Community Psychology in Britain[1]

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Community Psychology in Britain can appear to be relatively

underdeveloped in comparison to that in other regions. Some reasons for this

have been examined elsewhere in an article subtitled "Why this gap in

Britain?" (Burton & Kagan, 2003), but in this chapter our focus is more on the

description of what community psychology there is in the country, and how it

developed. Despite the absence of a highly organised and numerically strong

discipline, there are some distinct centres and approaches that mean that it is

meaningful to talk, if not about a British community psychology, at least of a

family of approaches developed in the societal, academic, professional and

lay contexts here. Indeed that relative lack of an organised presence

(especially a professional organisation, and training courses) does not mean

that community psychological work is not going on here. A theme that has

emerged repeatedly in the research we have carried out for this chapter has

[1] We are grateful to the following who took part in interviews or submitted their thoughts on the history of community psychology in Britain. Information was obtained by interview and through two email questionnaires. A number of facts were checked with key actors.

[2] The first draft of the chapter was written by MB, SB and CH carried out interviews and data gathering from a number of informants, CK revised the draft and provided additional archive material. Bibliographic work was by contributed by MB and CK.

been that a lot of work that would elsewhere be branded as community psychology is not called that here and it is not seen primarily in these terms at all.

Waves of Community Psychology

Pre-community Psychology pre 1970

There have been a number of precursors to community psychology in Britain, and it is beyond the scope of this chapter to identify and delineate them all. Psychology in the UK before the Second World War was often characterised as interdisciplinary, and sought to develop innovative methodological approaches to understanding social issues. For example, the psychology group at St Andrew's University in Scotland, in the 1930's, had adopted an interdisciplinary, participative and ethnographic approach to researching unemployment, drawing on economic, sociological and anthropological perspectives (Oeser, 1937). Their work was one of the pre-cursors to the Mass Observation movement, which sought to involve lay people in producing rich descriptions of ordinary life in a northern mill town (Roiser, 1998).

Marie Jahoda, who became professor of social psychology at the then new University of Sussex in the 1960s, was one of a group of social scientists who had previously worked as engaged and committed community activists in Austria prior to the nightmare of fascism, and utilised a similar, interdisciplinary approach to deep fieldwork when working with mining communities in Wales (Bellin, 2002; Fryer, 1986, 1997, 1999b)

Later on, in the intellectual disability field the work of the 'psychologists' group' which included Jack Tizard, Herbert Gunzburg, Elizabeth and John Newson, Norman O'Connor, Beate Hermelin, Alan and Ann Clarke and Peter Mittler, for example (along with psychiatrist Albert Kushlick) can be characterised as a broadly social and contextualist approach that challenged 'therapeutic pessimism', and paved the way for the more radical approaches that combined service development, policy development and social change by later workers in the field (including Mittler again, Chris Gathercole, Paul Williams, Jim Mansell, David Felce), recognising intellectually disabled people as citizens for whom it was necessary to both open up and make competent their community.

Psychodynamic psychologists at the Tavistock Institute developed a practice as organisational change agents. Others explored ideas like that of the therapeutic community (which originated in the UK - Claybury, Paddington, Henderson hospitals - also Richmond Fellowship) as alternatives to medicalised hospitalisation, creating social settings that facilitated healing and growth.

Other psychologists worked with families and other allies to support the rights and citizenship of vulnerable children, within the child guidance services that were established before the 1939-45 war (Aiyegbayo, 2005).

However, none of these diverse and informal roots led into a coherent and self defined "community psychology", and it was not until the term began to be used in North America that it began to appear in Britain. One reason for

the limited development of community orientated applied psychology was the very individualistic approach of British academic psychology. The University of Cambridge, for example, had a dominating influence and despite the work of the socially inclined Frederick Bartlett in the 1930s (Bartlett, 1932; Bartlett, Ginsberg, Lindgren, & Thouless, 1939), by the post war period it promoted a very narrow idea of the discipline, albeit with a strong applied focus adopted by psychologists who went on to work elsewhere (such as Argyle and Broadbent). This was, perhaps consistent with the general orientation of this university which until the late 1960s had no department of sociology. Moreover, the control of university curricula by the British Psychological Society constrained the possibility of the exploration of alternative approaches to psychology. In most places, applied psychology was largely orientated to psychometric testing.

