



## A Value Proposition for Community Psychology

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### Author Note

We wish to thank John Volturo of the Atlantic Health System in New Jersey for his assistance in the preparation and data analysis of the Value Proposition survey.

I am Bill Neigher, a community psychologist who specializes in health and human services planning, program development and evaluation. I have worked in these areas with very large and complex organizations like the UN, NIMH and the U.S. Senate, to very small social service agencies. While I also teach and consult, my employment base is a large integrated health care system in New Jersey, the Atlantic Health System, where I direct planning and system development [www.atlantichealth.org](http://www.atlantichealth.org).

Dan Fishman and I wrote an article for *The American Psychologist* entitled "American Psychology in the 80's: who will buy?" It asked the question: is there a "paying customer" out there for our services, absent government and grantor subsidy in hard times. [Fishman and Neigher, 1982].

We quoted Representative Barbara Mikulski [D-Md] from these 1979 remarks:

"Not one rummy has been taken off of Baltimore streets by this research. Not one drunken husband has been dissuaded from beating his wife or one drunken mother from beating her child. These research projects are like exotic, expensively mounted butterfly collections, hidden away in vaults and only exhumed from time to time to display to other collectors of the rare and unusual in reaffirmation of their elite status." [Neigher and Fishman, 1982, p 533.]

But of course she was talking about other social scientists, not us. Right? We are community psychologists, and whether we work in academic or applied settings we are relevant. We earn our public "keep" and society's respect for the value we add to community science. There are "paying customers" out there today for ourselves and our students, and there will be a continued demand for our skills and competencies well into the future. Right again? Or maybe we are not so sure.

That was the part of the motivation for our ongoing work with the *Value Proposition for Community Psychology*, initiated under the watch of Mo Elias when he was SCRA president. Developed with the SCRA Practice Council, it "makes the differentiated business case" for employers to hire us. What distinguishes us in that big stack of resumes? Is it the 17 *skills and competencies* we say we have and practice, the *context in community science* we have for putting them together, or the *values* that underscore what we do?

[You will find the complete Value Proposition statement on the link below to the SCRA website, and can download it as a pdf:

[http://www.scra27.org/practice/documents/value\\_propositionpdf](http://www.scra27.org/practice/documents/value_propositionpdf)

This morning our panelists will explore those issues from five different perspectives. I will introduce them and their backgrounds as we begin what we hope will be a very interactive session.

**Part I: A Value Proposition for Community Psychology**

***INTRODUCING COMMUNITY PSYCHOLOGY***

A ***distinctive approach*** to understanding and solving community, organizational, and societal problems.

We apply ***well-established psychological principles and techniques***, tested and proven in practice, to improve well-being and effectiveness at individual, organizational, and community levels.

We do so with an ***explicit concern*** for social justice, inclusiveness and participation, the value of diversity, collaboration, prevention, and a focus on strengths.



A value proposition first must define who we are as a discipline, how we go about our trade [profession], the tools we use, and the values that provide context. Our audience is not each other [our “choir;”] it speaks rather to potential consumers or purchasers of our services who may not know anything about us. And it must also differentiate us from similar groups, speaking directly to distinctive economic and market value. Introducing our field is presented in the three attributes above.

“What we do” is described below in the context of sustainable change:

## *What do Community Psychologists Do?*

- Work collaboratively with others to help strengthen delivery systems,
- Provide cost-effective services,
- Increase access to resources,
- Optimize quality for individuals, private and governmental organizations, corporations, and community groups.

Community Psychologists **build on existing strengths** of people, organizations, and communities to create sustainable change.



We need as much specificity as possible, and in the table below we define the types of jobs we hold and the employment sectors where we work.

## *What do Community Psychologists Do?*

### **Community Psychologists work as...**

Consultants	Service coordinators
Educators	Evaluators
Grant Writers	Planners
Professors	Trainers
Human Service Managers	Team Leaders
Program Directors	Researchers
Policy Developers	

**Community psychologists work in all sectors including government, for profit and non-profit organizations.**



Our skills and competencies come next, and the list in the next three illustrations builds on the work of other community psychology surveys and a lengthy debate over months on the Practice Council calls and emails.

Note please the insertion of the adjective “most” before the list of bullet points. It was clear from early survey results that Al Ratcliffe will address shortly that we all do not see our proficiency as “expert/instructor” in these areas, may not have had much, or formal training in them, or frequently use the skills in practice.

## *What do Community Psychologists Do?*

*In addition to a solid grounding in the science of psychology, most Community Psychologists can:*

- **Locate, evaluate, and apply information** from diverse information sources to new situations.
- **Incorporate psychological, ecological, and systems level understanding** into community development processes.
- **Contribute to organizational decision-making** as part of a collaborative effort.
- **Evaluate programs/services:** Develop evaluation designs. Collect, analyze, report, and interpret evaluation data.



