

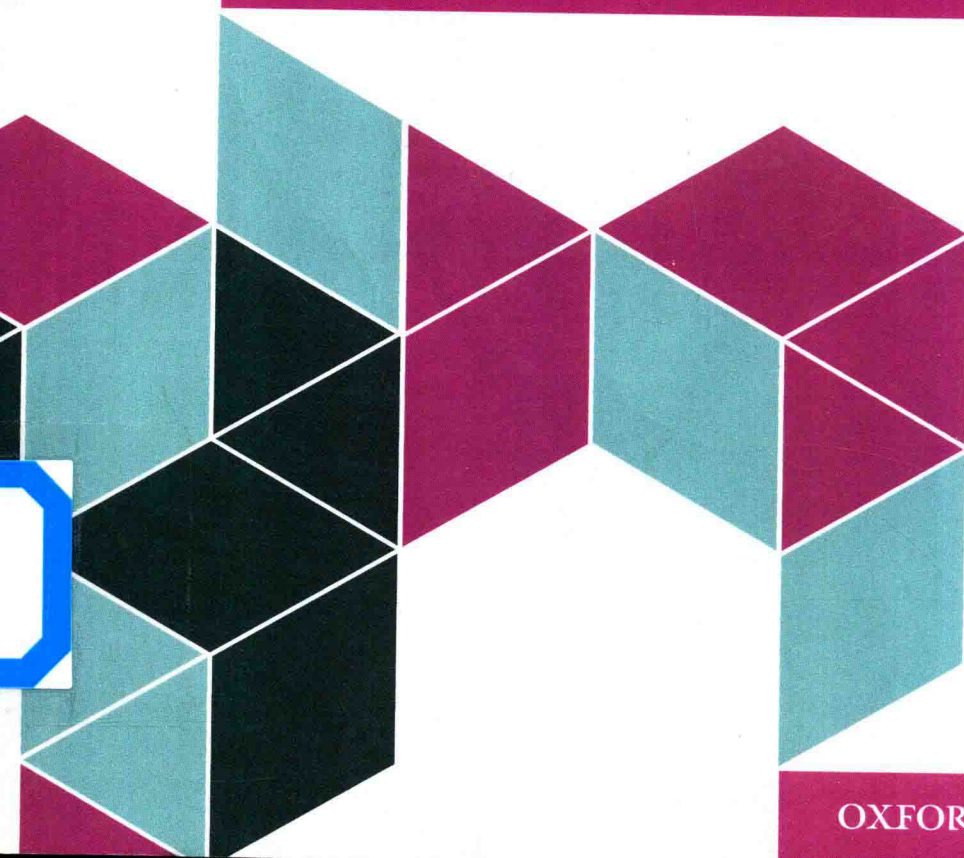
# COMMUNITY PSYCHOLOGY AND COMMUNITY MENTAL HEALTH

TOWARDS TRANSFORMATIVE CHANGE

ADVANCES IN  
COMMUNITY  
PSYCHOLOGY  
SERIES

EDITED BY

GEOFFREY NELSON, BRET KLOOS,  
AND JOSÉ ORNELAS



OXFORD

# Community Psychology and Community Mental Health

*Towards Transformative Change*

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GEOFFREY NELSON,  
BRET KLOOS,



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# Community Psychology and Community Mental Health

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## SERIES FOREWORD

The Society for Community Research and Action (SCRA), Division 27 of the American Psychological Association, is an international and interdisciplinary organization that supports the development of theory, research, and social action. Members share a common interest in promoting empowerment, health, and well-being, with special attention to multiple levels of analysis—individual, group, organizational, community, cultural, and societal. Division members focus on an array of pressing social issues within national and global contexts (such as violence, mental health, HIV/AIDS, poverty, racism) and have developed effective social interventions to address seemingly intractable problems using a continuum of approaches from prevention to intervention to social transformation. These approaches involve diverse strategies, including advocacy, citizen participation, collaboration, community organizing, economic development, prevention, education, self-help/mutual-help, sociopolitical development, social movements, and policy change. These change strategies typically share the goal of challenging and altering underlying power structures in the pursuit of social justice and community and individual well-being.

This book series, *Advances in Community Psychology*, is sponsored by SCRA to more broadly disseminate theory, research, and social action of community psychologists and those in allied disciplines. The overarching mission of the series is to create a publication venue that (a) highlights the contributions of the fields of community psychology and, more generally, community action, research, and practice; (b) integrates current knowledge on pressing topics in the field; and (c) offers the foundations for future directions.

