Book Reviews

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COMMUNITY DYNAMICS AND MENTAL HEALTH. Donald C. Klein. *New York: John Wiley and Sons, 1968. xvi + 224 pp. $7.95.*

Community Mental Health work, ironically, has heritages that have often limited the development of communities. The heritage of focusing upon internal pathological processes as a major determinant of individual differences, and the illusion that the role of the professional is a necessary ingredient for community change, are two examples. A devotion to the sacred status of discrete community services, as well as the assertion of ethical or political neutrality of a service program are other examples of heritages that have preempted the positive development of communities. When citizens or professionals move out and engage in the ongoing activities of a community, such heritages are questioned and challenged sooner or later.

For instance, when we work with citizens who are not our patients, we are struck with the limits of concepts that refer only to man's hang ups but seldom refer to his resources. If we help, we must surely also gauge a person's talents. We can be amazed at how much gets done or how often change is thwarted by persons and circumstances that do not involve professionals. We are humble when we find out that the alleviation of community problems, when they do occur, happens when a complex of multiple and even subtly interrelated programs and persons are involved. We can be inspired when we learn that constructive action is generated when professionals and citizens are involved and advocating a program. Our heritages are redefined as a consequence of these personal experiences with the processes for community change.

This book is about such topics. It provides a new perspective for identifying basic processes in doing successful community work, and in changing the life processes of the community. The author's involvement in the development of the Human Relations Service of Wellesley, Mass., his close collaboration with Erich Lindemann at the Massachusetts General Hospital in Boston in the 1950's, and his long and intensive community and group work with the National Training Laboratories gives the book an authentic context. The book is not an array of ideas derived from the laboratory; instead it presents a series of proposals for topics that should be explored and questions that need answers in order to create a psychology of the community.

The book is a very provocative road map for the "mental health teams and their many allies" for which the book was written. Each of the sections of the book discusses five key topics: *The Community as a Setting for Mental Health Work, Theoretical Perspectives on the Community, Studying Community Processes, Change in the Community* and *The Community as an Arena for Action.* Throughout these five sections, the author's own value position abounds—the community "must become the essential source of mental health itself." The author's concern with the development of the community as a goal for community mental health work takes the rationale for preventive services away from the operation of mental health service

systems and illustrates steps towards the creation of a psychological community. The author's value pervades the eighteen chapters as he suggests appropriate processes for achieving these conditions. In the reviewer's opinion, the section on Change in the Community is the most comprehensive and has the more detailed exposition. The reader is provided with examples, vignettes, and anecdotes that illustrate the types of pitfalls that need to be taken into account. The section on Theory selects four basic processes to describe community behavior: Communication, Maintenance of Boundaries, Decision Making and Power, and Linkage Between Systems. While each of these processes is salient, they represent different levels of complexity. The discussion remains at an abstract level and it is not always clear how these ideas are related to each other and how they apply to a different communities. This section also includes a chapter of insightful comments on the application of ecological concepts for viewing community activities, clearly affirming the benefit of seeing a community as a complex series of related processes. In sum, the section offers new dimensions for the assessment of community change.

The book is an engaging and well-presented series of guidelines to force us to think about the processes of community change. It admirably succeeds in its purpose of offering advice, presenting ideas, and illuminating examples that are apart of the life history of most communities. On occasion the richness of the observations are marred by a truncated discussion. The effect of the abbreviated treatments maybe such that the reader may not appreciate the helpfulness or the validity of the ideas because of the capsulated discussion.

Readers who have witnessed or been a part of communities undergoing confrontations will find little in this book to help them understand how the town got that way, but they can pick up a few good pointers on what it will take to create a locale that can develop and care for others. It is likely that the author's thesis of working toward a healthy end state will be applicable for only a few select suburban, satellite communities where intellectual and introspective persons reside. Nevertheless, all students of communities, whatever their personal and professional heritage, can reflect on the author's words and his aspirations and check themselves out regarding their commitment to community development. The book is one of the few books on community mental health that worries about the qualities of communities and deserves our careful reading and response.