## *What do Community Psychologists Do?*

- **Plan and conduct community-based applied research.**
- **Translate policy into community and organizational plans and programs** with observable outcomes.
- **Provide leadership,** supervisory, and mentoring skills by organizing, directing, and managing services offered.
- **Communicate effectively** in both technical and lay language with diverse stakeholder groups.



## *What do Community Psychologists Do?*

- **Build and maintain collaborations** with a network of clients, communities, organizations, and other involved professions. Negotiate and mediate between different stakeholder groups around a particular issue.
- **Demonstrate and teach** cultural competence and other key relationship skills to a wide range of constituencies.
- **Develop social marketing** and other media-based campaigns.



We address workplace settings next, both current and those where we believe we can add value in the future:

## *Where do Community Psychologists Work?*

- Academic settings.
- Foundations.
- Health and human service agencies.
- Education Systems.
- Community development, architectural, planning, and environmental organizations.
- Corporations, for-profit and non-profit organizations.
- Government systems – legislative and executive branches.
- Research centers, consulting groups, evaluation firms.
- Community-based organizations, advocacy groups, religious institutions, and neighborhood groups.
- Public policy and community planning and development organizations.



And now to the “value” part; why should an employer hire one of us, and how is our value distinctive from others with a similar set of skills, competencies and values [i.e., public health]?

### *How Do Community Psychologists Add Distinctive Value?*

By combining psychological science with knowledge of community and social systems through an **ecological approach**.

We have the **implementation skills** to put theory, research, policy, and strategy into action in challenging and divergent settings.

We bring a **unique psychological understanding** of margin and mission to your own organization and to the constituencies who are your customers, suppliers, and strategic partners.

We are adaptive, **values-based professionals**.

We are well equipped by training to blend our skill sets with those of other professions, and to **work collaboratively** toward systems and community improvement.



Now that we have exposed you to this “value proposition,” almost two years in debate and more than a dozen revisions, we turn to the “proof of concept” question. As one colleague of mine challenged, “is this actual or aspirational?” Fair question. Do we as community psychologists actually have these skills, sufficient training, use them in practice, and see ourselves as highly proficient? We surveyed the SCRA membership to find out. Al Ratcliffe is our presenter for this next section.

Al Ratcliffe has practiced community psychology for 40 years in Tacoma and Pierce County, WA. He has focused upon human service systems improvements, strengthening services available to homeless persons and persons living with mental illness, and advocacy for improved public policies. Al has served on the Tacoma Landmarks Preservation Commission. He is a current member of the Tacoma Human Services Commission, the Mental Health Advisory Board regarding community-based mental health services throughout Pierce County; and he was recently elected Chairperson of the HUD-mandated Homeless Continuum of Care Work Group for Pierce County.

## **Part II: Testing the Value Proposition: Initial Survey Results**

## Issues

We were interested in three major questions:

- **What skill sets do responding community psychologists actually use in community practice?**
- **What academic training did they receive in each skill set?**
- **How do respondents rate their own current proficiency in each skill set?**

We used Survey Monkey to facilitate the process for users, and to make the analysis easier on us. The sample demographics are described below, and can be seen as representative of the SCRA membership as a whole. Next is a summary of workplace settings. Keeping in mind that respondents could select more than one worksite, we split about equally in our sample between community-based organizations, non-profits and academia [about a third each] with government agencies coming in next.

## Respondent Demographics

- 146 Respondents
- Sample representative of SCRA membership in terms of **AGE**
- **Gender:** Sample over represents Males
  - SCRA membership is 34% Male while respondents were 44% Male
- **Ethnicity:** 28% reported non-Caucasian backgrounds
- **Highest Degree:** 74% PhD or PsyD, 21% Masters
  - Majority come from stand-alone Community Psychology programs (43%) followed by Community-Clinical Programs (19%)
- **Year of Highest Degree:** Average 1997. The median year was 2001.

## Work Settings

We asked respondents to identify the settings in which they practice community psychology. Very roughly categorized, they include:

<b>Community based organizations</b>	42
<b>Nonprofit organizations</b>	46
Board members	7
Mental health service settings	5
Rehabilitation centers	2
<b>Academia</b>	47
Consulting groups	2
Hospital systems	7
School settings	19
For-profit organizations	6
Government agencies – all levels	29
Law enforcement - criminal justice	4
Public health settings	7
Foundations	1

Note that the respondents could list more than one setting.

The survey asked respondents to rate each of the 17 skills and competencies in three areas:

1. How often do you use this skill in practice?
2. What academic training have you received?
3. How would you define your current level of proficiency?