1970 to 1980

The 1970s in Britain as elsewhere opened with the questioning of the dominant approaches to psychology. While in mainstream academia this was often no more than the replacement of one positivist paradigm, behaviourism, by another, the cognitivist/information processing one, there were also more fundamental critiques especially in social psychology (Armistead, 1974; Harré & Secord, 1972; Israel & Tajfel, 1972). Whereas in Latin America this was to lead directly to a community practice (Burton, 2004b; Burton & Kagan, in press), in Britain it led instead into a distinctly European genre of experimental social psychology (Graumann, 1995), as well as increasingly academic and theoretical work in critical psychology (Parker, 1999). There was an emphasis on social constructionism, the role of language and post-structuralist critiques

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of the discipline, as reflected through the short-lived journal *Ideology and Consciousness* and subsequent writings,(Adlam et al., 1977; Henriques, Hollway, Urwin, Venn, & Walkerdine, 1984). Few of these developments had any apparent impact on either practice or the orientation to the community (Burton, 2004a; Burton & Kagan, 2003). Paradoxically, just as the academics were abandoning behavioural approaches, their applied colleagues were getting excited by them since they offered a technology of therapeutic change that would also help psychologists break out of the psychometric straightjacket.

However, by the 1970s the term 'community psychology' was appearing with some regularity in the Bulletin of the British Psychological Society, and some psychologists, for example Mike Bender (in Newham, London since 1968) and Brian Tully were exploring a recognisable community psychology (Bender, 1972, 1976, 1979; Tully, Doyle, Cahill, Bayles, & Graham, 1978). In Bender's case, a whole department of mostly clinically trained psychologists was established in the alternative (to the Health Service) institutional home of the London borough of Newham's Social Services Department.

> *Newham was innovative. It worked across all client areas, except Child Guidance; it had many assistant (graduate) psychologists (which traditional clinical psychologists disliked) but also a team of clinical psychologists/ psychotherapists. So through the seventies and into the mid-eighties, it was showing how psychology could be delivered; and the concept of intensive, researched input ("the project" approach) had some influence.*
>
> *(M. Bender: correspondence with the authors)*

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Bender's book (1976) was to become the first introduction to the ideas of community psychology for a subsequent generation. The series in which his book appeared also contained other challenges to the mainstream (Heather, 1976; Lee, 1976; Shotter, 1975; Stacey, 1976). Another influential book series was the radical education initiative of Penguin which brought Freire and his work to an English speaking readership (Freire, 1972a, 1972b).

Educational psychologists were also developing community psychological work. As Peter Jones puts it:

There was little in the way of literature that specifically named Community Psychology, but I certainly see the struggles between educational psychology and clinical psychology for ownership of child psychology and working in schools in the community to directly reflect what had happened in the USA during the 60s. The Court and the Trethowan reports [on disabled children and the role of clinical psychologists respectively]*, the role of the British Psychological Society during that period and the relationships between Clinical . Psychologists and Educational Psychologists, were happening in the context of Educational Psychologists having already shed the shackles of medical domination and many of them moving to more systemic practice in schools in the community, rather than being constrained as psychometricians / para-therapists in child guidance clinics. The radicalisation of much practice for Educational Psychologists during the 70s and 80s reflected and extended some of that thinking. For example, Sheffield had a community educational psychology service in the 70s.*

(P Jones: correspondence with the authors)

Elsewhere, both educational and clinical psychologists established community based interventions orientated to working with a variety of mainly marginalised populations in more ecologically appropriate locations (Brown, 1981; Reid & Ostapiuk, 1981).

Thirty years later, this work can now seem dated: much seems to have been concerned with rolling out the new behavioural technology to non-psychologists, and the location of much of the work was in the first generation of compromised community based service settings such as hostels and day centres for intellectually disabled people or those with mental health problems. But that would also apply to the early ventures in other countries too.

However, when compared with developments elsewhere, these developments were small in scale. As we have demonstrated (Burton & Kagan, 2003) all this work was dependent on the availability of niches that could be occupied by psychologists, and on the preparation of psychologists to work in this more socially orientated way.

> *We have argued that in Britain, the social policy context of the 60s and 70s was statist and relatively collectivist. This appears to have opened up niches in the state system that the ideologically individualistic and small population of British psychologists, despite being state orientated, were not able to exploit as a community psychology praxis. Instead the 'gap' was filled by community workers whose orientation was more clearly social and in tune with the ideological context of social policy. It was these workers who were able to exploit the resource and organisational niches, and until the economic crisis of the 70s really began to bite, to extend them.*

1980 to 1990

The domination of the institutions of the British national and local state continued to exert an influence. In the universities, the turn to social constructionism continued while work was done in broadening the paradigms for both thinking about and researching in psychology, through what became known as new paradigm, anti-positivist research (Reason & Rowan, 1981). Nevertheless it was not until 1994 that the first compendium of qualitative methods in psychology in the UK was produced (Banister, Burman, Parker, Taylor, & Tindall, 1994). In a similar vein, the growing interest in feminist analyses and influence on research practice at this time, focussed on *"illuminating women's experience.. [and} to utilize the female perspective to foster the development of a more genuinely <u>human</u> psychology; to deepen our understanding of the <u>whole</u> of human experience - both female and male".* (Wilkinson, 1986).