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COMMUNITY PSYCHOLOGY AND MENTAL HEALTH: PERSPECTIVES AND CHALLENGES. Edited by Daniel Adelson and Betty L. Kalis. *Scranton, Pennsylvania: Chandler Publishing Company, 1970. vii + 341 pp. $8.00 cloth; $4.75 paper.*

MENTAL HEALTH AND THE COMMUNITY: PROBLEMS, PROGRAMS AND STRATEGIES. Edited by Milton F. Shore and Fortune V. Mannino. *New York: Behavioral Publications Inc., 1969. xv + 209 pp. $7.95 cloth; $4.65 paper.*

The literature of community-oriented practice is growing at a prodigious rate; these two volumes are good examples of what is coming out in print now. Both are collections of papers which represent the thinking, the action, the level of analysis, and

the level of evaluation of the early period of community-oriented programming. The Adelson and Kalis volume is composed primarily of symposia papers presented at APA in 1966, and other papers prepared for other conferences about that time. Shore and Mannino contains papers which were solicited for the volume with each author working from the editors' outline suggesting the problems to be covered. I emphasize the way the books were put together because it is reflected in their character and in their usefulness. Both books reflect the broad, sprawling, unformed nature of theory and practice in the field, but as their style differs, so does their informative value.

The Adelson and Kalis volume suffers from the fact that most of the papers were originally prepared for presentation at a conference. To maintain an audience's attention, the papers must present their points quickly and sharply. Data, detailed methodology, or intricate argument would be lost on a conference audience. But the very features which make a good conference paper—the inspirational tone, the swiftly sketched idea, the passing reference, the bonmot—make for a poor written paper. Because one has time to stop and think about what is written, the presentations become frustratingly incomplete and superficial. Moreover, a long period of time elapses between the original presentation at a conference and the printed page. Ideas, concepts and pilot programs which seemed fresh and novel in 1966, and earlier, and which were then in the nature of promissory notes, now seem unfortunately vague, diffuse, and naively optimistic.

Many of the chapters in this volume are also self conscious, as if the participants understood they were part of a social movement, and were as much concerned with interpreting that social movement as contributing to its substance. A number of the discussions are less explications of theories and positions than they are explications of the character of various theories and positions. In one sense the discussion is directed toward experts who already have mastered the details and who are concerned with understanding themselves. Sarbin's statement of role theory is an exception in this volume, but the reader is left to find his own way to use role theory, or any other theory discussed in the book in considering the chapters in the section Approaches to research and Action. Unfortunately, the program descriptions are also polemical, inspirational and sketchy so that one would be hard put to find critical observations in those chapters to assess the applicability of theoretical concepts. The papers are easy to read, and in some instances are graceful essays, but the advanced student of community practice should not mistake its 1970 copyright date as the sign of a work which offers the latest in the field.

Shore's and Mannino's volume is more successful in what it attempts to do. Oriented toward the problems of establishing and maintaining innovative programs, the chapters are more or less personal accounts by program directors of the steps they undertook to initiate programs, to meet problems within the programs and to deal with various forms of resistance. The authors do not deal with problems of theory, and in keeping with the emphasis on description, there is little explicit consideration of problems of evaluation. However, any researcher who designs studies from the framework of conventional concepts of methodology should read these accounts of program carefully in order to understand some of the limits of "laboratory" based approaches to deal with highly complex field settings. Many of these papers will be useful in teaching, to prepare students for the vicissitudes of the field of experience. They will also provide comfort to the field worker, to learn that he is not alone in his trials and tribulations. Those who are impatient for immediate results and who despair at setbacks might well study several of these chapters to gain an appreciation of the time perspective (years) involved in program establishment and maturation.

The limitations of the papers arise from several sources. First, the methodology of participant observer research is not well understood (Balaban, 1970). We really don't know the sources of data, their controls for the vagaries of memory, and the biased selection of incidents. We know we are getting the viewpoint of a participant, but we really don't know what he is *not* telling us, or what he can't tell us because of lack of opportunity to observe, or an inability to be fully candid. This is not to suggest the papers are dishonest. On the contrary, the reports are very honest and do not conceal errors. My point very simply is that if we are to put participant observer research to full use, we need to be able to go beyond informative description and learn how to collect and evaluate data of this kind in more systematic fashion.