A “high level” summary analysis follows next:

14

## Frequency

What do we DO most frequently?	What were we TAUGHT most frequently?
Locate, Evaluate and Apply Information	Community-based Applied Research
Community-based applied research	Community Assessment and Program Evaluation
Community Assessment and Program Evaluation	Ecological, Systems, and Community Understanding
Ecological, Systems and Community-level understanding	Intervention and Program Planning and Development
Build and Maintain Collaborations	

- Discrepancies between the columns
  - Where do we learn skills?
- No main effect of age

15

### Frequency

What do we do LEAST frequently?	What were taught LEAST frequently?
Capacity Building	Organizational Assessment, Development, and Consultation
Resource Development	Small and Large Group Processes
Service Delivery, Planning & Management	Disseminating Information, Communication
Community Organizing	Capacity Building
Political Advocacy	Build and Maintain Coalitions
	Community Organizing Skills

In the first table we note what we do and were taught most frequently; in the second we looked at the obverse—what we do and learned the least about, in the context of formal training. As a sample our respondents look at information, and perform applied community-based research and needs assessment. At the other end of the continuum, community organizing and political advocacy are among the least frequently used. To create meaningful, sustainable second-order change, a basic goal of our activities at the highest level of ecological perspective, our members may be less able to support this goal in practice. As one of the SCRA presidential stream initiatives over three years is to “impact policy”, we may need training or consulting in the field of practice to support this goal.

Our next area of inquiry was self-report of proficiency with these skills; note below the six areas where we see ourselves as strongest, and the relationship to age. The examples of “least proficient” also mirror the findings above on frequency of use. Thus the relational question of whether we feel proficient because we use and practice our skills, or the corollary that skills least practiced reflect our lack of confidence in them.

16

### Proficiency

In what do we rate ourselves MOST proficient?	In what do we rate ourselves LEAST proficient ?
Locate, Evaluate and Apply Information	Resource Development
Ecological, Systems & Community Level Understanding	Service Delivery Planning & Management
Disseminating Information, Communication	Political Advocacy
Intervention, Program Planning and Development	Community Organizing
Community-based Applied Research	
Leadership, Supervisory and Mentoring	

- **Main effect of age:** Trend: Perceived proficiency goes up as age goes up. Some skills peak around 50-59 years old
- **Exceptions:** Systems and community-based understanding and Professional Practice Ethics

## Relationship of Frequency and Proficiency

- Significantly related for all skills; directionality unclear
- R<sup>2</sup> values range from .16 to .65 by skill

Lastly we look at where we got our training if not through formal coursework. From the summary table below “on the job training” is by far our most cited way of learning. The need for continuing professional education, the debate over licensing or certification requirement for community psychology, and the “brand promise” that our workforce has the skills we describe in the Value Proposition are all current topics of debate and discussion.

## If not taught, where learned?

Setting/Experience	Frequency of Response
<b>Work experiences – various</b>	<b>28</b>
Informal networking	1
Workshops, conferences	3
<b>Knowing/learning community history &amp; culture</b>	<b>4</b>
Practicum	1
Learning from colleagues of other disciplines	2
<b>Professional reading</b>	<b>4</b>
<b>Graduate courses</b>	<b>4</b>
<b>Mentors</b>	<b>4</b>
Volunteer work	3
Consulting experiences	3
<b>Assistanceship experiences</b>	<b>4</b>
Interactions with others	3
Teaching	2
Exposure to experiences (undefined)	1
Developed over time	1

## Discussion

- The findings generated from Community Psychology Value Proposition Survey respondents tend to support the hypothesis that graduate training most consistently prepares community psychologists to engage in community-oriented research and evaluation.
- Community psychologists interested in active participation in community development and implementation receive less consistent training across the range of academic institutions. Community psychologists interested in political advocacy and community organization received relevant training much less frequently.
- The data also indicate that community psychology practitioners tend to use their community development and implementation skills less frequently, although they rate their own proficiency as at least average in most of the listed skill sets. Again, the two obvious exceptions are political advocacy and community organization skills.

Where do we go from here? Here are four specific questions that can help shape this debate:

## Questions

- Do the academic settings train in key skills that most practitioners actually use, or are most practitioners constrained by their trainers' primary focus on community research and evaluation?
- Are practitioners raising straw men/straw women, or are trainers disconnected from grass roots community practice needs?
- Are there subcategories of practice within community psychology, or should persons interested in community development and implementation seek training in social work or other professional disciplines with overlapping goals/values?
- If the latter, should that training be linked to the overall community psychology curriculum via interdepartmental offerings, or be obtained in entirely unconnected "silos?"

Hopefully, those discussions will focus on future improvements rather than on past inconsistencies.

Consistent with the questions here are the roles of training and continuing education, not just for the field as we *currently* teach, do research and practice, but for the *future* needs of communities and employment settings. One of those settings, academia, gives Maurice Elias, an SCRA past-President a context for his remarks. It was during Mo's term in office that the work on the Value Proposition was launched.