In psychological practice, other developments occurred. A loosely organised group of people, mostly but not all professional psychologists, came together in 1983 to form the group 'Psychologists in Community Settings' (or PICS). Core to the objectives of PICS was the crossing of the intra-professional Divisions and uniting different kinds of psychologists in an area of common interest. For several years PICS remained determined to remain outside the structures of the BPS, deciding "*by the voting of a majority of members not to become a Division, Section or Special Interest Group for the BPS, in order to represent members <u>outside</u> the traditional categories of the BPS.*" (Barlow, 1987). The group did, however, seek to influence the

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different professional divisions and the Professional Affairs Board of the BPS from outside, a major concern being the representation of psychologists working in community settings, whatever their professional background.

By 1987 there were 100 members of PICS and some further 90 people interested in its activities. (This is a similar number of people who are currently signed up to the national community psychology email list - although now the pool of psychologists is larger.)

PICS held seminars, residential courses and circulated discussion papers. Some of these contained discussion of the nature of community, the possibilities of a community psychology (different from existing clinical or educational psychology practised in community settings), and sharing information about working as community psychologists. A 3-day conference entitled '*Community Psychology in the late 1980's*' was held, in 1986, aimed at clinical psychologists.

In the meantime, the BPS had established a working party on Psychologists Working in the Social Services Departments of local councils, which was initially chaired, in 1981, by an educational psychologist, but reported, in 1983, under the Chair of a clinical psychologist. Social Services departments offered a potentially new setting for psychological practices, beyond the NHS. The concern of PICS had been to develop a different form of practice, but in the end the pressure was to pursue and protect the interests of psychologists working in a different setting. The contemporary special group of Psychologists and Social Services, within the British Psychological Society has its roots in the PICS initiative.

Reviewing the possibilities for transforming psychological practice, McPherson and Sutton (McPherson & Sutton, 1981) called for a psychological practice that went beyond the individual. They recognised that practice would remain predominantly in public welfare services, paid for by the NHS and local authorities. Importantly, the tension between the niche advantages of individual work, providing good careers and expanding professions was acknowledged. Perhaps this was why a genuine community psychology did not take root at this stage.

However, the period of the 1980s was also a time of more fundamental changes in British government and society, and its welfare systems. In 1979 the Conservative (or Tory) Party was elected under Margaret Thatcher, and it began a transformation (inspired both by the Chicago neoliberal economists and the experiment of the Pinochet dictatorship in Chile, Becket, 2002) that prefigured the current neoliberal 'consensus'. The collective influence of the working class was directly attacked and weakened, and the institutions of the welfare state subjected to an incessant regime of budgetary cuts, strengthened general management, and subsequently (from the mid 1980s) to the 'discipline of the market' with swathes of provision being cut or out-sourced. The very notion of 'the social' became disreputable, as manifest in Thatcher's famous emblematic statement: ' …*who is society? There is no such thing! There are individual men and women and there are families*' (Thatcher, 1987).

These developments made the 'really social psychology' of community psychology a difficult case to argue, at least in terms of the ideal of radical transformative practice. For those influenced by Marxism and feminism and

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by what had been the growing attempts to apply these approaches to practice (e.g. through the new journal Critical Social Policy, founded in 1981, or texts such as Corrigan & Leonard, 1978) this could be a disorientating period.

