Integrating Complexity and Infant Mental Health for Comprehensive Community Change

Allison Pinto
Sarasota Community Studio

Author Notes:
Allison Pinto, Ph.D., is a neighbor of Central-Cocoanut and Executive Director of Sarasota Community Studio in Sarasota, Florida, United States
Correspondence concerning this article should be addressed to Allison Pinto, Sarasota Community Studio, 1216 Central Avenue, Studio 101, Sarasota, FL 34236. E-mail: Allison@SRQStudio.org.

Keywords: complexity, infant mental health, children, neighborhood, place-based initiative

Recommended Citation: Pinto, A. (2014). Integrating Complexity and Infant Mental Health for Comprehensive Community Change. Global Journal of Community Psychology Practice, 5(1), 1-11. Retrieved Day/Month/Year, from (http://www.gjcpp.org/).
Integrating Complexity and Infant Mental Health for Comprehensive Community Change

Abstract

Efforts emerging throughout the United States and at the federal scale suggest that there is a readiness for new perspectives on mental health and community change. Complexity and infant mental health have been developing as fresh orientations within the fields of systems theory and mental health, respectively. Through Sarasota Community Studio, residents of the Central-Cocoanut neighborhood in Florida are now combining the key principles of complexity and infant mental health and applying them to place-based efforts to develop a new model for transformative change and well-being. This paper highlights features of the current U.S. policy landscape that signal a readiness to address community transformation, identifies key principles of complexity and infant mental health that make these orientations especially relevant to transformation, presents Central-Cocoanut as a community case example of efforts to apply complexity and infant mental health, and begins to explore the implications of a new model for transformation that is emerging at the neighborhood scale.

Keywords: complexity, infant mental health, children, neighborhood, place-based initiative

Townley and Sylvestre (this issue) have issued a call for big ideas regarding transformative change and community mental health, and here in the United States the timing could not be better. There is a growing awareness of the need for transformation reflected in an increasing variety of local, state and federal initiatives focused on community-scale well-being. Simultaneously, complexity and infant mental health have been developing as fresh orientations within the fields of systems theory and mental health, respectively. In the Central-Cocoanut neighborhood of Sarasota, Florida efforts are underway to combine the key principles of complexity and infant mental health and apply them to comprehensive community change efforts initiated at the neighborhood scale, in order to develop a new model for transformation and well-being. These efforts have implications for community mental health, both as a phenomenon and as a field. This paper will highlight features of the current U.S. policy landscape that signal a readiness to address community transformation, identify key principles of complexity and infant mental health that make these orientations especially relevant to transformation, present Central-Cocoanut as a community case example of efforts to apply complexity and infant mental health, and begin to explore the implications of a new model for transformation that is emerging at the neighborhood scale.

Signs of Readiness

U.S. policies relating to community and mental health communicate a growing desire to realize transformation. In 2010, the Promise Neighborhoods initiative was established by the U.S. Department of Education “to significantly improve the educational and developmental outcomes of children and youth in our most distressed communities and to transform those communities” by attending to the well-being of entire neighborhoods (U.S. Department of Education, 2013, “Program Description,” para. 2). This is part of the broader White House Neighborhood Revitalization Initiative established to coordinate the place-based investments of various federal agencies including the White House Domestic Policy Council, the White House Office of Urban Affairs, and the Departments of Education, Health and Human Services, Housing and Urban Development, Justice, and Treasury (The White House, 2011). These federal efforts tend to emphasize the influence of formal services and systems on well-being, more so than the everyday actions of individuals and families in determining their own thriving. Nonetheless, they raise awareness of the multiple, interdependent dimensions of well-being and the importance of neighborhoods as the primary geography of everyday life. They also operationalize the goal of working collectively to realize the well-being of everyone, not just a subset of the population.

In 2013 The White House hosted The National Conference on Mental Health. This marked a significant shift in the prevailing orientation, as mental health was now defined from a wellness perspective in terms of the ability of people to: “realize their full potential, cope with the stresses of life, work productively, and make meaningful contributions to their communities” (U.S. Department of Health and Human Services, 2014, “Mental Health and Wellness,” para. 1). Over the past year a national dialogue has been promoted as follow-up to this conference, with communities across the country
hosting local conversations to increase understanding about mental health and to generate community specific responses.

