GLOBAL JOURNAL OF Community Psychology Practice



PROMOTING COMMUNITY PRACTICE FOR SOCIAL BENEFIT

Are Our Competencies Revealing Our Weaknesses? A Critique of Community Psychology Practice Competencies

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Recommended citation: Dzidic, P., Breen, L. J., Bishop, B. J. (2013). Are Our Competencies Revealing Our Weaknesses? A Critique of Community Psychology Practice Competencies. *Global Journal of Community Psychology Practice, 4*(4), 1-10. Retrieved Day/Month/Year, from (http://www.gjcpp.org/).

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Abstract

In this paper we argue that the focus on the development and application of practice competencies for community psychology runs the risk of being a distraction from good practice. We outline three areas that demonstrate the inherent flaws in focusing on traditional notions of competencies for community psychology – the limitations of competencies themselves, the schism between competencies and ethics, and the disconnect between competencies and applied practice. In opposition to traditional notions of competencies underpinned by positivist and mechanist notions, we propose that the distinction between virtue and procedural ethics provides a model for comparing and contrasting virtue and procedural competencies. Virtue competencies provide an orientation and value-base that may be applied to any context in which community psychologists work; in this way, competencies may be positioned as tools *for* understanding, rather than *as* understandings.

Keywords: Competencies; Ethics; Practice; Values; Context; Indigenous and cross-cultural psychologies; Reflexivity

In this paper we argue that the focus on the development and application of practice competencies for community psychology is a distraction from good practice. However, before embarking on a critique of competencies for community psychology, we must first examine community psychology as a discipline. Community psychology itself is contested; definitions of community psychology depend on time, geography, and context, and serve different purposes (Fryer & Laing, 2008) and its influences and applications are evolving (Gridley & Breen, 2007). For us, community psychology emerged primarily as an alternative perspective for training clinical psychologists in the United States. While the origins of community psychology are culturally and historically specific, the underlying value orientation broadly transcends space and time. Crucially for us, community psychology is not static and does not refer to a body of theory and research. Rather, it is an orientation shared between some professionals (mainly psychologists) to challenge the frameworks that support and define the status quo. It is a questioning orientation that is not specific to topic or discipline and reflects a willingness to examine phenomena in its broader contexts. We take this to be the essence of a contextualist approach. It is the orientation that led our forebears to doubt the utility of traditional clinical psychology in addressing mental health issues in the face of comparatively inadequate and structurally-unjust provision of resources. To us, community psychology is the ability and willingness to question what is the fundamental nature of current practices and question whose interests these practices serve.

One of the most important worldviews of western societies like the United Kingdom, United States, Australia and New Zealand is that communities are comprised of discrete and separable individuals (Frie & Coburn, 2011; Sampson, 1989, 2000; Sarason, 1981). This axiomatic, acknowledged assumption (as Sarason, 1981, termed it) is so pervasive that, even in its revolutionary zeal, community psychology could only bring itself to be critical of mainstream individualised treatment, rather than reconceptualising its understandings of people. Aspects of community change were operationalised in terms of social support and wellness. While the fledging discipline recognised the importance of a broader conceptualisation of people, as done in sociology, anthropology, history and politics, it stayed psychological, and thus inevitably, individualistic (e.g., Speer et al., 1992). In this paper, we will not attempt to delineate more appropriate conceptualisations of people, but will explore how the unquestioning assumption of psychological individualism led to the framing of community psychological skill and knowledge in terms of competencies. We would suggest that the notion of competencies is inextricably linked with psychological individualism. Competencies are measures of an individual's abilities and as such are trait or formistic characteristics (Altman & Rogoff, 1984; Pepper, 1942; Tebes, 2005); thus, they are conceptually incommensurate with contextualism (Pepper, 1942). What we will attempt to do is to provide a dynamic approach to community psychology skills and practice that is reflective of a contextualist core and does not confound formism and contextualism.

What's Wrong with the Focus on Competencies?

