Clinical Psychology *and* the People: Another Perspective

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Raeburn's (1978) article is a timely reminder of the need for psychologists to apply their academic and research skills to the problems of the community, and it warns of the pending dangers of self-centred professionalism. Raeburn chides all universities, except one that has a brand new programme, for being "fifteen years behind", for "retreating into conservatism", and for encouraging "self seeking" rather than well being of society as a whole. The assumption is that he has examined the content of psychology courses at different universities as well as the quality and content of professional practice in different provinces, and with the exception of the course at Otago, that he says has promise, he found them all to be unsatisfactory. The conclusion was disappointing to anyone who has spent much of the last ten years in trying to bring about curriculum and practicum developments of the kind that Raeburn now For that reason the modest achievements are now described, and other people are left to decide whether the description of "backwoodsmen" or "pioneers" were appropriate for the initiators. The case will rest upon the proceedings of the New Zealand Psychological Society's Conferences, curriculum developments at Victoria University, and changing professional practice. Were more details available about the responsiveness of other universities to the community practice of psychology, as well as more information about the actual practice of psychologists as professionals in other districts, that too would have been included. Even without that additional information it is contended that there is sufficient evidence to rebutt the criticism that psychology lacks a community perspective in New Zealand today.

Conferences

The tenor of New Zealand Psychological Society Conferences has changed in recent years, and it now reflects the enthusiasm and integrity of the majority of members as they tackle their applied and professional problems. Those changes can be seen in the preponderance of practitioners over academics who attend the conferences, the content of the problems to which they address themselves in their papers and the range of concerns that they raise in Social Issues Forums. Many will agree that the 1978 invitation lecture by Professor David Stea on transient, marginal and immigrant living was

most relevant to the emerging theme of community psychology. Victoria University can take no credit for the widespread reaction of those younger graduates to social issues, but it can for the appeal for such community involvement that was made in the 1972 Presidential Address, and for initiating both the first Social Issues Forum and for proposing that a Social Issues Committee of the Council of the New Zealand Psychological Society be formed. The latter has since generated a number of measured public comments and scholarly contributions for presentation to the news media at large and to the Parliamentary Select Committees on matters of health, education, welfare and justice.

Academic Developments

The loosening of the old University of New Zealand ties in 1961 enabled the former colleges and newer universities to recast the structure and content of their courses. Some were quicker to respond than others, but all psychology departments gradually introduced postgraduate teaching courses in clinical psychology. As to be expected, the early courses were somewhat in the British tradition, but they have not remained so. Those that began later initiated schemes that were relevant for local needs. The course at Victoria University, for example, was designated specifically:

As a course of academic and professional training for psychologists wishing to serve the community both in traditional settings such as hospitals, prisons, and other institutions, and in developing settings for assessment, treatment and rehabilitation, such as health centres, community agencies and other

'helping' services. (Note 1)

It is good to see that the proposal for a specific course in community psychology at Waikato University has now reached the stage of being offered in its own right, rather than as a clinical

appendage.

Apart from the specific courses, or rather the specific postgraduate courses, psychology students at all levels at Victoria University have been encouraged for many years deliberately to seek some voluntary social service to which they can make a regular commitment of time outside their academic work. Those undergraduates who followed the scheme found the experience emotionally satisfying, as did the old people whom they visited, the immigrants whom they taught a new language, the backward whom they chaperoned on outings, and those who telephoned the Crises Centres to which

the students attached themselves. These 'outside commitments' were formalised for the Honours students as part of the course work in which they were placed under continuing supervision of Mr D.F. Brown alongside psychologists in a wide variety of settings, with school teachers, nurses, parents of handicapped children, general practitioners, those in rehabilitation units, and a social welfare department. Such practical work was buttressed with lectures, seminars and tutorials that drew from a wider range of references than that now recommended by Raeburn (1978).

The academic orientation of the subject at Victoria University was towards a practitioner-scientist model in which environmental components were not ignored (Taylor, Note 2), and its inspiration followed his exposure to the student riots abroad (Taylor, 1970). Subsequently in 1973 the same issue was presented in a paper to the N.Z.Ps.S. Conference (Taylor, Note 3) and restated after further visits, this time to concentration camps as well as to battle scarred Belfast (Taylor, 1979). The time has now come for the 'environment' to be given the same academic attention as 'personality' in the formula B = f(P,E).

There may still be doubt as to the most appropriate model of scientific and professional training by which the environment may be assessed and changed (Shakow, 1978). Whatever the model espoused, the professional programme and professional obligations needed to be enunciated and periodically reviewed. Otherwise private practice might lead primarily to the provision of psychological services for the affluent (Gottfredson & Dyer, 1978), and the perpetuation of social policies that fail (Goodtsein & Sandler, 1978; Illich, 1977). Matters of that kind are not solved by registration (Gross, 1978), but by personal commitment to human welfare that is prior to, but can be enhanced by, university training.

Changing Professional Practice

Contrary to the insinuations, practising professional psychologists have not been dead on their feet. In the Wellington area, for example, educational psychologists have been far from officebound and traditional in their practice. They have been intent upon helping teachers within schools to cope with difficult children rather than to segregate the children into special classes, and they are forever supporting and organising groups of parents with particular family problems. Similarly, psychologists for the Justice Department are now community based rather than prison based, and their main emphasis is on the preventative work with probationers rather than the rehabilitation of criminals. For their part, psychologists for the Wellington Hospital Board have been developing community-based preventative programmes in

cooperation with numerous voluntary and statutory social services in Porirua and Upper Hutt districts. In 1977 that work led to the establishment of a post for Community Psychologist who was to be based in the community rather than at a hospital. As a result, psychologists are now to be found offering their services in many situations in which previously they might never have appeared.

It remains true that the pioneering community work has yet to generate good quality research. The reasons for that may be that the forerunners are still searching for tangible and manageable variables and research issues, and that academics have yet to develop research models to incorporate environmental components. It is not necessarily a shortage of money that inhibits community research, because the New Zealand Medical Research Council, the Child Health Foundation, and the Mental Health Foundation have been far from unwilling in recent years to support such studies. There is also a distinct possibility that the newly established Social Science Research Council may be prepared to support community-based research.

Summary

There is sufficient evidence to suggest that psychologists in New Zealand have not been unresponsive to community concerns. They still need to develop techniques for locating and specifying problems, and to acquire skills for inducing social change. They may be a little behind in the practice of some psychologists elsewhere, but not so far behind that, in the Wellington district at least, they need to be admonished.

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