Nevertheless, the Thatcher years (the regime was to last for four parliamentary terms up until 1997) did offer some opportunities for community psychological practice, but throughout the 1980s there was little talk of community psychology as such. Opportunities for community psychological work were provided by the policy initiatives of *Care in the Community*. These led to the resettlement of people from long stay institutions, and the development of new more flexible support systems in, if not usually of, the community. There was a new North American influence, that of *normalisation* or *social role valorisation* (Wolfensberger, 1992) (used in particular by the campaigning organisation The Campaign for the Mentally Handicapped - now Values into Action) that provided a vision of inclusive community living for the most impaired. However, other ideas, such as the Latin American notion of conscientisation, and more traditionally British traditions of social responsibility and public service were also influential. A large variety of developments took place, with and without the involvement of psychologists. Clincial psychologists took a leading role in some of these. The work of Chris Gathercole in the North West of England is particularly notable, exemplifying the ethos of community psychology - interdisciplinary, transformative, preventative, value based, emphasising evaluation, making alliances with family carers and disabled people, - yet never referred to as community psychology. The remnants of a decimated community development sector provided a home for other radical psychologists (Gilchrist, 2004), and others

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were active in the disability movement, promulgating the social model of disability as a challenge to medical, deficit models (Finkelstein, 1982; Finkelstein & French, 1998). People from the previously mentioned 'psychologists group' and those who they had trained or influenced were influential in the evaluation of some of these schemes, in some cases carrying out what we would term prefigurative action research (Kagan & Burton, 2000) that both evaluated the new attempts at promoting social inclusion while deepening an understanding of what the concept meant and sketching its limits in the context of a constraining social context with its competitive and individualising ideology-in-practice. The Manchester group, referred to below also sees this work as one of its roots - see for example the attempt to reframe social skills in a community psychological way (Burton & Kagan, 1995).

In Exeter, which was one of the early implementers of the policy of community care and institutional closure, the clinical psychology training course, headed by Jim Orford took the opportunity to rebrand itself as the Exeter Community and Clinical Psychology training course in 1983, although Orford had been teaching about Community Psychology since the late 1970s (Orford, 1979). This however, was rather exceptional. While Exeter provided a nucleus for a self aware variant of (clinical) community psychology, in the main the term had little currency in the 1980s.

A rather different development affected the developments from Educational psychology. In 1981 a new Education Act was passed that established a new approach to the specification of children's special educational needs. While before, children were assigned to special education

on the basis of a broadly medical definition of their disabling condition, the new act required a statement of special education needs, based on a multidisciplinary assessment. This was an attempt to individualise provision, and while it did enable many children's difficulties to be recognised and addressed in mainstream educational provision, it did little to change the segregation of children with more substantial disabling conditions. However, it was the Educational Psychologists who were in charge of the 'statementing' process. As a result, at least in England and Wales (the situation in Scotland has always been rather different) the role of Educational Psychologists became much more tied to the bureaucratic operation of the system, and the scope for intervention in systems and in community contexts was significantly reduced. Prior to this Educational Psychologists had developed pockets of radical, value based and child centred practice which challenged the status quo.

In the late 1980s Sue Holland, a feminist psychotherapist with roots in community action was working with a group of women on the White City estate in London. She developed an approach that began with individual psychotherapy, progressing to involvement in groups and then to collective social action. In this mental health was reframed, instead of being seen as private individual distress in mainly biomedical terms, it came to be seen more in a societal context. Holland specifically saw this work as moving from 'psychic space' through 'social space' and thence into 'political space' (Holland, 1988). Her work which is frequently cited as influential by clinically oriented Community Psychologists in Britain drew on both psychoanalytic theory and on the idea of conscientisation from Freire (Freire, 1972b): indeed

another influence from Latin America was present in the 1980s as a result of the personal involvement of some psychologists in the solidarity movement with Nicaragua where a more social model of mental health was being articulated (Hollander, 1997; Sveaass, 2000) (Steve Melluish correspondence with the authors). Significantly the publication of Holland cited above appeared in a collection (Ramon & Giannichedda, 1988) that also included work from the Psiciatrica Democratica in Italy - another influence on some community orientated psychologists.

1990 onwards

It was in the 1990s that interest in an explicitly *community* psychology re-emerged or consolidated itself in several locations. In describing what happened in these places, we can also identify the main currents of British community psychology and some of their interconnections.

The following categorisation is necessarily approximate. It risks marginalising developments outside the boundaries of these centres of gravity, for example the community educational psychology practised by Peter Jones and others (see box 1). There is the danger of prematurely freezing understanding of history and therefore of reducing the likelihood of other characterisations of this period up to the present. With these risks in mind, the following is offered as a loose organising framework for diverse information.

In **London** the work of the Newham department led to a continued interest and production of community psychological work. After Bender left in 1988 there was a move of people into the health service, (especially the London boroughs of Newham, Tower Hamlets, Hackney and Haringey) where

in many cases the emphasis continued. In the Newham health service's psychology department, for example, it was a contractual obligation of all staff that they spent a half day session per week on community psychology. The influence seems to have reached the clinical psychology training course at North East London Polytechnic (now the University of East London), regarded as one of the more socially critical and progressive ones. Some of the community work of psychologists in East London is described in two conference collections based on the 1997 and 1999 conferences of the UK national community psychology network (Kagan, 2000; Phillips, Hughes, & Bell, 1998).