While federal initiatives are but one strategy for broad-scale change, they grow out of efforts that have been developing throughout the United States that increasingly recognize the importance of a positive orientation to mental health, an individual-in-community perspective, and transformation. In fact, over the past two decades, over ten billion philanthropic dollars have been devoted to place-based community change efforts with an emphasis on collective well-being (Kubitsch, Auspos, Brown, & Dewar, 2010a). These investments and the ongoing local efforts they have fueled signal a continued thirst for big ideas around transformative change and community mental health. There is still a clear need for discoveries and inventions, however. Kubisch and her colleagues note that none of the efforts to date can point to a geography where transformation has occurred, such that an area once characterized by suffering is now characterized by all-around thriving. There is not yet a single neighborhood that can make this claim. It is in this context that the development of a new approach to community mental health is now proposed, through the integration and application of complexity and infant mental health.

The Complexity Orientation

The theory and science of complexity can powerfully inform the development of communities (Pinto, Dutton & Curry, 2008). When a community is conceptualized as a complex adaptive system, it is recognized as a dynamic network of diverse agents interacting with one another and the environment to co-evolve over time (Agar, 2007). “Agents” are the people, groups and other entities that are “autonomous,” in that they have the capacity to act and to change intentionally and thereby influence one another and the evolution of a system (Maguire, McKelvey, Mirabeau, & Oztas, 2006). Complexity emphasizes processes of self-organization among agents as the central means of fostering the ongoing health, resilience and hardness of a system, whether that system is an individual, a family, an organization, or a community (Capra, Juarrero, & Sotolongo, 2007). As each agent makes everyday decisions and takes action in relation to the recognized desires and needs of self and others (particularly others in closest proximity), and in relation to current environmental conditions, macro-scale patterns emerge. These patterns are a manifestation of the collective well-being of the community.

Although a “communiplexity” orientation may seem intuitive to people who focus on community organizing (Pinto, et al., 2008), it typically requires an overriding of deeply held mental models about community development and systems change that have been imported from traditional social science and various fields of practice. Traditional, “Newtonian” science emphasizes linearity and assumes that a whole system can be understood through a detailed analysis of all its parts. Traditional practice models reflect this orientation by emphasizing the development of elaborate master plans created by experts, followed by the disciplined implementation of these plans to achieve pre-specified outcomes. Emphasis traditionally is placed on directing processes, preventing deviations from plans, eliminating environmental threats and maintaining stability (Olson & Eoyang, 2001).

In contrast, a complexity approach assumes that cause-effect pathways are numerous and multi-directional and a whole system is more than a sum of its parts. Because agents have autonomy and the environment is continually changing, individual and system behaviors are often unpredictable and uncontrollable. Promoting the ongoing health and well-being of a system therefore involves facilitating its ability to self-organize in continually adaptive, flexible and responsive ways. It is about cultivating relationships, capitalizing upon diversity, facilitating the exchange of energy (in terms of information, resources and emotion), and ensuring sufficient feedback loops for ongoing reflection in order to adapt for perpetual goodness of fit (Stacey, 2003).

Complexity recognizes that although steady states might occur, they are relatively rare and fleeting. Usually communities experience dynamic states characterized by constant non-linear changes within a local “space of possibilities” (Agar, 2007). As such, rather than focusing on states of equilibrium, it is helpful to define opportunities within the actual space that exists at various scales within inter-related systems of the community.

Finally, rather than assuming that efforts grow through a process of planned replication, it is useful to conceptualize community-wide change as an emergent process involving multiple agents interacting with a changing environment in response to an initial action. When this happens overall dynamics can change, yielding similar patterns across scales in the community. These are often described in complexity as “butterfly effects,” with tiny initiating events generating a re-organization of the entire system (Kauffman, 1993; Holland, 1995; Maguire, et al., 2006).