Skills development is obviously important community psychologists must be able to do things - but the focus on competencies is problematic because it is acontextual and bureaucratic. It loses sight of the bigger picture and is therefore reductionist. Nelson and Prilleltensky (2010) state "A contextual assessment is necessary to understand the subjective experience of the residents of a particular community" (p. 56). Failing to recognise the importance of context, and practice as contextualists is antithetical to the principles of community psychology. Competencies are static targets that do not reflect the dynamic contexts in which community psychologists engage. Competencies wrongly imply that once a standard is met, the individual is therefore 'competent' irrespective of context. How is it then that we can propose working to a set of competencies? One way to view this issue is to invoke the difference between outcome and process. Competencies, especially in its bureaucratised form, are inherently outcome and deficit-focussed whereas process skills involve dynamic context pattern recognition, as well as skills in intervention.

Kurtz and Snowden (2003) introduced an ontological typology they referred to as "cynefin," (a Welsh word loosely meaning place or habitat), in which they distinguished between the known, knowable, complex and chaos. Traditionally, mainstream psychology operates as if the only two domains are the known and the knowable. Kurtz and Snowden argue that the complex domain is not able to be investigated using traditional concepts of cause and effect, and thus not reducible to simpler propositions traditional in reductionistic science. They argued that the complex may have some regularities and these may allow patterns to be recognised. We would argue that this is the domain of the human sciences (Polkinghorne, 1983), where practice wisdom is required (Polkinghorne, 2004), where participant conceptualising is vital, and where ambiguity and uncertainty abound (Bishop, Sonn, Drew, & Contos, 2002). We see these complex and dynamic social systems as the domain of community psychology.

Recognising that social settings are necessarily complex and that intervention and practice are context-dependent is more than rhetoric. It requires us to let go the certainties of reductionist theorising and methodology. It challenges us to think about complexity in terms that are determined by the setting and not necessarily endorsed or coveted in traditional psychology. We need to recognise and emulate those who formed the foundations of community psychology, not in terms of what they did, but in terms of the courage they showed in challenging the status quo, and reflectively thinking about what we are doing and our places in the social structures. Values and worldviews are at the core of the 'new' community psychology (Bennett et al., 1966; Nelson & Prilleltensky, 2010). These values and worldviews need to be at the core of community psychology competencies. The dilemma for pedagogy is that these values and worldviews are best learned through experience and not direct instruction. There needs to be a process of development and refinement of these values and worldviews as they emerge and nurtured through reflection and reflective theory development. What needs to be at the heart of any consideration of competencies is that it is the ability to reflect and grow that is the competency, not the final values and worldview, per se. Below, we discuss three areas to demonstrate the inherent flaws in focusing on competencies for community psychology and note that these criticisms are likely to be relevant to psychology as a whole.

The Limitations of Competencies Themselves Community psychology practice competencies in effect construct community psychology. As such, we must ask: Whose competencies are they? How are they derived? How are they used to determine who is (and by implication, is not) competent as a community psychologist? To what end? Fryer and Laing (2008) passionately expose the problems in taking United States-derived community psychology and transplanting it elsewhere:

Put bluntly, the USA has the resources and personnel to promote its community psychology in exactly the same way that it promotes its soft drinks industry, fast food industry and film industry. The ideological domination of community psychology by United Statesian versions of community psychology is arguably just another manifestation of United Statesian global military, economic, cultural and intellectual domination.... Despite adoption of a progressive rhetoric, much US community psychology is individualistic, naively ethnocentric, increasingly formulaic, acritical and hardly distinguishable from the mainstream discipline, especially in practice. Much of US community psychology is, in other words, effectively acritical mainstream psychology business as usual. $(pp. 9-10)^{1}$

While other commentators might not argue the point as passionately, they have noted that community psychologies outside the United States tend to be influenced considerably by community psychology within the United States (Fisher, Gridley, Thomas, & Bishop, 2008; Gridley & Breen, 2007; Gridley, Fisher, Thomas, & Bishop, 2007). It is clear then that community psychology and its practice competencies serve a purpose, privileging some accounts of the world while devaluating others. Further, competency documents are responses to current problems but will likely themselves be problems in the future. Thus, they create a situation whereby attempts to solve issues that we ourselves have proliferated could have avoided being created all together.