Meanwhile at University College London Chris Barker and colleagues have maintained a programme of work on informal social support (e.g. Solomon, Pistrang, & Barker, 2001), again from within a clinical psychology teaching programme. A similar emphasis is adopted by Derek Milne in Northumberland (Milne, 1999)

The origins of Community Psychology in **Exeter** were mentioned above. Orford's work (e.g.Feldman & Orford, 1980; Orford, 1976, 1979, 1992, 1998) has consistently provided a conduit for community psychology concepts in the British context. His own work has been largely from a clinical base with an emphasis on mental health and addictions. However, his role in stimulating and developing UK community psychology, has been considerable. Not only has he provided inspiration through his own writings, he has also opened possibilities for a community clinical practice. He has promoted community psychological work through the Journal of Community and Applied Social Psychology and has offered encouragement advice, support and legitimation

for many of those trying to work community psychologically in often isolated settings. In addition, Jim Orford, along with David Fryer and Mark Wilson, both from Scotland, was a founding member of the European Community Psychology network, and is currently overseeing its transformation into a more open Association (Fryer, 1999a; Orford, Duckett, & McKenna, 2003)

Orford moved to **Birmingham** in 1993 but the emphasis of the Exeter course has been maintained (through the work of Louise Goodbody, Annie Mitchell and others) and a variety of community based projects are in existence. The 2004 Community Psychology conference was held in Exeter. In Birmingham, a group of professionals with an interest in critical and community approaches to mental health have established the West Midlands Community and Critical Psychology group (which includes two of the authors of this chapter). There is beginning to be some influence on clinical services as some clearly community psychological projects are implemented.

The other location where Community Psychology has emerged from within clinical psychology has been **Nottingham**. As with Jim Orford, several people we interviewed or who wrote to us in preparation for this chapter mentioned David Smail, who was the psychology services manager for the Nottingham health service department of clinical psychology. His own work (e.g. Hagan & Smail, 1997; Smail, 2001) has explored the power and the limitations of psychotherapy, in its most recent form setting out an account of psychological/emotional distress which places the embodied subject in a social environment in a real, material world (Smail, 2005). His other influence has been through the encouragement (and permission) for others to explore community psychological approaches. A good example is Melluish's work

with community development worker Don Bulmer that drew on and extended Holland's approach, this time with unemployed men (Melluish & Bulmer, 1999). Another example would be the community psychological project, *Building Bridges* in Liverpool (Fatimilehin & Coleman, 1998; Fatimilehin & Coleman 1999). It was a group of clinical psychologists in Nottingham who were responsible for the establishment of the UK Community Psychology Network. In 1993 Richard Marshall and Bob Diamond arranged a meeting with George Albee, atttended by people from across the country. Albee drew attention to the political nature of community psychology and the importance of solidarity in taking the activity forward. The following year a follow up event was organised in nearby Newark in with the title '*Community and Clinical Psychology: Putting Ideas into Practice*'. That attracted psychologists from Educational and academic settings too. Following that Steve Melluish set up a list of interested people who became the network for community psychology in the UK. The network has held conferences with increasing frequency, and for the last three years they have been annual events. Jan Bostock was an influential member of this group prior to her move to Northumberland, publishing her practical and theoretical work with communities (Bostock & Beck, 1993; Bostock & Smail, 1999; Sharpe & Bostock, 2002) and holding an editorial position with JCASP.

In **Manchester,** around the Manchester Metropolitan University, there is another grouping of community psychologists and associated people, but unlike the previous groupings its roots are not in clinical psychology (although there is some mutual influence). Work began in the 1980s with both community projects and theoretical analysis (the 'Trafford School'). The roots