While complexity has been applied to understand and influence the development of a diversity of social systems, the field is not as far along in applying the concepts of complexity to social systems in which the agents are human beings. The dynamics of ant colonies, flocks of birds and schools of fish are often referenced in efforts to describe human complex systems (Reynolds, 1987), even while assuming that the minds and
relationships of human beings are profoundly more complex than those of other creatures. In the past decade there have been significant explorations of complexity as it relates to social science (Sawyer, 2004; Castellani & Hafferty, 2009; Agar, 2013) and organizational development (Maguire et al., 2006; Snowden & Boone, 2007); however, there is still a need for much deeper understanding of the ways in which micro interactions within and among individuals relate to macro patterns at the community scale. How is it that people make decisions and take action relative to their awareness of the capabilities, needs, desires, and intentions of themselves and those around them, in an ever-changing environment? How does this happen in well-coordinated and continuously adaptive ways? This is the realm of mental health.

The Infant Mental Health Orientation

Communities can be better understood as complex adaptive systems by incorporating insights from the field of mental health, but not just any theory of mental health is relevant and useful. The infant mental health orientation has much to offer as a way of better understanding the mental health of all people and social change processes at multiple scales, from individual and dyad to neighborhood and community. It provides a fundamentally positive definition of mental health, it recognizes relationships as critical to the emergence of mental health, and it accepts transformation as a central change process. These features combine to distinguish it from other theories. Although researchers, practitioners and policy makers are mostly using concepts of infant mental health to promote the development of babies and toddlers in primary caregiving relationships, the mental capacities developing in infancy and early childhood are core capacities for human beings of all ages, and dynamics clarified within infant-caregiver dyads exist in relationship constellations throughout social networks. As such, the concepts of infant mental health can be applied to understand and promote mental health across the lifespan, and at the community scale.

ZERO TO THREE, the National Center for Infants, Toddlers and Families, defines infant mental health as the developing capacity to: 1) Experience, regulate and express the full range of emotions, 2) Form close and secure interpersonal relationships and 3) Explore the environment and learn (ZERO TO THREE, 2005). This definition reflects a recognition of mental health as a phenomenon that involves the dynamic interplay of emotions, relationships, and learning. It is a fundamentally positive definition because it is not about the absence of problems or symptoms but rather the presence and ongoing development of capacities.

While this definition emphasizes emotions, the field of infant mental health recognizes that in order to manage and express the full range of emotions it is necessary to coordinate thoughts, feelings, behavior and physiology, in response to ever-changing relationships, environments, and emerging capacities (Lillas & Turnbull, 2009). This is referred to as “self-regulation” or “self-organization” of one’s internal experience.

Infant mental health recognizes that human beings do not come into the world with the capacity to self-regulate. Rather, this is a capacity that develops over time through co-regulation with caregivers—particularly primary caregivers—beginning with everyday, moment-to-moment “micro-exchanges” between the baby and caregiver across various situations, as the caregiver attends to, understands, and responds to signals from the baby. Caregivers are encouraged to “follow the lead” of the infant—to promote the baby’s developing capacity to regulate through emotional attunement and communication, reflective dialogue and meaning-making, and an ongoing process of relational rupture and repair. Caregivers’ capacity to organize their own internal experience affects their ability and availability to co-regulate with the infant, and vice versa, which means self-organization as the core capacity of mental health is fundamentally relational and networked (Cooper, Hoffman, Powell, & Marvin, 2005; Siegel, 1999).

Patterns of thought, feeling, behavior and physiology emerge in response to one’s internal experience, to the presence and behaviors of others, and to changes—including stressors—in the environment (Tronik & Beeghly, 2011). As the baby’s network of attuned and responsive relationships expands, s/he develops “reflective function,” the ability to make sense of the mental states and motivations of self and others (Fonagy, Gergely, Jurist, & Target, 2002). Mental capacities emerge such as response flexibility, empathy, and a sense of self (Siegel, 1999). This also promotes the experience of mental health as defined by Alan Schore: “an intuitive sense of emotional security” that “comes from the inner, not necessarily conscious knowledge that during times of stress, one can cope, either by autoregulation or going to others for interactive regulation (Schore, 2001, p. 4).”