Competencies for community psychology create a curriculum based on expected proficiencies and educational stagnation where curricula fail to be adaptive, contextual, and innovative. Psychological competencies are conservative and their interpretation and application is even more conservative (Breen & Darlaston-Jones, 2010). Curricula are necessarily non-adaptive as their establishment is based upon processes of reifying current practices and theories. Furthermore, the creation of competency documents assumes that these 'things' maybe are teachable and assessable. The assessment of these competences requires dichotomous questions presented in checklists, rating scales, and are possibly accompanied by open-ended reflection questions allowing someone in authority to reflect upon the student's ability to meet a stated competency (Reflexivity addressed? Yep. Data saturation achieved? Yep). Tick-a-box assessment of practice competencies focusses on the mechanics rather than on philosophical or contextual concerns and are therefore mechanistic rather than cohesive.

The Schism between Competencies and Ethics

There are parallels between the notion of creating competencies for community psychology and the current challenges that community psychologists often face when working within the parameters of ethical guidelines. The application of ethical guidelines within community psychology is often clouded by a range of uncertainties that come with engaging in complex social settings as opposed to the comparatively controlled environments of therapy or 'traditional' (experimental) research. The control and predictability that emerges with engaging with an individual, particularly in instances where people are decontextualised (such as a laboratory setting), makes contemplating the meaning of ethical practice a somewhat more literal process. Practices, protocols and guidelines are more likely to have direct transferability. In fact, it is these settings on which ethical guidelines are modelled and developed and so it is only natural that they be of direct relevance and applicability. The relevance and applicability to community psychology is not readily apparent, forcing at times precarious interpretations of principles that are presented as fixed rights and wrongs.

O'Neill (1989) is credited as initiating the first critical discussion on the complexities of ethics in community psychology. All psychologists, irrespective of sub-discipline, are responsible for identifying and appropriately addressing ethical conundrums in action; what is different for community psychologists, however, is the range of factors within the community setting which make this process more difficult. The central question of O'Neill's thesis concerned the community psychologist's engagement of multiple people and multiple settings at the one time, and he posed the questions: "To whom is the psychologist accountable, and for what?" (p. 324). These fundamental questions recognise that the impacts (negative or positive) of our work are not limited to individuals and communities in our direct contact. Unlike a therapeutic setting between psychologist and client, the community engagement setting is not necessarily proximal. Consider the following hypothetical situation:

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A multidisciplinary collaborative research project was initiated to address the issue of silenced poverty in agricultural-based rural communities. Through its pilot stage, researchers explored a range of factors that contributed to the economic and social hardships experiences in one of the towns. The town was chosen due to a range of factors. It was not long before surrounding towns people were made aware of the social investment being made, but not to their town. While the research endeavour was defended, in that the programme would be 'rolled out' to surrounding communities, including theirs, the surrounding townspeople remained sceptical. Unbeknown to the researchers, historically there has been strong competition within an extended family that dominated farming in the district. Feuding between two of six siblings over property ownership had resulted in a social rift not only between the family members, but also between other families who sided with the respective siblings residing in their own town. Soon, myths began to propagate as to why that particular town was chosen as the first town engaged, and not others, and the researchers were met with accusations of favouritism and bribery.

In this scenario, unintended consequences emerged from the best of intentions, and presents as an inherent risk when engaging in community settings. Procedurally, the research team followed all of the required ethical requirements. Their failings, however, may be explained by their lack of immersion in the district prior to their identification of the pilot town. The relatively decontextualised approach to town identification (a desktop study of demographic and economic statistics) failed to capture the social dynamic which ultimately led to not only the ethical conundrum concerning which town received the programme, but an additional Volume 4, Issue 4

ethical issue concerning claims directed at the integrity of the researchers and the research. The researchers abided by the relevant ethical guidelines and processes expected of them, making them 'ethically competent'. However, this 'ethical competence' is based solely on procedural ethics the policies and processes usually presented in the form of ethical guidelines (Guillemin & Gillam, 2004). By nature, procedural ethics are mechanistic and their use assumes a context that is controlled and clearly defined. It is assumed that we meet an ethical dilemma and time will stand still while we wrestle with the best way to deal with the situation. Ethical examples used in teaching are based on the premise that complex, evolving, and dynamic situations can be reduced down to a simple duality. Most of these examples involve two parties (typically individuals) and the question becomes what decision made by a professional will result in the least harm. Procedural ethics serve the interests of researchers rather than the participants they research (Prilleltensky, 1997; Smith, 1999) and there are instances where adherence to the guidelines may be exploitative, particularly the uncritical application of Western knowledge to research on, and not with or for, Indigenous peoples (Fielder, Roberts, & Abdullah, 2000). The following of these guidelines remains the dominant litmus test employed within psychology for defining ethical conduct.