## **Part III: An Academic Perspective**

### **The Need for a Values-Added Proposition to Create a Connected Field of Community Psychologists**

I am Maurice (Mo) Elias, a community psychologist who specializes in school-based interventions focusing on social-emotional and character development and problem behavior prevention. I have just completed a 5-year project working with over 200 schools of all kinds in New Jersey where we developed procedures for school improvement through capacity building and empowerment of both students and staff. I am also Director of Clinical Training for the Rutgers University Ph.D. program and do a blog at [www.edutopia.org](http://www.edutopia.org).

The Value Proposition is about establishing an identity for the field of Community Psychology among the many fields of intellectual inquiry and practice that exist. Community Psychology and Community Psychologists have always prided ourselves on being “unstandardized,” unregulated, unlicensed. We never grappled with Lonnie Snowden's wisdom (1987), when he spoke of the peculiar success of community psychology as a discipline in which centripetal forces actually remove people from the community psychology field because our emphasis on context takes people into other fields—unlike other field that are built by centrifugal force, drawing people into a standard paradigm. Community psychologists often struggle with what seems to be a choice between being among community psychology colleagues but not immersed in their context of research, theory, and practice, or being apart from their community psychology colleagues out of respect for the community psychology principles of the importance of immersion in context.

The Value Proposition is not only about Value, it is about Values. It is Jim Kelly (1979)- “T'aint what we do, it's the way we do it.” That's what holds us together and that is what the Value Proposition articulates. It is a way of keeping community psychologists connected to a common core no matter where they are or what jobs they have. It may not seem rigorous to say this, but the uniqueness of our field is at least as strongly tied to our values as to our set of competencies. Further, it's about connecting our education of future community psychologists to an intellectual core and practice base for future employment. We need to expand our critical mass if we are going to be able to have a significant impact on the issues we care about most, in a systematic way. But we cannot expand with a constantly eroding base. Yet we can draw some solace from the insights of Malcolm Gladwell and understand that we can reach the tipping point of influence for our field without a huge increase in numbers. That said, Gladwell's work also makes it clear that without a certain critical mass, which we surely have not yet attained, we will not increase our influence on the larger psychology field, let alone wider spheres of societal influence.

This takes us back to the reality that we will have our most powerful influence by adding value to other fields, disciplines, and perspectives. First, I want to endorse the idea of the Value Proposition being the Value-Added Proposition. What we need to be articulating is how the community psychology perspective and skill set creates added value to other fields, positions, organizations, and approaches. Second, I want to reiterate my point that the community psychology field has a complex definition, rooted in the values of how we work and the unique combination of the values that undergird that work. We are an “AND” field, not an “or” field, and we embody Jim Kelly's principle of “t'ain't what you do, it's the way you do it” but in a complex way. That's why I think we may need value-added propositions that are tailored to specific contexts. The Appendix includes two examples of the Value Proposition explicitly tailored to illustrate the value-added proposition for Community Psychology for clinical and school psychology.

Third, I want to share my perspective about Academia being one of many community psychology practice contexts. Academia is certainly unique in that it is the practice context in which community psychology is relatively well defined (!! ) and the primary one for which there are clearly-defined, reasonable well-paying jobs. Not only that, people in academia have the easiest time “giving away” community psychology because they can work in non-paying or lower-paying contexts because their work is subsidized. Practicing community psychologists must charge for their work or find someone who will pay them while they work on behalf of those with few resources. For a

field that prides itself on not being tied to professionalization and professionals, and on the power of indigenous helpers and volunteers and community participation and collaboration, we have a hard time “selling” what we do. But the larger challenge is that generally people don’t want “community psychology.” They might want community research and action, consultation, and some of our many skilled services. But community psychology is not primary among them. When we get a chance to articulate how we work according to community psychology principles, people often realize we do indeed have something to offer.

The breadth of community psychology, the number of contexts in which its principles can be applied and the range of skills needed for effective application is one of the daunting aspects of creating a coherent Value Proposition. In articulating the competencies of a community psychologist, we are facing the reality that no graduate program can guarantee its students will possess all of these skills, as well as our knowledge that becoming a community psychologist is a developmental process.

But we are not the only field facing these concerns and I think we have some lessons to learn from school psychology and even clinical psychology. Both of these fields have master’s and doctoral level programs and both prepare practitioners. Both have skill sets that are as impossible as ours to provide to students within a graduation time frame, especially at the masters level. They get around this by requiring certain sets of training activities but do not put themselves in a position to claim that their programs are imparting a list of competencies. Certainly, these fields have lists of competencies required by their profession, but they avoid saying that these are competencies possessed by every professional. Further, they recognize that if programs are asked to declare what they are expecting with regard to the long lists of competencies, the result will be that much of the “training” will be to a level of familiarity or being a “novice” and not to “competency.”