As babies explore their environments together with their caregivers and others and share in experiences of mutual curiosity, discovery and delight, these experiences elicit a range of feelings, contributes to the strengthening of relationships, and facilitates learning in all domains (Gopnik, Meltzoff, & Kuhl, 1999). Then as babies develop new capacities this fundamentally changes how they experience themselves, others and their environment, and as everyone responds and adapts to the newly emerging capacities of the baby, the environment itself changes. The baby, those around him or her, and the world they share transforms.
The emergence of mental health is particularly clear during infancy because this is the earliest stage of life; however, the processes identified continue throughout the lifespan. Although the infant mental health field is often simplified to the core messages of “the early years matter” and “invest early or pay the price later” (Too Small to Fail, 2013; Children’s Defense Fund, 2013), the emphasis on continual self-organization in and through relational networks across ever-changing environments over the fast-paced course of development is perhaps the greatest contribution of infant mental health to the broader field of mental health. When the orientation is extended to communities, such that people of all ages in a given network or geography are understood as continually self- and co-organizing their thoughts, feelings, behaviors and physiology, across changing environments and over time, this offers a psychologically elegant conceptualization of communities as human complex adaptive systems, and a way of understanding community mental health as a collective phenomenon.

**Integrating Complexity and Infant Mental Health**

Although complexity and infant mental health emerged from different fields of study with an initial emphasis on systems at different scales, there are striking parallels between the two orientations. Both recognize self-organization as the core process of healthy development and well-being. Both emphasize the agency of individuals while simultaneously recognizing that individuals are in relationship and interaction with others and mutually influencing one another through ever-changing constellations of decisions and actions. Both orientations appreciate that the environment is not merely “context” that impacts individuals, but that individuals also influence their environments, such that they co-evolve over time. Both also recognize change as a process of transformation, whereby altogether new states emerge through phase transitions that are nonlinear, rather than through steady progression.

While there are many parallels, these two orientations can enrich and inform one another as well. Infant mental health has articulated a detailed description of the positive state of mental health as it emerges in the earliest stages of life, which can be further understood through complexity as an emergent phenomenon in human complex systems manifesting within individuals, dyads, families, neighborhoods and communities. The infant mental health field also has illuminated the interpersonal and relational processes and dynamics that are associated with the development of self-organization. These insights can be extended beyond the infant-caregiver dyad to further clarify dynamics in the networks of relationships that comprise and generate change in broader systems and whole communities. The ways in which self-organization and relationship are linked to ongoing processes of learning are also detailed in the infant mental health field, and the concept of reflective function could greatly deepen understanding of thriving in human complex systems.

By emphasizing the autonomy of agents to make decisions and take action, complexity reinforces the notion that a person—even as young as an infant—is an active agent in his or her own development, with the capacity to be a significant changemaker in the systems and communities of which s/he is a part. Complexity also elaborates on the mutual influence of agents and the environment, which suggests new ways of paying attention to how individuals—even very young individuals—affect their surroundings. Finally, complexity recognizes that when transformation happens, change “catches and spreads” across scales, so it may be worthwhile to look beyond the primary system of focus to capitalize on opportunities to bring about positive change.

These are powerful concepts when applied to community mental health. They suggest ways in which people are interdependent in influencing the mental health and well-being of themselves and others, especially those who are in closest proximity. This happens through everyday interactions rather than through expert directed and controlled processes, so the shared space of the neighborhood is particularly relevant as an environment where natural and frequent interactions are possible. Connections across scales—from individuals to families to blocks to neighborhoods to cities to counties—create opportunities for changes to scale out or scale in, such that transformation of communities can be realized.

**A Real-World Application: The Central-Cocoanut Neighborhood**

In Sarasota, Florida, efforts have been occurring over the past five years to develop an approach that combines the concepts of infant mental health and complexity for the sake of community change. By following the lead of babies and young children in the Central-Cocoanut neighborhood, residents and other community members are discovering ways to become more attuned, responsive and synchronized to promote the mental health and well-being of kids, the neighborhood, and the broader community.

To give readers a sense of the Central-Cocoanut neighborhood, this is a 0.4 square mile neighborhood of 47 blocks and 2100 people located in Sarasota, a city of 52,000 people on the Gulf of Mexico in southwest Florida. Over 300 residents of Central-Cocoanut are young children, of whom almost 200 are up to five years of age. The neighborhood is racially and ethnically diverse: over 50% of residents identify as Black/African-
American, 40-45% as White, and 10-15% as Hispanic/Latino. The dominant cultural identity of the neighborhood is Black/African-American and this is the identity of over 70% of children living in Central-Cocoaanut. These demographics make the neighborhood distinctive in Sarasota, where the vast majority of residents are older adults and most identify as White.