are more in social and environmental psychology and there is a strong influence from disciplines outside psychology itself (ecology, political theory, liberation studies, systems methodologies) (e.g. Kagan, 2002). Emphases include disability (Burton & Kagan, 1995; Duckett & Pratt, 2001; Goodley & Lawthom, 2005; Moore, Beazley, & Maelzer, 1998), marginalisation (Kagan & Burton, 2004; Kagan et al., 2004), health and wellbeing (Haworth, 1997; Sixsmith & Boneham, 2002) and crime in the community (Kagan, Caton, & Amin, 2001b). The journal, *Community Work and Family* is edited from Manchester by Carolyn Kagan and Sue Lewis. The Community Psychology UK website, unofficial, but used as a gateway to community psychology in the UK (www.compsy.org.uk) is also based in Manchester, as is the national website drawing together learning and teaching strategies and materials in community psychology in higher education (http://highereducation.compsy.org.uk/). The strong community psychology group at MMU links closely with the Discourse Unit, a centre for critical and feminist psychology (Burman, 1990, 1998; Parker, 1999, 2005; Parker & Spears, 1996). It is from this base that the Annual Review of Critical Psychology is published, and that networking and campaigning organisations, including the hearing Voices Network, Psychology, Politics and Resistance, and the Paranoia Network have been supported (Burton, 2004a; Parker, 1994).

Scotland - Community psychology in Scotland is based primarily at Stirling University where David Fryer heads the critical community psychology group. Inspired by Mark Wilson's work in Easterhouse on the fringes of Glagow, David and his colleagues have developed a community psychology

praxis that is in partnership with community groups. The focus of their work is largely in the area of mental health and (un)employment, but recently they have diversified to work with community groups on a number of other change issues. The Stirling group (in particular Mark Wilson, David Fryer and Steve McKenna) have been part of the European Network for Community Psychology since its inception, and have hosted a number of visits by community psychologists from elsewhere. David Fryer was a member of the editorial committee of the *Journal of Community and Applied Social Psychology* for a number of years, developing both the book review and Praxis sections. Stirling University has recognised the importance of community psychology by awarding Honorary Doctorates to both George Albee and Marie Jahoda. Writings from the Stirling group (e.g. Fryer, 1986; Fryer, 1994, 1999b; Fryer & Fagan, 2003) have influenced practitioners elsewhere in the UK. However, the tensions created by the British Psychological Society's hold over curriculum issues puts strain on small university based groups of community psychologists like the Stirling group (Fryer, 2000).

More recently, again in London (2005) a new MSc course in Health, Community and Development has been established at the London School of Economics by a group with roots elsewhere (social and health psychology in the UK, South Africa and Latin America). The course explicitly makes use of a community psychology orientation (Campbell, 2003; Campbell, Cornish, & McLean, 2004; Campbell & Murray, 2004) and builds, not only on the longstanding interest in the department on a more macro social psychology, one that studies social phenomena and cultural forces that both shape, and in

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turn are shaped by, people's outlooks and actions (Gaskell & Himmelweit, 1990), but also on the more contemporary community health psychology that is emerging (Campbell & Murray, 2004)

Recent and current context

In 1997 the period of Tory rule came to an end with the election of the 'New Labour' government of Tony Blair. Labour has not proved to be any less committed to policies that favour the market over the state and civil society than were the Tories (Watkins, 2004), but they have had an explicit agenda about reducing what they call social exclusion (what we used to call poverty), and about promoting partnerships between the agencies of the local and national state, voluntary organisations, and the private sector. This has opened up some spaces for community psychologists. For example the Health Action Zones of the first labour term created opportunities for community psychological work on the prevention of poor health (e.g. Janet Bostock's work in Northumberland) (Sharpe & Bostock, 2002), capacity building for programme evaluation (Boyd et al., 2001), and self harm (Chantler, Burman, & Batsleer, 2003). Other (mostly urban) regeneration projects have supported action research projects such as Carl Harris's work in Birmingham and Kagan, Caton and Amin (2001a).

The role of the British Psychological society is paradoxical. On the one hand it has supported community psychological developments, via, for example, supporting visits under the Visiting Fellow and Psychologist schemes to community psychologists from Australia, Canada, Cuba, Italy, Mexico and the USA. It has provided financial support for the development of

an international conference in community psychology. Sue Holland (discussed above) was the first recipient in 1994 of the British Psychological Society's award, by the Standing Committee for the Promotion of Equal Opportunities, for members who have challenged inequalities or promoted equal opportunities in their work . The Society is currently providing encouragement to interested parties to establish formally a Community Psychology Section. On the other hand, it retains control of and scrutiny of the undergraduate and postgraduate curricula. There is no mention in the nine pages of the benchmarking statement for psychology, produced by members of BPS committees, of community psychology theory, applications or perspectives (QAA., 2004).