One solution that occurs to me is that our field should strive to have master’s and doctoral programs talk about competency clusters, sets of skills that they emphasize and that become the “trademark” of their graduates, while also ensuring that they impart to the students a commitment to operating by the community psychology values. Otherwise we run the risk of having masters programs look like they are providing less adequate training. They will develop a “brand” and a procedure that will be transparent and accessible and for which the Council of Education Programs (CEP) within SCRA can help them through supportive feedback and evaluation for continuous improvement.

I think a lot of this logically leads to the SCRA Executive Committee needing to respond to a cry for help from our students. They want to be part of the SCRA field and family but know they must immerse themselves in the context of the communities/settings in which they want to have an impact. As community psychologist Roger Mitchell has said, it takes a long time to get the “reps” needed to understand settings and the configural relationships of relevant variables for change as the Tom Wolff’s of the world do. This comes from working with many organizations and a range of situations. I believe we can take a page from school and clinical psychology and suggest a year (at least) of post-graduate supervision/mentoring by an established community psychology practitioner as an additional credential to add value and ensure, to an employer, that they are getting more for their investment. In this, I am including academia as a practice context. It is not rare that academic community psychologists are hired into departments where there are no other, or perhaps very few, community psychologists and those that are there may well have become over-assimilated as a survival strategy and not be ideal mentors to stoke continued community psychology fervor. And we also have to find ways to foster networking of experienced professionals in similar contexts. Just as SCRA has focused on being the networking vehicle for academic community psychologists, historically, we need to continue the advances begun through the Practice Council and systematically and intentionally promote networking among those practicing community psychology in all contexts.

It behooves community psychology to redefine professional competence as something other than an individual variable. Competence in practice is a nested ecological and developmental process and it is our task as a field to be forward looking and create the support structures needed for our community psychology graduates and experienced professionals to practice synergistically.

So now that we are aligning community psychology education and practice, we need to take the next step and set up early career mentoring and ongoing professional networking. This will help keep our practitioners connected to the

SCRA core and allow our new professionals to be among and apart at the same time—a perfect Julian Rappaport solution.

Our next section is presented by Tom Wolff, Ph.D., a community psychologist committed to issues of social justice and building healthy communities through collaborative solutions. A nationally recognized consultant on coalition building and community development, Tom presently runs Tom Wolff & Associates. Consulting clients include federal, state, and local government agencies; foundations; hospitals; nonprofit organizations; professional associations; and grassroots groups.

## **Part IV: Community Practitioners and the Value Proposition**

### **What community psychology value do my clients receive?**

I have been asked to write about the Value Proposition from the perspective of a practicing community psychologist addressing two questions: How and why do my clients value my Community Psychology attributes, and what does the future hold?

In my recent book “Power of Collaborative Solutions” I note that the core principles of community psychology are the foundations of my work including a focus on: social justice, an ecological approach, the capacity to act locally and think globally, working on community building and community organizing, and finally employing my group process skills to foster collaborative solutions.

However, maybe the best answer to what my client’s value – is to look at who has hired me recently and why. A sample of my recent clients include:

The Boston Public Health Commission Center for Health Equity and Social Justice. This worked began with one of my specialties: namely, helping them address the issues of sustainability and their Boston REACH (Racial and Ethnic Approaches to Community Health) Coalition. The work evolved over time into more comprehensive community building and collaboration consultation for twelve sites working on health equity from a Social Determinants of Health viewpoint.

I am also a regular keynote speaker and trainer for many state leadership institutes including Wisconsin, Kansas, Massachusetts, and Illinois sponsored by local foundations, non profit associations, medical schools, and even the Extension Service. These organizations feel that coalition building and collaborative solutions are core skills for their communities’ emerging leaders.

Recently I have been asked to participate in more and more national webinars. Webinars are becoming increasingly popular because in times of short resources national organizations can pull together their constituencies and provide training without having all the participants incur travel expenses. Here again the topics are collaboration, community engagement and coalition building. Clients have included HHS’s Maternal Child Health programs, the CDC for numerous groups, and the American Pediatric Association.

Last year the Milwaukee Non-Profit Association and also the Mayor’s Office of the City of Racine Wisconsin invited me for keynotes and daylong workshops to promote collaboration in their community’s non profit sector.

A different kind of request that called on my community psychology skills was a large consultation contract with the Centers for Medicare Medicaid services focused on their fourteen End Stage Renal Disease Networks across the country. Here their need was to support these ESRD Networks in moving beyond their limited engagement with the communities around them and to engage more extensively and productively with other systems. For example, Dialysis Units require especially clean water systems, so in Montana we brought in the regional water administrators to meet with the ESRD staff together. It was fascinating. Dialysis patients cannot manage interruptions of care, so what about crises like Hurricane Katrina? Here we helped the Networks build partnerships with state emergency service systems and ESRD Networks and dialysis units. A successful marriage of odd couples.