This is also a place where many residents face significant economic challenges, in a city that is relatively wealthy. The median family income in the neighborhood is $26,000, which is half the median income for all families living in the City of Sarasota. It is a neighborhood where both child and adult residents express a desire to stay in the neighborhood, yet families often move due to poor housing conditions. Central-Cocoaanut is also a neighborhood where children demonstrate that they are curious and hard-working, with a love of learning, yet less than one third are reading on grade level by third grade, compared to over 90% in other nearby neighborhoods, in a school district that prides itself on providing high quality education.

Many comprehensive community change efforts are initiated by professionals and formal institutions such as social service agencies or networks, schools, local governments or philanthropies—often by issuing calls for transformation at the city, county or regional scale, and then fortifying a designated “impoverished” area with programs and services intended to address unmet needs. In Sarasota the beginning was different; efforts were initiated by neighbors watching and listening to babies and young children, with a desire to bring their shared neighborhood into focus in order to delight in it together.

It started five years ago on 15th Street when serendipitously a number of families with children moved in, including three families with babies. A new neighbor who was a clinical child psychologist and systems change practitioner by training (this author) had recently moved onto the block as well. Out of a personal desire to become connected and attached as a neighbor, this author started spending time on the block with babies and young children, watching, listening and responding to how kids experienced and contributed to the rhythms of everyday life.

Soon it became apparent that in Central-Cocoaanut, babies were often making the most of the neighborhood as a zone for exploration, learning and joyfulness in natural, every day ways. Sometimes it was by tagging along with older siblings, cousins and neighbors to play in each other’s living rooms, kitchens, yards or at the park. Sometimes it was by tagging after birds, lizards and neighborhood pups. Sometimes it was by trying out new skills to “keep up with the big kids,” and sometimes it was just by being present in the emotional vibrancy of the lived experience on the block. In Central-Cocoaanut many parents are comfortable giving young children the freedom to explore beyond their own home without being accompanied by parents, and also affording young children the opportunity to look out for their baby brothers, sisters and cousins. This makes it possible for babies and kids to self-organize their experience together on the block, with minimal direction or constraints set by adults.

Unlike schools or other formal settings, children in Central-Cocoaanut do not organize themselves by age group; instead, babies and children of all ages experience the neighborhood together. Often it is 6-, 7- or 8-year-old children rather than adults who are tuning into babies, as fellow neighbors, finding ways to amplify their delight and soothe their distress as they participate jointly in the activities of daily life. Often young children are the ones narrating the story of shared experience as it is happening, as they notice and comment on the signals babies are giving to communicate how they are responding. In these ways, mental health emerges moment-to-moment on the block.

Soon this author found herself seeking ways to reflect back to the children what she was witnessing. Emotions, relationships and experiences were chronicled by the author and kids together, both through real-time commentary while participating in life on the block and through photos, stories, and blog posts. A coherent narrative of neighborliness began to emerge from these shared experiences and reflections.

By the next summer, “neighborhood scavenger hunting” was invented as a way of harnessing kids’ everyday neighborliness. Each week, a small group of children gathered with the intention of setting out to explore the neighborhood together on foot, scooter or bike, typically accompanied by one or several babies in strollers as well. The kids identified supplies to take along to aid in their explorations: binoculars and magnifying glasses, cameras and video recorders, notebooks and drawing pads, hula hoops, super balls, and dog treats, to name a few. They determined the route and where to stop along the way, fueling their curiosity on their own terms. As they meandered throughout the neighborhood, often for two hours or more, they chatted with fellow neighbors, visited local businesses, raised questions and shared knowledge, buzzed with enthusiasm and recorded their discoveries of anything they found to be remarkable. Given that summer in Florida is intensely hot and humid, the adventures required endurance too, and kids were often revealing character strengths like grit, adaptability, and cooperation as they self-organized to experience the neighborhood. By the end of the summer fifty kids had participated, and as the tradition has continued over the
past five summers over 150 kids in Central-Cocoaunt have become involved.