Ethical practice within community psychology is clearly more complex. In contrast to procedural ethics are ethics in practice - the ways in which researchers and practitioners address (unanticipated) ethical issues as they arise (Guillemin & Gillam, 2004). Most real situations, particularly those relevant to community psychology practice, involve multiple parties, all with different agendas and interests in an ongoing flow of social action. The social settings in which community psychologists engage are not clearly defined, nor are they based solely on place or locality. As such, attention to procedural ethics *alone* presents a redundant exercise given that the ethical guidelines that would presumably be used to appraise ethical competency are not the best fit for community psychology practice.

Given our knowledge of the complexity and diversity within and between communities and our lessons from endeavouring to employ procedural ethics in these settings, competencies appear counterintuitive to the realities of our work. Like procedural ethics, competencies are relatively static, acontextual, and motivated by offering protection to the community psychologist, rather that the parties that the community psychologist engages. These motivations are unsuited to community psychology.

The Disconnect between Competencies and Applied Practice

A sound indication of the worth of competencies is their utility in promoting a field of practice. However, an outline of the history and development of community psychology in Australia highlighted the paradox that bureaucratic forces intended to professionalise community psychology actually threatened its survival (Gridley & Breen, 2007). The recent publication of the extent of lobbying in which community psychologists engaged in order to have community psychology recognised as a legitimate area of practice in Australia (see Cohen et al., 2012) provides a clear lesson that, despite the development and use of competencies, community psychology is facing much bigger perils.

Community psychology needs to capture more readily the complexities and contexts of psychological phenomena. Psychology in Australia is monocultural (Breen & Darlaston-Jones, 2010; Riggs, 2004; Sheehan, 1996), leading to the assertion that "there is no distinctive Australian psychology but the areas reflect mainstream international psychological research" (Garton, 2006, p. 9). Psychology is predominantly a monocultural discipline (Guthrie, 2004) and has been described as cultural malpractice (Hall, 1997). Community psychology in Australia fares little better, with it being highly influenced by developments in community psychology in the US (Gridley & Breen, 2007).

Indigenous and cross-cultural psychologies provide a model for the ways in which competencies may be developed for and applied to community psychology practice. In Australia, working with Aboriginal and Torres Strait Islander people is an example where 'tick-a-box' competence assessment does not and cannot work (Purdie, Dudgeon, & Walker, 2010; Vicary & Bishop, 2005). Rather, these forms of competence assessment are seen as incompetent as they perpetuate the status quo. Somewhat paradoxically, Indigenous and cross-cultural psychologies draw on competencies; however, there is a fundamental difference in the way competencies are conceptualised and used - within these contexts, competence is concerned with attitudinal as well as practical readiness. Readiness in both its forms is based on a value set based on a critical consciousness. While competency assessment can be problematically mechanistic, the appraisal of cultural competence comprises knowledge of cultures, histories, and worldviews; the critical awareness of personal and discipline-based values and attitudes; and a repertoire of skills (Garvey, 2007; Ranzijn, McConnonchie, & Nolan, 2009).

Similarly, Vicary and Bishop's (2005) model of cultural engagement privileged the examination of personal and professional biases, values, and assumptions before the development of an understanding of the culture of interest and its history. Conceptualising competence more broadly than what people do and how they do it means that competence is identified as relevant in terms of critical self and disciplinary awareness as well as practical skill. Competence in cross-cultural settings is *dependent* on contextualised thinking and action. Forms of engagement, the development of areas of focus, choice of methodology and method, and data interpretations are predicated on the practitioner scrutinising the basic tenets of his or her practice. Noteworthy also is the notion that cross-cultural competency is independent of individual context (e.g., a practitioner may be competent in one cross-cultural, social, or physical setting and not another) and as such competency development is not a distinctly linear process with a discrete or binary outcome but is instead reflective of the practitioner's response to the situation at hand. Here, the notion of 'competence' is something far greater.