All three dimensions of the book series mission is advanced in the current volume, *Community Psychology and Community Mental Health: Towards Transformative Change*, edited by Geoffrey Nelson, Bret Kloos, and José Ornelas. The field of community psychology has a long history of addressing issues related to community mental health. This volume's editors have convened key thinkers and practitioners who have long recognized that traditional mental health services are inadequate.

The authors have accumulated and integrated the evidence on best practices, which are all centered on collaboration among professionals and consumers and persons who have lived with the challenges of mental illness. The book pushes the field in new directions that promise to advance both scholarship and action, and it is essential reading for anyone conducting research or collaborating on solutions with community members. It encourages the reader to think in new ways about how individuals, organizations, communities, and policy makers can better respond to mental health challenges and work together to find more empowering solutions.

*Nicole E. Allen and Bradley Olson*

## FOREWORD

Since the onset of the modern version of community mental health (CMH) as a recognizable field more than 50 years ago, when people like George Albee and Marie Jahoda participated in a US President's Commission on Mental Health and Illness, it has been embraced as a revolutionary answer to the care and support of people with mental illness. In the United States, our first attempt to revolutionize CMH in the last half of the 20th century relied on the promise of a federally funded national mental health movement. That promise was too dependent on political will and public funds, an approach that did not account for changes in presidential administrations and national priorities. Neither did it account for the intransigence of mental health professionals, their professional organizations, and university training programs. The approach was too reliant on "top-down" policy to succeed.

At the state level, the introduction of deinstitutionalization to both save money and provide more humane care was predicated on the notion that alternative settings, adequately resourced and operating with a very different ideology and a different set of practices, would be created. With a few notable exceptions, these alternative settings were not widely established (largely for reasons of politics rather than science or best-practice evaluations). This failure of action by those responsible for mental health policy required those who were supposed to benefit from the CMH movement to take matters into their own hands.

The recovery movement and the development of mutual help organizations operating outside the control of mental health professionals is one of the most important resources available to many people who find that professional care, however well-intentioned, is not helping them with their everyday problems in living. Although largely ignored by mainstream clinicians and policy makers, some professionals, researchers, and scholars—this group of authors among them—have found ways to collaborate with and support the movement. To call it a "movement" is to recognize that something out of the ordinary is taking place: the transformation that these scholars speak of blends the ideas and shared wisdom of those who have experienced and rejected the disempowerment involved in playing the role of "mental



patient” and of those who have learned from community psychology how to foster conditions that facilitate a different set of role relationships more likely to facilitate empowerment. Such a movement requires the mobilization of people—ordinary citizens and advocates—as well as professionals. This volume offers both the guiding principles and action examples that are necessary to foster such a movement.

This volume is about what can be accomplished when an alliance is made between the targets of our helping services and professionals who are willing to share what they know, as well as learn from the people they wish to serve. It is about what can be accomplished when there is a change in role relationships among actors in a system. It provides both new ideas for thinking about mental health systems and new ways to act on those ideas. It is a smart book: scholarly, conceptually sound, and experientially and empirically based. The editors and the chapter authors are sophisticated and knowledgeable. They know the history of their field, even as they reinterpret it to offer cutting-edge analysis and forward-looking strategies. They have a global vision. Collectively, with examples and ideas from multiple communities and countries, they offer a reply to those who prematurely concluded that the revolution failed. Perhaps, like most revolutions, early phases of development require guerilla tactics: people operating largely outside the established system to organize and create transformative spaces. This book consolidates much that has been learned about alternative approaches to the transformation of mental health systems for the seriously mentally ill, as well as for the communities in which those systems operate. Those who read this book will be inspired to act, organize, research, and partner with those who are supposed to benefit from our mental health helping systems.

This is an important book, and one can only hope that those members of the professional mental health community, regardless of their discipline or seniority, who are concerned about the well-being of people who have lived with serious mental illness will read it with an open mind. Those who do so will be rewarded with new inspiration. The same is true for those who have been designated as “patients,” as well as for their families and friends. I encourage people with experience of mental illness to read this volume, then present it to any mental health professionals, administrators, or elected officials concerned with mental health policy they may know: ask them to read and discuss it with you and others. Community mental health centers are dead; long live community mental health!