By following the lead of kids who were taking seriously their identity as neighbors, this summertime activity turned into a playful yet rigorous approach to community-building and asset-mapping. In the “post-season” adult neighbors and members of the broader community were invited to “neighborkid dinners” hosted in neighbors’ homes, to review asset inventories of the neighborhood presented through the perspectives of the children, augmented with aggregate data from the U.S. Census, the school district, the police department and other sources to generate a coherent profile of the neighborhood. Neighbors reflected together on the information and discussed implications for the well-being of neighborkids and the neighborhood as a whole. In keeping with Asset-Based Community Development (Kretzmann & McKnight, 1993), the question was not, “What can others do for us?” but rather “What can we do as neighbors?” The question was posed both to kids about themselves and each other and to adults, and the discussion was initiated and facilitated by fellow neighbors rather than people who are external to the neighborhood. The purpose was not to identify actions that everyone then must agree to carry out together, but rather for each person to become more aware of their capacity to take action, so that they might be more likely to contribute according to their own preferences and capacities. The notion was that once neighbors responded, it would become possible for others beyond the neighborhood—including professionals and agencies—to synchronize their decisions and actions with the efforts of neighbors.

While some people were drawn to dinners and other small and large group gatherings to reflect and deliberate, many did not choose to participate in these ways, making apparent the need for other ways of circulating information and heightening awareness of ways to become attuned and responsive throughout the neighborhood. “ExuberNews” was launched as a monthly neighborhood newsletter, featuring and delivered by neighborkids. This included updates on the efforts and capacities of children and other neighbors as they were manifesting on the block, augmented with community data and framed in relation to community change. Events and projects specific to the neighborhood were also developed in response to the discoveries and interests of the children, creating a variety of opportunities for neighbors and other community members to connect with one another and follow the lead of kids in Central-Cocoaunt. Activities included celebrating local civil rights history, entering (and sometimes winning) contests together, and participating in the progressive makeover of a neighborhood park. On each occasion news releases featuring the neighborkids were sent out to the local media, with television and newspaper coverage harnessed as another way of spreading the word of the changes that children and fellow neighbors were leading and experiencing.

A Story of Cross-Scale Community Change

Over time efforts on the block have become increasingly recognized as opportunities to create a neighborhood environment where it is the norm to tune in and respond to circumstances as they happen, with babies and young children contributing as active agents in any given response. Here is a brief story to communicate what that looks like:

One day after school a few neighborkids dropped by this author’s house to chat and have some tea. Eight-year-old Da’Sean helped his baby sister up onto the couch to sit beside him and then picked up the newspaper and started reading the front-page story, which described an accident that occurred in a nearby public housing development. The story explained that while a six-year-old boy was playing outside in the courtyard at his grandmother’s apartment complex, he came upon an electrical transformer box that was not properly locked. When he explored the box he got shocked with even more electricity than a person would receive if they were in the electric chair.

Immediately Da’Sean and his sisters expressed concern about the boy, and as they continued to read the article they learned that this was not the first time a child got injured at this transformer box; back in the 1970’s, a 4-year-old boy was hurt the same way. When their father came over to let them know it was time for dinner, he listened as the kids shared the story; to their surprise, he told them that the boy who was injured back in the 70’s was actually their uncle. This knowledge made the whole situation feel that much more personally relevant to everyone.

To let the six-year-old who got hurt know they were thinking of him, the kids decided to make a huge neighborhood card. Word spread on the block, and soon ten kids were crowded around the kitchen table working on it together. After they all decorated and signed it, the kids took it around the neighborhood and others—both children and adults—signed it too. This is when they found out that another neighbor was actually the boy’s cousin. She told the kids that when they finished gathering signatures on the card, she would take it to their next family gathering to deliver to the boy in person.

Later that week neighborkids explored the neighborhood block-by-block to identify anything that looked like it might be an electric transformer box, in order to check with Florida Power & Light to make sure all the boxes were safe so that no one else would get shocked when...
they were exploring. They took photographs of all boxes they thought looked like transformers and when they got home they emailed the pictures to the electric company with a message asking for their help determining which of these were actually electric boxes, in order to check whether all were tested and cleared for safety. An update was posted on a neighborhood blog and the link was then emailed to individuals in local schools, organizations and government to help spread the word about the situation and the response the kids were leading.

Over time, similar cross-scale responses occurred in relation to various positive and negative circumstances associated with the mental health and well-being of kids and the neighborhood: the birth of a baby, a burned down house, a neighborhood award, a shooting, to name a few. Each time, an effort was made to promote and chronicle the ways that kids and fellow neighbors tuned in and responded to the experience of one another, with people in groups and organizations beyond the neighborhood then alerted so that they too could become attuned and responsive. In neighbor-centric ways, efforts to become optimally self-organized as a broader community continued.

