lau, J., ... Mori, V. (2018). Housing First and Photovoice: Transforming lives, communities, and systems. *American Journal of Community Psychology, 61*, 104–117.
- Reich, S. M., Riemer, M., Prilleltensky, I., & Montero, M. (Eds.) (2007). *The history and theories of community psychology: An international perspective*. New York: Springer.
- Sacchetto, B., Ornelas, J., Calheiros, M. M., & Shinn, M. (2018). Adaptation of Nussbaum's capabilities framework to community mental health: A consumer-based capabilities measure. *American Journal of Community Psychology, 61*, 32–46.
- Sylvestre, J., Nelson, G., & Aubry, T. (2017). *Housing, citizenship, and communities for people with serious mental illness: Theory, research, practice, and policy perspectives*. Society for Community Research and Action Book Series. New York: Oxford University Press.
- Sylvestre, J., Notten, G., Kerman, N., Polillo, A., & Czechowski, K. (2018). Poverty and serious mental illness: Toward action on a seemingly intractable problem. *American Journal of Community Psychology, 61*, 153–165.
- Townley, G., Brusilovskiy, E., Snethen, G., & Salzer, M. S. (2018). Using geospatial research methods to examine resource accessibility and availability as it relates to community participation of individuals with serious mental illnesses. *American Journal of Community Psychology, 61*, 47–61.

- Townley, G., & Terry, G. (2018). Highlighting the way forward: A review of community mental health research and practice published in AJCP and JCP. *American Journal of Community Psychology*, *61*, 10–21.
- Tsemberis, S. (2010). *Housing First: The Pathways model to end homelessness for people with mental illness and addiction*. Center City, MN: Hazelden.
- Worton, S. K., Hasford, J., Macnaughton, E., Nelson, G., MacLeod, T., Tsemberis, S., ... & Richter, T. (2018). Understanding systems change in early implementation of Housing First in Canadian communities: An examination of facilitators/barriers, training/technical assistance, and points of leverage. *American Journal of Community Psychology*, *61*, 118–130.

Copyright of American Journal of Community Psychology is the property of Wiley-Blackwell and its content may not be copied or emailed to multiple sites or posted to a listserv without the copyright holder's express written permission. However, users may print, download, or email articles for individual use.