In 1991 the first European journal to include community psychology, the Journal of Community and Applied Social Psychology, was founded out of its antecedent Journal of Social Behaviour. The founding editorial declares a commitment to stimulating the growth of community psychology alongside clinical psychology, applied behaviour analysis and social psychology. The editorial argues for the close alignment with social psychology, which was, as we have seen, one of the precursors of community psychology in the UK. They argue that in Europe this makes sense, as:

'theory in social psychology has been oriented more towards collective behaviour, and social psychology itself more securely addressed to societal rather than interpersonal problems' (p.1) (Mansell, Orford, Reicher, & Stephenson, 1991). Jim Orford, as one of the founding editors of the journal,

thus continued to strongly influence the presence of community psychology in the UK.

Conclusions

Despite the developments described above, and an increasing degree of co-ordinating of effort, British community psychology remains a minority pursuit. In part, this seems to have something to do with the institutional pressures that define what psychology is. Whether this is the positivist emphasis of 'evidence based practice' and the continuing fascination with therapy in clinical psychology, the administrative burden in educational psychology, or the constraining influence of the Research Assessment Exercise that ranks University departments on their research outputs, and the BPS control of the undergraduate curriculum in the Universities, these dominant understandings of what it is proper for psychologists to do continue to exert a bias against the 'really social psychology' that is aspired to by community psychologists. Yet meanwhile a growing number (if not a growing proportion) of psychologists do practice what would elsewhere be termed community psychology, often without ever thinking of applying that term. Perhaps that situation also hints at a problem with the very notion of 'community psychology', which has been dependent on a particular conjuncture of psychological ideas, unoccupied niches in which to work, and legitimation from professional and other bodies. Should we be thinking more in terms of 'really social psychology', that is non-individualist in its understanding of the societal construction and place of people, realist in its understanding of people's embodied and contextualised subjectivity, and social in its programme of action, irrespective of what subdiscipline the

psychologist belongs to? With such a permeating notion of liberatory practice,

any debate about who is really doing community psychology, and about how

to organise to do it, perhaps fades away as only of interest to careerist

professionals.

Appendix: A chronology of community psychology in Britain

Date	Category	Details	Comment
1962	Publication	British Journal of Social and Clinical Psychology established	
1960s	Development	Therapeutic Community movement in UK, eg Claybury Hospital in Essex	
1965	Context	BPS Royal Charter	
1968	Publication / context	Seebohm Report	Led to establishment of Local Authority Social Services Departments in 1971
1960s late	Context	BPS qualifying exam	Straightjacket on the definition and context of psychology, and its teaching – social psychology not part of the requirements
1968	Development	Mike Bender begins work in London borough of Newham	
1970s	Activity	Clinical Psychologists working in health centres and GP practices	

Date	Category	Details	Comment
1972	Publication	*Rat Myth and Magic*	
1972	Publication	The role of the community psychologist M. Bender, *Bull. BPS*	
1972	Publication	Harré, R., & Secord, P. F. (1972). *The Explanation of Social Behaviour*. Oxford: Blackwell.	Key critique of dominant ways of doing psychology / social psychology
1974	Publication	R*econstructing Social Psychology* Ed N Armistead	Crisis in Social Psychology document that did not lead into radical community practice
1976	Publication	*Community Psychology,* M Bender	Methuen's manuals of modern psychology, along with J Shotter, Images of Man ain Psychological research and N Heather, Radical Perspectivces.
1976	Publication	Jim Orford (1976) *Social psychology of mental disorder*	
1978	Event	Conference on psychology and community organised by trainees on Manchester clinical psychology course	

Date	Category	Details	Comment
1978	Publication	Psychology and community work in mental health Bull BPS B. Tully and a multidiscipinary group of authors	
1978	Publication / context	Social Origins of Depression G Brown and T Harris	
1978	Publication	Trethowan Report (*The Role of Psychologists in the Health Service*)	Supports notion of clinical psychologists as therapeutic practitioners
1979	Development	Chris Gathercole working on service development and social change in relation to intellectually disabled people in the NW of Britain - practice is community psychological but not described as such.	Continues until mid 1990s
1979	Context	Election of Tories under Thatcher	
1979	Publication	Clinical Psychology: when? M. Bender, Bull. BPS	Argues for exploitation of LA social services departments
1980	Publication	*Psychological Problems: the social context* P Feldman and J Orford	

Date	Category	Details	Comment
1980s early	Research	MRC/SSRC Social and Applied Psychology Unit at Sheffield studies on unemployment	Didn't lead into a community psychology practice
1981	Publication	British Journal of Social and Clinical Psychology splits into BJ Social Psychology and BJ Clinical Psychology	
1981	Publication	*New Paradigm research* P Reason and J Rowan	
1981	Publication	Ian McPherson and Andrew Sutton (1981) *Reconstructing psychological practice*	
1980s onwards	Development	Community Care / Care in the Community policies for elders, learning disabled people and people with mental health disorders	Some emphasis on community inclusion
1983	Organisation	Formation of Psychologists in Community Settings (PICS)	
1983?	Training	Jim Orford leading Exeter community and clinical psychology course in context of implementation of community care schemes in Exeter area.	
1986	Publication	Hugh Koch (1986) *Community clinical psychology*	