My clients find me because they have heard about me and/or visited my website [www.tomwolff.com](http://www.tomwolff.com).

- They know that I have concrete identifiable skills, most notably – coalition building, collaboration, partnerships, community engagement, community and organizational development, non-profit management and sustainability.
- They understand that I have much experience in working with systems with multiple site coalitions.
- My ease with running large group processes is also an asset. Thus I was chosen to facilitate the development of the State Oral Health Plan in Massachusetts. At times this involved facilitating meetings with 90 stakeholders in a room creating a common vision.
- I bring a capacity to understand and deal with large systems from an ecological viewpoint. So as public health embraces a Social Determinants of Health perspective these skills are more valuable to them.
- Having been a non-profit manager and a social change activist I bring a perspective of social justice, taking action, getting results. This may be an acquired taste that not all clients are seeking.
- I have a national presence because for decades I have been giving away community- building materials through newsletters, workshops and now my web site [www.tomwolff.com](http://www.tomwolff.com). (Does giving away community psychology sound familiar?)

## What does the future hold?

Even in these hard economic times we find the Obama administration supporting many initiatives that focus on community collaboration and are based on community psychology principles. This is also true for the emerging models from the world of public health that focus on policy and systems change and a social-ecological model called Social Determinants of Health.

Specific Obama initiatives include:

- Promise Neighborhoods an expansion of Geoffrey Canada's Harlem Children's Zone educational transformation work
- Office of Social Innovation
- Specific community initiatives like: Sustainable Communities, Choice Neighborhoods, National Partnership for Action, and Neighborhood Revitalization Initiative

Recently the administration offered Community Transformation Grants (did anyone hear of these?) that are comprehensive public health and mental health approaches with \$100 million in funding for up to 75 Community Transformation Grants. These grants are aimed at helping communities implement projects proven to reduce chronic disease, violence and injury, and improve mental health and equity. It is noteworthy that this round of funding increases the grant cycle to a five-year period (\$900 million), which will allow communities more time to tailor and implement strategies, engage communities and ultimately shift norms around healthy eating and physical activity.

There are five strategic areas where grantees must demonstrate progress using the following performance measures: 1) changes in weight, 2) changes in proper nutrition, 3) changes in physical activity, 4) changes in tobacco use prevalence, 5) changes in emotional well being and overall mental health changes. The mental health approaches cited include: promote effective parenting practices, implement effective positive youth/adolescent development approaches, social and emotional wellness innovative interventions, and building coalitions.

Another positive note is the new priorities that have emerged from SAMHSA (Substance Abuse Mental Health Services Administration) where their number one priority is now *prevention*.

Government is figuring out what community psychology has always known that we need to focus on prevention, systems change, and ecological approaches. Now all we have to do is have the folks running these programs find the value of community psychology and community psychologists.

In our last presentation we turn to the next generation of community psychologists. Sharon Hakim is a third year Community Psychology doctoral student at Wichita State University. Before entering graduate school, she served as a community and organizational development volunteer in the Peace Corps. Sharon's research and practice interests include health and decision-making processes, social capital, community leadership development and prevention/health promotion within healthcare.

## Part V: A Student's Perception on the Value Proposition

As a graduate student about to start my third year in a Community Psychology doctoral program, any talk I do about my "career," is clearly in future, hypothetical terms. Therefore, the Value Proposition is especially important for me and my peers.

Not only the Value Proposition itself, but the situation, the overall lack of visibility of Community Psychology that necessitated the formation of a Value Proposition, is also particularly salient for students. As we graduate and look for jobs in agencies that may not recognize the degree listed on our resumes, or understand what we are trained to do (the "value add" we will bring to their organization), our chances of being hired go down.

Personally, I've already experienced the relative lack of visibility that currently plagues our discipline. Approximately 3.5 years ago I had never heard the term "Community Psychology" (despite having been a psychology major as an undergraduate). I graduated from college and was working in the community; I had resigned myself to getting a combined graduate degree in non-profit management and social work. This combination seemed like a "best available fit" for what I wanted to do, however, I wasn't completely satisfied. I actually found the field of Community Psychology through a backdoor, while I was researching tools to use to support my community work.

I was impressed with the information that Community Psychology offered. The values-based approach drew me in and the concept of "Community Science" – community work that focuses on evidence and evaluation – appealed to me.

In sum: I left community work to better my ability to do community work. I intend to return to the community when I graduate. I bought into the field; we all did - with time spent studying, with relocating across the country to go to school, with student loans. The challenge that my peers and I now face is how do we get employers to buy into us?