Sarasota Community Studio

In January, 2013 a new phase of the resident-led efforts began. In response to four years of everyday community-building by neighborkids, residents established Sarasota Community Studio as a non-profit organization in a converted warehouse in Central-Cocoaanut. It is a hub where neighbors come together to invent powerful approaches to community change and it is home to a “next generation” place-based initiative.

Place-based initiatives are comprehensive community change efforts that have been developing throughout the United States over the past two decades. They aim to bring about the overall thriving of all individuals and families in a designated neighborhood or geographically-defined community by ensuring that resources are relevant, sufficient, high-quality and well-connected, in order to improve physical, social and economic well-being and associated conditions. Residents are central to the change process, and community-building is critically important in addition to programs/services, policy/systems coordination, and data/evaluation to bring about comprehensive well-being (Kubish, Auspos, Brown, & Dewar, 2010b).

The most promising examples today are referred to as “next-generation” place-based efforts, building upon lessons learned since the 1990s, with greater attention paid to issues such as: following the lead of residents as primary changemakers, addressing community power imbalances, promoting economic improvements without causing gentrification that forces current neighbors out due to rising housing costs and cultural bulldozing, and integrating place-based change with broad-scale systems reform (Kubisch, et al., 2010a).

The place-based initiative launched in Central-Cocoaanut is unique in that it is established, funded and led by residents who proclaim, “We aim to be the first neighborhood where every child and the whole neighborhood are thriving because together we are following the lead of neighborkids” (Sarasota Community Studio, 2014, “Home,” para. 1). Thriving is defined in accordance with the wisdom expressed by neighborkids over the past five years: in terms of all children who live in Central-Cocoaanut being happy and emotionally grounded, in loving relationships, learning, and contributing in a neighborhood where community well-being is reflected in housing, economics, social justice and the overall vibe.

The Studio itself is an open space with designated zones to reflect and promote the experience of kids and fellow residents as neighbors. Wall-sized bulletin boards and postcard racks feature hundreds of photos reflecting the latest efforts in the neighborhood. A “map gallery” links this lived experience with aggregate data to make neighborhood-scale patterns of well-being visible. A workbench area surrounded by whiteboard walls is available to work together across ages in constructive ways, while a “living room” area furnished with couches and equipped with a projector and screen enable small group discussions and large group deliberations.

Since January 2013, residents of Central-Cocoaanut have been teaming up with neighborkids to create a state of readiness for the place-based initiative through efforts in four domains: community-building, community data, “talent development” and communication/systems coordination. So far activities have included developing a neighborhood data profile, launching neighborhood reading and housing initiatives, championing social justice, hosting celebrations for the sake of continued community-building, and establishing a “neighborkid talent squad” to strengthen home-neighborhood-school connections for the sake of children’s learning. Recently the broader community was invited to join neighbors in getting ready for the Central-Cocoaanut place-based initiative as well by strengthening collaborative relationships with individual neighborkids and contributing agency-specific data for the neighborhood profile. The Studio is open two afternoons each week for kids to continue initiating and leading efforts in each domain while adult neighbors work throughout the week to advance the work, and the ongoing contributions and perspective of neighborkids on the block are central and featured in all activities.

Neighbors are choosing to follow the lead of neighborkids in these efforts because children –
particularly babies and young children -- are now recognized as talented community changemakers due to their natural inclination to be curious, playful, social, joyful, story-telling, and boundary-crossing—the essential qualities not only of great neighbors, but also of social innovators. As neighbors come together around the talents and efforts of neighborkids, the mental health of children and residents of all ages is promoted by affirming and activating strengths, resonating with and reflecting emotional states, fueling curiosity, and strengthening relationships. This also makes it possible to better cope with stress and to develop personal strengths in order to be successful even in the face of chronic hardships. In these ways, the thriving of children and the neighborhood as a whole are expected to emerge, which in turn will generate knowledge, resources and hope that can be extended to the broader Sarasota.