Cross-cultural competence is not constructed as static or procedural; rather, it is a value ethic that calls upon the reflexivity of the community psychologist. Cross-cultural competence extends traditional notions of competence by positing that procedurally 'doing good' is insufficient (e.g., attending training courses, engaging in consultation, abiding by specific ethics protocols). By following the unquestioned procedures of 'doing good', we are merely meeting the criteria deemed appropriate by the dominant group. Crosscultural competence questions these dominant positions and worldviews, and instead requires that we do something to challenge colonialism (Smith, 1999). Failure to challenge the dominant paradigm is in itself oppressive, paradoxically reinforcing the structures and values that gave rise to the original injustice and oppression (Sarason, 1981). Ideally, when considering competencies for community psychology, we similarly should strive to avoid perpetuating the dominant position. By doing something, Montero (2012) cites Demo (1985) who reflected on the role of a researcher from a dominant community, stating:

... the researcher does not bring in participation, at the most, he [sic] motivates it, assesses it; he will never substitute the oppressed: He tends to be more in the order of the obstacles, than in that of the supports. Moreover, there is no condition for being a participatory researcher in that one that does not recognize the oppressor within him/herself. In that sense, the practical ideological identification, is a hard conquest, that only a few achieve (p. 83). Failing to recognise our relative position of power as community psychologists is fundamental to what cultural competence endeavours to challenge. Having awareness is not something that can be appraised or assessed in the form that competencies are traditionally conceptualised. Being culturally competent is not merely employing culturallyappropriate methodologies and practices, for example ('doing good'); instead, it is about actively challenging the underlying systemic inequalities. Traditional notions of competencies cannot capture the latter.

Conclusion: Toward Competent Competencies

In this paper, we argue that the development and use of competencies for community psychology, underpinned by positivist and mechanistic notions, is not conducive to the values or practice of community psychology. Determining competencies runs the risk of reducing the complexity of what community psychologists do to disconnected soundbites of the activities, therefore decontextualising theory and practice. As we have established, the development and use of competencies for community psychology is predicated upon a series of assumptions that fail to trouble the established status quo. Furthermore, they fail to account for ethics in practice. Cleary then, determining competencies for community psychology appears counter intuitive to the disciplinary cause.

The problem with the notion of competencies is that the focus is on outcomes rather than processes. The focus of educating and developing community psychologists should be on developing an *orientation* that fosters skill development through a process of reflective learning through action – a way of being, not a way of doing. Learning through doing is an iterative process and enables two-way learning; both student and teacher, or practitioner and supervisor, benefit. As such, it is not competencies per se, but an orientation and valuebase that may be applied to any context in which we work.

The social world is complex, largely chaotic, and changing (Gergen, 1973). Adopting methods that require the ability to tolerate ambiguity and uncertainty means that the chaotic nature of the world and of community can be recognised and embraced, rather than searching for order and certainty. This means that theories and practices cannot be seen as immutable. The application of course structures and outcomes and professional practice guidelines needs to be flexible and able to resist reification and solidification. Professionalism in community psychology means that we accept that the content of our theories and practices will change with each community with which we work, but that processes by which we work will be based on concepts of uncertainty, change, and fluidity.

Returning to cynefin (Kurtz & Snowden, 2003; Snowden, 2002) and the four domains of professional life - the known, the knowable, the complex, and chaos - competencies need to reflect the fact that the world is complex and sometimes chaotic and we need to be comfortable working in the zones of complexity and chaos. The competencies we need are the ability to tolerate ambiguity and uncertainty. The ability to recognise uncertainty and to be able to function in poorlydefined or complex settings is a hallmark of a 'good' community psychologist. Communities are necessarily complex and entering one requires an ability to recognise and acknowledge preconceptions about these people's lives and the way the community functions. We need to see our actions as part of ongoing social action, and that we are only players and not arbiters of right and wrong; we just represent a specific value orientation.

In contrast to mechanistic and reductionist competencies, community psychology requires models that move beyond pragmatic competencies towards applied, values-based understandings and that facilitate the building of a knowledge base in incremental steps and the ability to be able to invest energy into developing understanding yet not investing ego, so that when your representations and paradigms collapse, we are able to start afresh. Community psychologists may position themselves as participant-conceptualisers, a term which captures the collaborative nature of social action and inquiry, in both participating and making sense of the interaction (Bennet et al., 1966). By definition, this fundamental dual-role recognises that the learning (or conceptualising) in community psychology is done in the field through our engagement with others. It is through this process of learning by doing that we become competent.