Date	Category	Details	Comment
1987	Publication	*Work, unemployment and mental health.* P Warr	
1989	Publication	Defining and experimenting with prevention S Holland	White City Project Published in collection by S Ramon concerned mostly with deinstitutionalisation.
1990	Organisation	PICS wound up. BPS establishes Special Group of Psychologists in Social Services.	
1990s	Development	User / survivor movement in mental health gathers strength, Asylum magazine, Hearing Voices groups and network, Critical Psychiatry group	Some cross over with community orientated clinical psychologists.
1991	Publication	*Journal of Community and applied Social Psychology* established, with editorial by Mansell, Orford, Reicher and Stephenson, and	
1992	Publication	*Community Psychology: Theory and Practice* J Orford	

Date	Category	Details	Comment
1993	Event	George Albee talk in Nottingham, organised by Bob Diamond and attended by people from across the UK	Followed by Newark conference, following year
1994	Event	Community and Clinical Psychology; Putting Ideas into Practice, Newark, Notts. Organised by Jan Bostock, Steve Melluish, Bob Diamond and others	Led to establishment of CPUK network
1994	Event	Psychology, Politics, Resistance – conference in Manchester – PPR network established with largely mental health focus	Little cross over with Community Psychology, although closely linked to MMU psychology dept.
1994	Organisation	Community Psychology Network set up by Steve Melluish and Jan Bostock	
1996	Organisation	Community Social Psychology Network set up by Carolyn Kagan and Mark Burton (following visit to Venezuela)	Merges with UK Community Psychology network in 1998
1997	Context	End of 18 years of Tory rule, election of New Labour, but with neoliberal rather than socialist (or even social democrat) policies.	

Date	Category	Details	Comment
1997	Event	Community Psychology Conference in London 'Evolving Theory and Practice'	
1990s (late)	Development	Emergence of evidence-based-practice as part of a system of clinical governance.	This programme taking a narrow view of the evidence relevant to clinical psychology, ie primarily concerned with effectiveness of technique as applied to decontextualised "problem"
199x	Training	Establishment of community psychology route in modular MSc at MMU	
1998	Publication	Community Work and Family Journal edited from MMU by Carolyn Kagan and Suzan Lewis	
1999	Event	Community Psychology network conference in Manchester - community psychology and collective action	

Date	Category	Details	Comment
2000	Organisation / publication	Community Psychology UK website established by Mark Burton and Carolyn Kagan	
2000 onwards	Developments	Labour government initiatives create more opportunities for community psychological work, eg Janet Bostock / C. Kagan and colleagues in Health Action Zones, Carl Harris in New Deal for Communities programme.	
2001	Event	Symposium on Community Psychologyat BPS centenary congress - Glasgow	Organised by D Fryer
200x	Organisation	Community psychology email list established by Rebeka Pratt	100 members by the end of 2004
2003	Event	Community Psychologynetwork conference – Birmingham: poverty and social disadvantage	
2004	Event	Community Psychology network conference in Exeter - inequalities	
2004	Training	Establishment of MSc in Health, Community and Development at LSE	

Date	Category	Details	Comment
2004	Event	Community Clinical Psychology conference at Lancaster Univ.	

Box:

Community Educational Psychology:

➢ Understands education as a model of social change or stability for individuals, communities and cultures;

➢ Works directly to enable individual and community development, learning and well-being in schools and other agency settings;

➢ Recognises how the reality of social power and values shapes not only disadvantaged groups but the role of applied psychology;

➢ Builds on the experience of school psychologists working in the interests of all populations in schools, not only those with disabilities, difficulties or illness;

➢ Sees learning as a person – environment interaction shaped by the historical narratives of each side for the pattern of events arising;

➢ Offers a preventative, reflexive application of psychology and collaborative research to individuals, communities and strategic policy makers;

➢ Uses understandings from community development and alliance building to increase social inclusion and empowerment of service users;

➢ Promotes and sustains multi-agency partnerships and networking;

➢ Rigorously examines narratives for psychological development, learning and well-being and is well-placed to understand and inform the agendas that constitute children's, young people's and family services.

Peter Jones, January 2005, DECP conference London

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