Julian Rappaport, Professor Emeritus  
University of Illinois  
Champaign, Illinois

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## ABOUT THE EDITORS

**Geoffrey Nelson, Ph.D.**, is professor of psychology and a faculty member in the graduate program in community psychology at Wilfrid Laurier University, Waterloo, Ontario. His research and practice has focused on community mental health programs and supports for people with serious mental illness and community-based prevention programs for children and families. Underlying his work is an emphasis on working in partnership with disadvantaged people, community-based participatory action research approaches using both quantitative and qualitative methods, and value-based critical perspectives that challenge the status quo and that are oriented toward social change. In 2013, he received the award for Distinguished Contributions to Theory and Research in Community Psychology from the Society for Community Research and Action (SCRA), Division 27 (Community Psychology) of the American Psychological Association, and he received the Harry V. McNeill Award for Innovation in Community Mental Health in 1999 also from SCRA.

**Bret Kloos, Ph.D.**, is an associate professor of psychology in the University of South Carolina's clinical-community psychology doctoral training program. Along with students and community partners, his work has focused on housing issues for persons with psychiatric disabilities, social inclusion, promoting mutual help, and fostering community development that create structures that sustain people's well-being and that allow for liberation from oppressive conditions. He earned his BA in psychology and music from St. Olaf College, his PhD from the University of Illinois at Urbana-Champaign, and a postdoctoral fellowship at Yale University. Dr. Kloos has been the principal investigator for research funded by the US National Institute of Mental Health, the National Institute for Disability Rehabilitation and Research and has been invited to be an investigator on grants from the Center for Mental Health Services and the Department of Housing and Urban Development. Prior to his academic appointment, he held positions as director of a supportive housing program, as an evaluation consultant, and as the coordinator of the Connecticut Self-help Network. He is president-elect of SCRA. Ideas presented in

this volume have developed through the benefit of exchanges with colleagues during presentations across the United States, Puerto Rico, Mexico, Germany, France, and Portugal.

**José Ornelas, Ph.D.**, is an associate professor at the Instituto Superior de Psicologia Aplicada–Instituto Universitário (ISPA-IU), in Lisboa, Portugal. At ISPA-IU, he is the director of the community development undergraduate program and community psychology master's degree and doctoral programs. His first doctoral degree was from Boston University; his second doctoral degree was from the University of Oporto in Portugal. Over the past 25 years, he has developed research and practice in the field of community psychology, particularly in the domains of community mental health. He has been a member of two national commissions in Portugal, one to reform the mental health systems and the other for higher education based on new psychology curricula. He was the first president of the European Association of Community Psychology and was the recipient of Calouste Gulbenkian Foundation Social Award, in 2011, for his work in developing AEIPS, a community mental health organization in Lisboa that he founded in 1987.

## ABOUT THE AUTHORS

**Rita Aguiar, M.A.**, is a community psychology doctoral student at Instituto Superior de Psicologia Aplicada–Instituto Universitário (ISPA-IU) in Lisboa, Portugal. She works as an assistant researcher in a project granted by the Foundation for Science and Technology (FCT). After being diagnosed with obsessive-compulsive disorder in 2001, her main interests concern power relations in research, emancipatory research, the self-help movement, stigma, and user/survivor-controlled research.

**David Asiamah, Ph.D.**, obtained a doctoral degree from the clinical-community psychology program at the University of South Carolina. He is currently a community assessment coordinator for a US National Institute for Disability Rehabilitation and Research-funded study examining environmental factors affecting community integration of persons with serious mental illness living independently. His research interests, although broad, center on the educational achievement of African-American college students, social support, and homelessness.

**Tim Aubry, Ph.D.**, is a professor in the School of Psychology and Director of the Centre for Research on Educational and Community Services at the University of Ottawa. An established researcher in the fields of community mental health and homelessness, he has consulted and collaborated closely on research projects with community organizations and government at all levels, contributing to the development of effective social programs and policies. He teaches graduate courses in community psychology and program evaluation.

**Richard C. Baron, M.A.**, is the director of knowledge translation for the Temple University Collaborative on Community Inclusion of Individuals with Psychiatric Disabilities. His work has focused on community integration, especially for individuals with psychiatric disabilities.

**Louis D. Brown, Ph.D.**, is a community psychologist and assistant professor at the University of Texas School of Public Health. His research examines how to improve

the implementation quality of community-based interventions that promote mental and behavioral health. He is particularly interested in empowering local citizens to collaborate in improving their lives and their communities. Pursuing these interests has led to a line of research focused on two types of group-based collaborative strategies for health promotion: self-help/mutual support initiatives and community coalitions.

**Victoria H. Chien, Ph.D.**, obtained a doctoral degree in clinical-community psychology and her master's degree in business administration from the University of South Carolina. In one of her primary roles, she serves as the data manager for a US National Institute for Disability Rehabilitation and Research-funded study examining environmental factors affecting community integration of persons with serious mental illness living independently. Victoria has worked as an instructor of behavioral statistics, a program evaluator, and a consultant to nonprofit organizations. Her research interests include capacity building, community organizing, community integration, and evaluation.