Critical to the process of learning by doing is the ability to reflect continuously. Self-reflection prompts us to consider 'competence' not as a list or set of expected actions, but rather a reflexive process comprising doing, reflecting on doing, and reflecting on reflection on doing (Schön, 1983). The notion of iterative-generative reflective practice, with its emphasising on assertoric knowledge claims (Polkinghorne, 1983) that acknowledge uncertainty and abductive reasoning (Pierce, 1955), best captures this dynamic of continual discovery and development (Bishop et al., 2002). Within community psychology, notions of competency development for the field run the risk of yielding to its positivist heritage. Rather, community psychology would benefit from iterative-generative reflective practice, and being attuned to underlying worldviews and values, which then enables the community psychologist to be receptive and responsive to the contextual requirements of the social settings in which we engage.

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The foundations of competencies require critical thought and consideration. Competencies can run the risk of being reductionist, which is antithetical to the core values of community psychology. Much can be learnt from the distinction between virtue and procedural ethics, specifically, that this distinction can be transferred to competencies for community psychology. We argue that if there is a place for competencies in community psychology, these should be based on virtues as opposed to procedures. Fundamentally, virtue competencies would be based on an ethos and worldview as opposed to set parameters which stipulate 'what' competency specifically is. Procedural competencies (based on the 'what') are static, acontextual and perpetuate passive as opposed to active, lifelong learning and critical thinking of the world and of our selves. In Table 1 we illustrate the distinction between these two forms of competencies.

	Procedural Competencies	Virtue Competencies
Focus	Outcome	Process
Assessment	Definitive or dichotomous	Life-long learning and action
Motivation	Token; Elitist	Genuine; Humble
Development	Static (or at best, reactive)	Responsive; Proactive
Reflexivity	Passive; Limited to no self-reflection	Active; Critical self-reflection
Role of values	Driven by parameters; Value-less	Driven by an ethos; Value-based
Role of context	Acontextual	Contextual
Role of power	Bureaucratic power; Inequitable and	Decentralised power; Engaging and
	hierarchical	participatory

Table 1. A Comparison between Procedural and Virtue Competencies

Note. The differences between procedural and virtue competencies are shown as dichotomies but we acknowledge that these differences may be on a continuum.

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The truism that community psychology should be based in the community sounds obvious, but the training in traditional psychology often leads to taking an individualistic and acontextual perspective (Bishop, 2007; Speer et al., 1992). Essential then to the training of community psychologists is 'learning by doing' whereby both the supervisor and the student tackle new settings that require scoping, deconstruction, and intervention. The process of doing by learning involves substantive theorising (Wicker & August, 2000), in which conceptual theory is integrated into the research as more is discovered about the context and the local social dynamics.

Using a role as an active mediator (Throgmorton, 1991) or boundary crosser (Sarason & Lorentz, 1998) where the community psychologist is situated between the community, and policy makers and scientists, and whose role is to act as a translator and active manipulator of the power differentials between the community and the policy makers. This requires that the community psychologist is able to understand both the constraints and language of the community and also the policy people or scientists. It requires that the community psychologists submerge their professional identity to be able to work with both groups and to operate from a social justice perspective. The role then is one of a modest transdisciplinary professional (Reich & Reich, 2006). The transdisciplinary role requires that the community psychologists be familiar with both the knowledge and values of both the community, and the scientists and policy people, to a level where they can translate effectively, and to bring about subtle change.

Community psychology has the potential to undermine mainstream psychology theories and practices in reframing psychology from being psychology of the individual to being the *psychology of people*. We need to be able use competencies as tools for understanding, rather than as understandings. Given this approach, a set of core procedural competencies should not be identified; rather, we propose a focus on virtue competencies. As we have shown, virtue competencies (as opposed to procedural competencies) provide an orientation and valuebase and may be applied to any context in which community psychologists work. When procedural, the focus on developing, refining, and using community psychology practice competencies provides a false impression of rigour. While it might bolster the professional identity and practices of community psychologists, the exercise is redundant in that it suits the bureaucrats rather than the community psychology practitioners or the communities they serve. Procedural competencies are antithetical to the values of community

psychology. Virtue competencies provide a way forward by recognising the values of community psychology, the diversity of practice settings, and the roles of reflexivity and humility.

Notes

1. Fryer and Laing (2008) use the term 'United Statesian' rather than American in order to differentiate community psychologies among the Americas.

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