A second limit of the papers is an almost complete avoidance of discussion of the personal characteristics of the participant observer. The program is described, and one can draw inferences about the nature of the man from the writings, but we really do not have a good view of him; and the man is a variable in the work. Mannino and Shore were personal friends of policemen. Few of us are. They evidently had access to politicians and businessmen at a level only a few academics approach. Kiesler was willing to settle in a rural community, but most psychiatrists seek out relatively few urban centers in which they practice. In other words the characteristics of those who engage in program development transcends their technical competence. It would be wrong in the extreme to assume that much of what was done was based primarily on professionally learned expertise. Undoubtedly something was contributed by the professional backgrounds of the participants, but an equal amount was derived from some other set of variables.

The issue is important for many programs which succeed in pilot phases and prove not to be adaptable in larger settings for a variety of reasons. One important one, in my opinion, is the lack of attention to the program developers and their base in operations. A program is more than its design. It is also the people who make it up and the social context within which it functions. The problem of "routinizing charisma," and of understanding the relationship between program form and social context is one which will have to be approached if successful pilot programs are to be generalized. These papers do not deal with the issues, but they provide the basis for speculating about them.

A third limitation is in the form of these papers. They are all well written. They tell their stories simply and clearly, some with more dramatic impact than others. However they are simple linear narrations and suffer from the limits of skill of the writers and the limits imposed by the "essay for social scientists" form. If we are going to write this kind of narrative as a form of scientific communication, and, for many purposes we have no other recourse, I would suggest that we pay serious attention to the use of talented novelists as part of the research team; that we ask such people to develop fictionalized accounts of programs and people, submitting these accounts to the social scientists for criticism as to validity, and for commentary in the form of footnotes to highlight the important theoretical and methodological problems.

In sum, both of these books reflect the state of the art as of five to ten years ago. Both have something to offer, Adelson and Kalis on the level of theory and interpretation of the field, and Shore and Mannino on the level of program description. However, progress in the field will be shown when we see more systematic theoretical analyses and more sophisticated modes of data collection and analysis. A field can go only so far on the promise to produce, on its rhetoric, and on its honest admission of problems and difficulties. Something more substantive will be demanded in the near future if the field is to thrive.

REFERENCE

Balaban, R. *The methodology of participant observation.* Department of Psychology, State
    University of New York at Buffalo, 1970, mimeographed.

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BOOK REVIEW COMMENTS

To the Editor:

We are writing to comment on your review (C.M.H.J., 1970, 6, (4), 327) of our book,
"Handbook of Community Mental Health Practice" (Jossey-Bass, 1969). It raises
some crucial issues in community mental health which we feel need to be further
discussed. We could not agree more with many of the reviewer's observations—the
importance of maximum community participation in program planning, of focusing
not just on identified patients but on the needs of all citiezns within one's jurisdic-
tion, and so on.

But we feel the main point of the book was missed—an attempt at an honest
exposition of the practical problems of putting community mental health theory into
practice. Time and time again our staff has read in the literature impressive theoreti-
cal discussions of what community mental health should be as well as descriptions
of programs which seem to solve major CMH problems. Upon visiting these centers,
both in the U.S. and abroad, or talking with staff from these centers, we have all too
often learned that this particular theory turned out not to be practical, or that par-
ticular program was beset with problems. Not infrequently we have been told that a
program that had impressed us when we read about it in the literature was now
"temporarily discontinued." There have been, of course, some notable exceptions of
centers which have freely described their problems and failures as well as their suc-
cesses—Fort Logan in Denver is one. But, in general, we feel there is a gap in the lit-
erature between the theory and the reality of CMH practice. Filling this void was
our purpose in writing this book.

For the book we chose those essential services well enough established in 1968 for
us to know (all too well) the pitfalls and blind alleys into which a CMH program
can stumble as it attempts implementation. Since then our continued efforts to serve
persons in our community other than identified patients, to involve the community,
the consumers of our services, in program planning, to utilize nonprofessionals, and
to develop effective services for youthful drug abusers have only reinforced our
earlier conclusion that developing a sound theory is only the beginning. Putting the
theories into practice is an art in itself; our experiences since 1968 would fill another
book.

Most importantly, the reviewer's reference to a "first-generation community men-
tal health center" implies that one can observe functional examples of what we might
term "second-generation community mental health centers" which ". . . make com-
prehensive high-quality clinical services available promptly to *everyone*," a center
which has actually begun ". . . to concern itself with and improve the quality of the
lives of all people in its jurisdiction."