*(Note: I realize this is not a "new" problem. It seems like Community Psychologists of all ages and generations have had the challenge of marketing themselves to those who aren't familiar with our field).*

One of my personal challenges includes what I consider a "loss of fluency" in the language of Community Psychology when I talk to others outside our field. Talking with those that "get it" and share my excitement, the Community Psychology language comes easy – it flows. However, when I attempt to explain what I'm studying, or what Community Psychologists do to others, I stumble. I fall back on comparing it to other fields (e.g. Social Work, or Public Health), and I talk in circles about potential application and our values. No matter what I say, I'm usually left staring at the ever familiar "So what?" face. Clearly something is being lost in translation.

*(Note: the one exception to this is when I've spoken with people who have worked with community psychologists before. They are enthusiastic about my studies, and always want to hear more. Apparently, an "N of 1" experience can be a sufficient dose to "convert" others.)*

That leads me to my hopes for the Value Proposition. I would like to see this document acting as a Rosetta Stone of sorts. The Value Proposition has potential as a tool for explaining Community Psychologist to others, especially to potential employers, through its marketable and direct language.

I recognize, however, that the Value Proposition is not a miracle worker. Although a document explaining our field may introduce an employer to my background, it says nothing about my personal skills. Therefore I know I have the responsibility to treat the Value Proposition as a report card as I continue with my education. I need to pay attention to what I know about (or have read about), and what I can actually do. This includes the making sure my education has a real-world skill-building component to it. However, even if I do my best to become a competent Community Psychologist, I may not be able to do the job I want to do because right now, no one seems to be looking to hire us.

The screenshot shows the Monster.com job search interface. At the top, there are navigation links for Home, Resume, Jobs, Career Tools, Advice, and Communities. A search bar contains 'Community Psychologist' and 'Any Skills or Keywords' in 'Any Location'. Below the search bar, a message states: 'Sorry, no "Community Psychologist" jobs were found that match your criteria'. Underneath, there are 'other suggestions' and a 'Refine Results' section with filters for 'Your Selections', 'Posted Date / Radius', and 'Salary'. A featured employer banner for AVON is visible, along with a 'How To Use Our New Job Search' section and a 'Featured Jobs' section. On the right side, there is a purple banner for 'Unlock the Professional Power of Your Social Network' and a 'BeKnown' logo.

The challenge we face as a field is convincing employers that a Community Psychologist would be an asset to their organization. Can the Value Proposition do that? Perhaps, but only if we get it into the right hands.

For now, I can be a chameleon. Evaluation, Public Health and Community Development are easy shades to wear. But I don't want to wear them forever.

Ideally I'll be able to market myself as a Community Psychologist. But in order for this to happen, the visibility of the field needs to increase on all levels.

Another tool to go along with the development and dissemination of the Value Proposition is Community Psychologists themselves – who make it a point to identify as community psychologists publically, adding our brand image to the great work they are doing.

## Conclusion

Thanks to all of you for coming, and to Al, Mo, Tom and Sharon for commentary that was both insightful and provocative. The vision of SCRA is to “have strong global impact...” [[www.scra27.org/about](http://www.scra27.org/about)]; we can start with a neighborhood, a village, a community, and now cross international borders in the e-journal you are looking at—the *Global Journal of Community Psychology Practice*. A further challenge to the Value Proposition will be to look at it from a cross-cultural perspective. In parts of the world not only are we confronted by different “values and value,” but also by a differential valence that psychology itself invokes. But we have begun the conversation with intellectual honesty about who we are and what we want to be as a field with this Value

Proposition. The five of us have shared different perspectives, but importantly in common we invite the conversation to continue.

## References

- Kelly, J. G. (1979). T'aint what you do, it's the way you do it. *American Journal of Community Psychology*, 7, 244-258.
- Snowden, L. (1987). The peculiar successes of community psychology: Service delivery to minorities and the poor. *American Journal of Community Psychology*, 15, 575-586.)

## Appendix

### Creating a School- Community Psychology Value Proposition

#### **How Would Community Psychology Training Create Added Value for School Psychologists?**

Community Psychology is a distinctive approach to understanding and solving community, organizational, and societal problems, especially those affecting schools and their communities. While others also are concerned with community welfare, what makes community psychologists distinctive is that we apply well-established psychological principles and techniques, tested and proven in practice, to improve well-being and effectiveness at individual, organizational, and community levels. We do so with an explicit concern for social justice, inclusiveness and participation, the value of diversity, collaboration, prevention, and a focus on strengths. These values are at the core of school psychologists' concerns for equity, disproportionality, prevention, positive psychology, empowerment, and intervention at the student, classroom, school, and district levels.

#### **How Do Community Psychologists Work?**

Community Psychologists work collaboratively with others to help strengthen delivery systems, provide cost-effective services, increase access to resources, and optimize quality for individuals and their organizational contexts. Community Psychologists build on existing strengths to create sustainable change.

