COMMENTARY

Reflections on the Future of Community Psychology from the Generations after Swampscott: A Commentary and Introduction to the Special Issue

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Abstract This special issue commemorates the 50th anniversary of the founding of U.S. community psychology in Swampscott, Massachusetts in 1965. The issue includes commentaries from a cross-section of community psychologists educated in community psychology training programs established after Swampscott, in the 1970s or later. The contributors, who vary in their involvement in community-engaged research, training, and practice, offer a diverse set of perspectives on the field. Each was asked to reflect on the future of community psychology based on their own training and experiences. After providing some background to the Swampscott Conference and the era in which it took place, I offer a few of my own reflections on community psychology's future growth and development. I then introduce the 15 commentaries that follow.

What we now know as the "Swampscott Conference" was originally referred to as the *Boston Conference on the Education of Psychologists for Community Mental Health* (Bennett, 1965). The conference took place May 4–8, not in Boston, but in Swampscott, hence the name, and was sponsored by the South Shore Mental Health Center and Boston University. In a 1987 Special Issue of AJCP commemorating the 20th anniversary of that conference, Annette Rickel, a former president of SCRA, described the purpose of the conference as "...to delineate the education of psychologists for a role in community mental health" (Rickel, 1987). "Community psychologists" she went on to write, "were encouraged to be active participants in solving the general problems of society and to become 'social change agents', 'political activists', and 'participant conceptualizers'." She noted that training in community psychology would emphasize "education for prevention, provision for innovative field training experiences, and the need to create a knowledge base for community psychology through research and evaluation" (Rickel, 1987, p. 511).

There were 39 participants at the conference, including a five-person organizing committee, and 38 of the 39 participants were white men; most were involved in the mental health field as psychologists, especially clinical psychology (Anderson et al., 1966; Iscoe, 1987). Many in attendance would become leaders in our field or in related fields, and although they were inspired by the emerging community mental health movement, they were also critical of it because it constrained possible roles they envisioned for psychologists. At that time, the community mental health movement had become a powerful new force not only in psychology, but in other mental health disciplines, such as psychiatry, social work, and nursing. A catalyst for that movement was the inaugural 1961 Presidential Commission on Mental Health and the subsequent passage of the 1963 Community Mental Health Act that made mental health services a federal priority in which states were funded to build comprehensive community mental health centers that set aside support for consultation, education, and prevention (Tebes, Kaufman & Chinman, 2002).

It was an exciting time. The idea that psychologists would take on new roles in community settings not just to treat people with mental health problems, but to use their skills and expertise to help them navigate those problems before they even began – that is, to prevent their occurrence – represented a major shift in the mental health

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field, and also for psychology. But this new group of community psychologists wanted to go further. They wanted to intervene in social problems that were not explicitly mental health in nature, and that's why they talked about becoming "social change agents" – a vision that was a sea change for American psychology (Shinn, 1987; Tebes et al., 2002; Weinstein, 2006).

This new "community psychology" had been emerging for the better part of the 1960s, and exemplars of the new field were emerging: the action research of the Yale Psycho-Educational Clinic (Sarason, 1966), the community-based Fairweather Lodge program (Fairweather, 1980), work on teaching children competencies, such as interpersonal social problem solving skills (Shure & Spivack, 1978), the early identification of children with behavior problems through the Primary Mental Health Project (Cowen et al., 1975), and the seminal workforce analysis done for the 1961 Presidential Commission that showed an urgent need for prevention services (Albee, 1959). The field's ascendance continued through the 1970s, so that within just two decades, community psychology had established itself as a new field of psychology in 1965, created a Division of Community Psychology in the American Psychological Association a little over a year later, developed several training programs in the 1970s, and in 1973, started the field's first journals – the *American Journal of Community Psychology* and the *Journal of Community Psychology*. Put simply: Community psychology was hot. It was the neuroscience of its day.

Community psychology was also emerging internationally at the time and defined in accordance with local cultural and intellectual traditions; it was both independent from and also influenced by these developments (Reich, Riemer, Prilleltensky & Montero, 2007). In the intervening years, the field continued to grow so that it had a fervent membership, a commitment to social action, an array of practice competencies, a number of vibrant graduate programs, opportunities for postgraduate training, and a strong scholarly tradition (Kloos et al., 2012; Perkins, 2009; Tebes, Thai & Matlin, 2014).

Despite these developments, scholars, practitioners, and educators in community psychology regularly find themselves revisiting the field's definition as well as its mission, vision, and values. This is evident in the various journal special issues and SCRA Biennial Conference sessions that have been devoted to Swampscott to commemorate every 10-year anniversary. Re-imagining and re-envisioning our field and proposing new directions for it have become so common that at times it can seem that we are engaged in an endless labyrinth of self-reflection. What is going on here? Do we community psychologists not know who we are or what we stand for?

In part to answer this question, a few years ago, my colleagues Nghi Thai, Samantha Matlin, and I summarized our field's core principles in an article on team science and the opportunities it presents for community psychology (Tebes et al., 2014). Drawing on our experience and several popular recent textbooks (Kloos et al., 2012; Levine, Perkins & Perkins, 2005; Moritsugu, Wong & Duffy, 2009; Orford, 2008), we identified and elaborated upon eight core principles alongside the excellent list of practice competencies developed by the SCRA Practice Council (SCRA, 2012; Wolff, 2014). Table 1 summarizes the core principles and practice competencies (Tebes, 2017; Tebes et al., 2014).