**Mary Ellen Copeland, Ph.D.**, is the founder of the Copeland Center for Wellness and Recovery. She has been working for more than 20 years to prove to the world that people who deal with mental health issues can and do get well and go on to live rich and rewarding lives. To do this, she has conducted intensive studies of the day-to-day and life recovery strategies and skills of people who experience mental health difficulties and how these people have become well, stayed well, and worked toward achieving their goals and dreams. She undertook these studies out of her own frustration in dealing with these issues in her own life. She has achieved long-term wellness by using many of the skills and strategies she learned from these studies. Dr. Copeland has given keynote addresses, seminars, and workshops all over the world and is well known in the worldwide mental health recovery movement. She is the author of many self-help resources including *WRAP Plus* (Peach Press 1997, revision 2012), *WRAP: Wellness Recovery Action Plan* (Peach Press, 2012), *The Depression Workbook: A Guide to Living with Depression and Manic Depression* (New Harbinger Publications, 1992, revised 2001), *WRAP and Peer Support* (with Shery Mead, Peach Press 2004), and the popular facilitator training curriculum, *Mental Health Recovery and WRAP* (Peach Press 1996, revised 2012). Working with Shery Mead, she developed *Community Links: Pathways to Reconnection and Recovery* (Peach Press 2006), a program using education and peer support approaches for people who have repeated involuntary commitments. She also worked with the Substance Abuse and Mental Health Services Administration (SAMHSA)'s Center for Mental Health Services to develop the popular booklet series *Self-Help Guides to Recovering Your Mental Health* (SAMHSA 2001) and the *Taking Action* curriculum (SAMHSA in press).

**Hsiao d'Ailly, Ph.D.**, is an associate professor in psychology and the chair of social development studies at Renison University College, University of Waterloo. Her

areas of teaching and research include social statistics, social research methods, motivation, educational psychology, cross-cultural psychology, immigrant adaptation, and community-based research. Dr. d'Ailly has been an active member in the community and has taken on several leadership roles. She was the president of the board for K-W Counselling Services from 2005 to 2007, a nonprofit counseling agency in the Waterloo region, and she continued to serve as a member of the board of directors for that agency until 2010. Dr. d'Ailly also chaired a partners' table for "Multiculturalism: Helping It Work," a project funded by Canadian Heritage, and served on the steering committee for "Newcomers Online," a project supported by the Human Resources and Skills Development Canada (HRSDC) to develop a community-based digital learning space to support new immigrants in the Waterloo region. She was a member of the steering committee and later participated in program evaluation for "Taking Culture Seriously in Mental Health," a five-year Community University Research Alliance (CURA) project funded by Social Sciences and Humanities Research Council of Canada (SSHRC).

**Larry Davidson, Ph.D.**, is a professor of psychiatry and director of the Program for Recovery and Community Health at the School of Medicine and Institution for Social and Policy Studies of Yale University. His work has focused on processes of recovery in serious mental illnesses and addictions; the evaluation of innovative recovery-oriented practices, including peer-delivered services; and designing and evaluating policies to promote the transformation of systems to the provision of recovery-oriented care. Dr. Davidson has produced more than 200 publications, including *A Practical Guide to Recovery-Oriented Practice: Tools for Transforming Mental Health Care* (with Michael Rowe, Janis Tondora, Maria J. O'Connell, and Martha Staeheli Lawless, Oxford University Press 2009). Most recently, he has released another book entitled *The Roots of the Recovery Movement in Psychiatry: Lessons Learned* with Jaak Rakfeldt and John Strauss, Wiley 2010). His work has been influential both national and internationally in shaping the recovery agenda and in translating its implications for transforming mental health practice.

**Betsy A. Davis, M.A.**, is a graduate student in the clinical-community psychology doctoral program at the University of South Carolina. She is currently a research assistant for a US National Institute for Disability Rehabilitation and Research-funded study examining environmental factors affecting community integration of persons with serious mental illness living independently. Her research interests include community-based interventions aimed at facilitating the recovery and community integration of individuals with serious mental illness.

**Teresa Duarte, M.A.**, has a master's degree in community psychology and a BA in social policy. Currently, she is the president of the Association for the Study of Psychosocial Integration (AEIPS), a nongovernmental organization that aims to

promote recovery, employment, and community integration for people with experience with mental illness. Teresa is also on the board of the Portuguese Association for Supported Employment, a member of the European Union of Supported Employment, and serves on the steering committee of the Portuguese Network for Corporate and Organizational Social Responsibility.