School-Community Psychologists work as consultants, educators, grant writers, professors, program directors, policy developers, service coordinators, evaluators, planners, trainers, team leaders, and researchers in all aspects of public and private education, including religious education.

#### **Some of the skill areas that Community Psychology coursework and practica help to develop include:**

- **Locate, evaluate, and apply information** from diverse information sources to new situations.
- **Incorporate psychological, ecological, and systems level understanding** into community development processes.
- **Contribute to organizational decision-making** as part of a collaborative effort.
- **Evaluate programs/services:** Develop evaluation designs. Collect, analyze, report, and interpret evaluation data.
- **Plan and conduct community-based applied research.**
- **Translate policy into community and organizational plans and programs** with observable outcomes.
- **Provide leadership,** supervisory, and mentoring skills by organizing, directing, and managing services offered.
- **Communicate effectively** in both technical and lay language with diverse stakeholder groups.
- **Build and maintain collaborations** with a network of clients, communities, organizations, and other involved professions. Negotiate and mediate between different stakeholder groups around a particular issue.
- **Demonstrate and teach** cultural competence and other key relationship skills to a wide range of constituencies.
- **Develop social marketing** and other media-based campaigns.

#### **How Do Community Psychologists Add Distinctive Value for School Psychologists?**

When School Psychologists add the perspective and skills of community psychology, they will add to their ability to initiate and evaluate preventive and strength-promoting interventions, carry out consultation from an ecological, developmental, and systems perspective, and bring greater coherence to schools' efforts to promote social-emotional and character development and academic improvement in students. A community psychology perspective also contributes to a realistic understanding of what is required to create school infrastructures and professional development needed for sustainable change. The collaborative approach of community psychology helps to make school psychologists adaptive, values-based professionals who thrive on working well with others in teams and task forces, blending skill sets with those of other professions, and to work collaboratively toward systems and community improvement.

### Creating a Clinical- Community Psychology Value Proposition

## How Would Community Psychology Training Create Added Value for Clinical Psychologists?

Community Psychology is a distinctive approach to understanding and solving community, organizational, and societal problems, especially those affecting individual, their families, their workplaces, and their communities. While others also are concerned with community welfare, what makes community psychologists distinctive is that we apply well-established psychological principles and techniques, tested and proven in practice, to improve well-being and effectiveness at individual, family, organizational, and community levels. We do so with an explicit concern for social justice, inclusiveness and participation, the value of diversity, collaboration, prevention, and a focus on strengths. These values are at the core of clinical psychologists' concerns for evidence-based intervention, developmentally and culturally appropriate assessment of strengths, prevention, positive psychology, empowerment, and intervention at the individual, family, organizational and community levels.

### How Do Community Psychologists Work?

Community Psychologists work collaboratively with others to help strengthen delivery systems, provide cost-effective services, increase access to resources, and optimize quality for individuals and their organizational contexts. Community Psychologists build on existing strengths to create sustainable change.

Clinical-Community Psychologists work as therapists, consultants, educators, grant writers, professors, program directors, policy developers, service coordinators, evaluators, planners, trainers, team leaders, and researchers in a wide range of clinical and health-service settings, in both public and private contexts.

### Some of the skill areas that Community Psychology coursework and practica help to develop include:

- **Locate, evaluate, and apply information** from diverse information sources to new situations.
- **Incorporate psychological, ecological, and systems level understanding** into community development processes.
- **Contribute to family and organizational decision-making** as part of a collaborative effort.
- **Evaluate programs/services:** Develop evaluation designs. Collect, analyze, report, and interpret evaluation data.
- **Plan and conduct community-based applied research.**
- **Translate policy into community and organizational plans and programs** with observable outcomes.
- **Provide leadership,** supervisory, and mentoring skills by organizing, directing, and managing services offered.
- **Communicate effectively** in both technical and lay language with diverse stakeholder groups.
- **Build and maintain collaborations** with a network of clients, communities, organizations, and other involved professions. Negotiate and mediate between different stakeholder groups around a particular issue.
- **Demonstrate and teach** cultural competence and other key relationship skills to a wide range of constituencies.
- **Develop social marketing** and other media-based campaigns.

### How Do Community Psychologists Add Distinctive Value for Clinical Psychologists?

When Clinical Psychologists add the perspective and skills of community psychology, they will strengthen their ability to work in ecologically, culturally, and developmentally sensitive ways, promote strengths, and design and implement preventive and health promotive interventions. Most important, perhaps, is that clinical psychologists will think more about the interpersonal and structural supports needed to sustain changes that result from clinical intervention. This will be a growing concern, as clinical interventions are increasingly asked to justify their short and long-term benefits and psychologists are challenged to differentiate their skills set from those of other clinicians. The collaborative approach of community psychology helps to make clinical psychologists particularly valuable assets to teams and task forces, blending skill sets with those of other professions, and working toward individual, familial, and community improvement.