It is worth noting that this community change initiative is currently limited to the 47 blocks of Central-Cocoanut due to a belief that this represents an optimal scale and geography to begin. Similar initiatives often address an area that is much larger than a single neighborhood, or is determined by boundaries that do not reflect the way residents naturally connect with one another, such as zip codes, census tracts or school attendance zones. When residents are not within walking distance of one another or are not likely to encounter one another "on the block" for other reasons, this diminishes the capacity to connect as fellow neighbors and genuinely self-organize as a neighborhood. In order to remain resident-initiated and led, the place-based efforts of Central-Cocoanut remain focused on the hyperlocal community.

This brief description has been provided to illustrate the ways in which infant mental health and complexity are being integrated and applied in Central-Cocoanut. The efforts seek to promote self-organizing in order to bring about the thriving of individuals, the neighborhood, and ultimately the broader community. Residents – especially children – are encouraged to take up agency as neighbors, both to promote their (our) own self-organizing and to affect community change at the neighborhood scale. The network of relationships is strengthened, particularly among neighbors, through increased opportunities to be and do together "on the block," with the intention of becoming more attuned and responsive by following the lead of neighborkids. Care is taken to repair relationships when ruptures occur – both in relationships among neighbors and in relationships with people and groups beyond the neighborhood. Reflective dialogue is promoted by creating and sharing thousands of photos and stories of everyday neighborhood experiences, along with visualizations of “big data” specific to Central-Cocoanut, in the context of Sarasota and Florida. The 47-block area of the neighborhood is taken seriously as an environment for exploration, discovery, connection, and learning, and as a critical dimension of the neighborhood system that both affects and can be affected by neighbors. Data efforts are underway to spot and track signs of the mental health and well-being emerging at the neighborhood scale. These are the ways that neighbors are seeking to bring about the transformation of the place where they (we) live, for the thriving of all.

**Implications for Community Mental Health**

Complexity and infant mental health when combined generate a reconceptualization of community mental health, with implications for the field. They offer a definition in terms of dynamic mental capacities, rather than emphasizing the absence of mental illness. They also provide a plausible theoretical rationale for the emergence of collective mental health and thriving through social networks, particularly at the neighborhood scale.

When individuals are viewed as primary agents of change in promoting their own mental health and the significance of place is also recognized, then the critical importance of the neighbor identity becomes evident. How might collective mental health be more optimally promoted if professionals in the field of community mental health were to re-orient their efforts to follow the lead of neighbors in the communities where they work? How much greater a contribution would be possible if every community psychologist were to take up their identity as neighbor in the place where they live, in addition to their identity as professional?

When babies and young children are acknowledged as primary change agents this has implications for the work of community psychologists as well. Children can offer perspective, make decisions and lead action in ways that adults often cannot, especially when children are recognized as neighbors. Coming together around kids provides ways to strengthen local networks of relationship and cultivate attuned responsiveness, and is also less likely to be politicized or controversial than other community change approaches. When and how are child-oriented opportunities facilitated?

When the neighborhood is taken seriously as a social system and environment, this has implications for interventions as well. When might it make more sense for interventions to occur on the block, rather than in schools, churches, libraries, social service agencies or community centers? How is the neighborhood environment addressed so that every aspect and feature promotes the mental health and well-being of residents?

Finally, when we understand transformation through the theories of complexity and infant mental health and hope to realize the thriving of all individuals, families, neighborhoods and the whole community, this has
implications for how we measure efforts and change. How are efforts connected and mutually influencing one another? How are they continuously adapting in response to changes at multiple scales, both intended and unanticipated? How are tiny initiating events being noticed and capitalized upon for the sake of transformation? These questions illuminate the need for increasingly sophisticated approaches to evaluation, which are already developing (Westley, Zimmerman & Patton, 2006; Agar, 2007), but will require significantly more support for implementation.

Opportunities for individuals to transform their own community, and their personal experience of well-being within their community, become more possible when the principles of complexity and infant mental health are combined and applied, especially when the focus is on neighborhoods. Community mental health could embrace these insights to redefine the central purpose of the field: To cultivate the capacity of every community member to be continually attuned and responsive—to self, to others, and to the ever-changing environment—in order for whole communities to become self-organized and thrive. Is this field ready too?

References
Kretzmann, J., & McKnight, J. (1993). Building communities from the inside out: A path toward finding and mobilizing a community's assets. Evanston, IL: Institute for Policy Research.