**Paula Goering, Ph.D.**, is the research lead for At Home/Chez Soi, a project funded by the Mental Health Commission of Canada and Health Canada. She is also a professor at the University of Toronto and an affiliate scientist at the Centre for Addiction and Mental Health. Her research interests include homelessness, the evaluation of community mental health services, and knowledge translation. She has, throughout her long career, been involved in applied research and consulting aimed at improving systems of care for individuals with severe mental illness.

**Jay Harrison, B.A.**, is a master of social work candidate at Wilfrid Laurier University in Kitchener, Ontario. Jay's research and practice interests include meaningful user/survivor involvement in all aspects of the mental health system and the legitimacy of lived experience knowledge. Jay's work is greatly informed by her own recovery and community work, including serving as president of the Self-Help Alliance, a consumer/survivor initiative located in southwestern Ontario.

**Nora Jacobson, Ph.D.**, is an interpretive social scientist who uses qualitative methods to study the development of health policy and the design and delivery of health services. She is the author of *Cleavage: Technology, Controversy, and the Ironies of the Man-Made Breast* (Rutgers University Press 2000), *In Recovery: The Making of Mental Health Policy* (Vanderbilt University Press 2004), and *Dignity and Health* (Vanderbilt University Press 2012). From 2001 until 2010, she was a scientist in the Health Systems Research and Consulting Unit at the Centre for Addiction and Mental Health in Toronto. Currently, she is senior scientist and qualitative methodologist at the Institute for Clinical and Translational Research at the University of Wisconsin-Madison.

**Rich Janzen, Ph.D.**, is research director at the Centre for Community-Based Research in Kitchener, Ontario, and assistant professor at Renison University College at the University of Waterloo. He has been involved in more than 90 applied research projects that have used a participatory action research approach. For Rich, research is a tool for social change—to find new ways of bringing people who are on the edge of society to live within the community as full and equal members. Much of his research has focused on issues of immigrant settlement and integration, immigrants and churches, and community mental health. Rich has an academic background in community psychology, having completed an MA and a PhD at Wilfrid Laurier University in Waterloo, Ontario. He has also taught community-based research methods to graduate social work students.



**Nev Jones, Ph.D.**, is an interdisciplinary social science researcher, activist scholar and co-founder of the Lived Experience Research Network. Her research interests include the treatment and phenomenology of psychosis, the sociopolitics of the user/survivor movement, and the critical medical humanities.

**Jessica A. Jonikas, M.A.**, is associate director of the University of Illinois at Chicago (UIC) Center on Mental Health Services Research and Policy, as well as a research specialist in Health Systems Research for the UIC Department of Psychiatry. She holds a master's degree from the University of Chicago, School of Social Service Administration and Center for Health Administration Studies. Ms. Jonikas is co-investigator/program director on federally funded projects to promote health and self-determination for people in recovery, as well as evidence-based practice and research translation in public mental health settings. Ms. Jonikas is the senior author or co-author of research articles, book chapters, training guides, and other educational resources on recovery-oriented models of care. For more than two decades, she has been an influential force in preparing and mentoring the mental health workforce.

**Maria Fátima Jorge-Monteiro, M.A.**, is currently a researcher at Psychology and Health I&D at Instituto Superior de Psicologia Aplicada–Instituto Universitário (ISPA-IU), Lisboa, Portugal, where she is completing her doctoral degree. She also has experience as a practitioner in a community mental health organization and expertise in social and mental health policies. She has participated on policy boards through her membership in national advocacy organizations.

**Thomas A. Kirk, Jr., Ph.D.**, is an executive whose extensive career includes nationally recognized design, operational, and leadership experience in public and private health care systems. His vision has been driven by the firm belief that substance abuse and mental illness are treatable health care conditions for which recovery should be hoped for and expected and that individuals and families in care must be major forces in designing care systems. These themes, at the outset and during his public service tenure in Connecticut as commissioner (2000–2009) of the Department of Mental Health and Addiction Services, were the basis for setting an overarching strategic goal to transform a traditional care system into one designed, implemented, and evaluated based on recovery-oriented principles, values, and outcomes proposed by the mental health and addiction recovery communities. This resulted in a statewide quality enhancement focus, emphasis on continuing and recovery support versus acute care strategies, and strong cross-state agency, academic, faith, and recovery community partnerships. Strong outcome and aggressive resource development/reinvestment approaches supported the transformation. Dr. Kirk currently is a member of the National Institute on Drug Abuse Advisory Council, served on the Substance Abuse and Mental Health Services Administration (SAMHSA) National Council (2005–2009), and has participated