Although one might argue about the order or combination of principles listed, or even object to those deemphasized, I have found that most colleagues agree with this list. This suggests that the reason so many of us keep reimagining and revisiting our field and its future is not because we disagree about its fundamental principles, but that we want to preserve a particular perspective that we value. Although other fields and disciplines may share some of that perspective, none capture it as well as community psychology. Revisiting our future may help ensure its distinctive qualities for subsequent generations.

Below, as someone trained in the early 1980s, I offer a few reflections on the field's future and then provide a brief introduction to the articles of the special issue.

Embrace an Embodied Social Ecological Model

Currently, our field's conceptualization of the social ecological model mostly ignores the body, such that it posits multi-level influences on human behavior without depicting organs, cells, molecules, or genes; in short, it is a disembodied social ecological model. In reality, however, all of us have bodies whose study is revolutionizing how we think about individual and population health, and most importantly for community psychology, the influence of social determinants on health (Braveman, Egerter & Williams, 2011).

Figure 1 depicts an embodied social ecological model that includes genetic, molecular, cellular, and biological ecologies along with interpersonal, social, and cultural influences that shape behavior. Because we have generally eschewed thinking about bodily processes, perhaps because of our (necessary) rejection of the medical model, we have generally seen other fields in psychology (health, clinical, biological) and other disciplines (e.g., public health, social and cultural neuroscience, sociology, behavioral economics, epigenetics) offer models for understanding how social determinants affect health and well-being. As I noted in a recent editorial (Tebes, 2016), community

Table 1 Organizing principles for community psychology research and practice[a]

1. Considering individual AND systems change, including first order versus second order change
2. Understanding social ecological levels of analysis and intervention
3. Focusing on strengths, wellness, and competence (vs. deficits and disorder), including an emphasis (at individual and collective levels) on prevention, resilience, and health promotion
4. Valuing and promoting empowerment and social justice, including liberation from oppression
5. Understanding human diversity and cultural contexts
6. Advancing participatory action, including stakeholder participation, multi-level collaboration, and sense of community
7. Developing empirically based models for action
8. Advancing theoretical and methodological pluralism

Competencies for Community Psychology Practice[b]

Foundational principles	Ecological perspectives
	Empowerment
	Sociocultural and cross-cultural competence
	Community inclusion and partnership
	Ethical, reflective practice
Community Program Development and Management	Program development, implementation, and management
	Prevention and health promotion
Community and Organizational Capacity-Building	Community leadership and mentoring
	Small and large group processes
	Resource development
	Consultation and organizational development
Community and Social Change	Collaboration and coalition development
	Community development
	Community organizing and community advocacy
	Public policy analysis, development, and advocacy
	Community education, information dissemination, and building public awareness
Community Research	Participatory community research
	Program evaluation

[a]Kloos et al., 2012; Levine et al., 2005; Moritsugu, Wong, & Duffy, 2009; Nelson & Prilleltensky, 2010; and Orford, 2008.
[b]Competencies for community psychology practice. *The Community Psychologist, 45*, 8–14.
Tebes (2017). Adapted from: Tebes et al. (2014).

psychologists have much to contribute to this area of scholarship, as both researchers and practitioners, and our journals and conferences need to welcome interdisciplinary collaborations on topics of relevance to community psychology. These include, to cite just a few examples, health and educational inequities, the implementation and dissemination of health promoting interventions, and efforts at systems change.

Let me provide just two specific examples of the types of collaborations that can enrich our field and make positive contributions to society that take into account an embodied social ecological model. Both draw on literature focused on adverse childhood experiences (ACEs) and early trauma. First, considerable research has demonstrated how ACEs at a young age can set in motion genetic, cellular, biologic, brain, and behavioral responses that may endure throughout life (Gilbert et al., 2015; Heim & Binder, 2012; Miller, Chen & Parker, 2011; Nugent, Goldberg & Uddin, 2016). However, the creation of supportive and trauma-informed social contexts may mitigate some of the effects of early trauma. For example, recent evidence has shown that early adverse experiences can accelerate an epigenetic process that leads to cellular aging, which has been found to be a significant health risk for children and adults (Brody, Yu & Beach, 2016; Marioni et al., 2015). However, family supportive environments have been found to inhibit cellular aging in studies of adolescents with prior ACEs (Brody et al., 2016).

Drawing on an embodied social ecological model, ACEs research is also being used to mobilize communities to become more trauma informed – in homes, schools, health and behavioral health services, and community settings – in order to buffer the impact of early adversity. There are a number of initiatives seeking to address the impact and sequellae of ACEs within communities, such as the ACEs Public-Private Initiative (APPI) in Washington state (appi-wa.org/), Mobilizing Action for Resilient Communities (marc.healthfederation.org/), and the ACEs Connection Network (acesconnection.com/). These all take an embodied social ecological model as a given when discussing ACEs or "toxic stress" as setting in motion neurobiological, epigenetic, health, and behavioral sequellae of ACEs. I have seen the benefits of this approach in mobilizing communities through the work
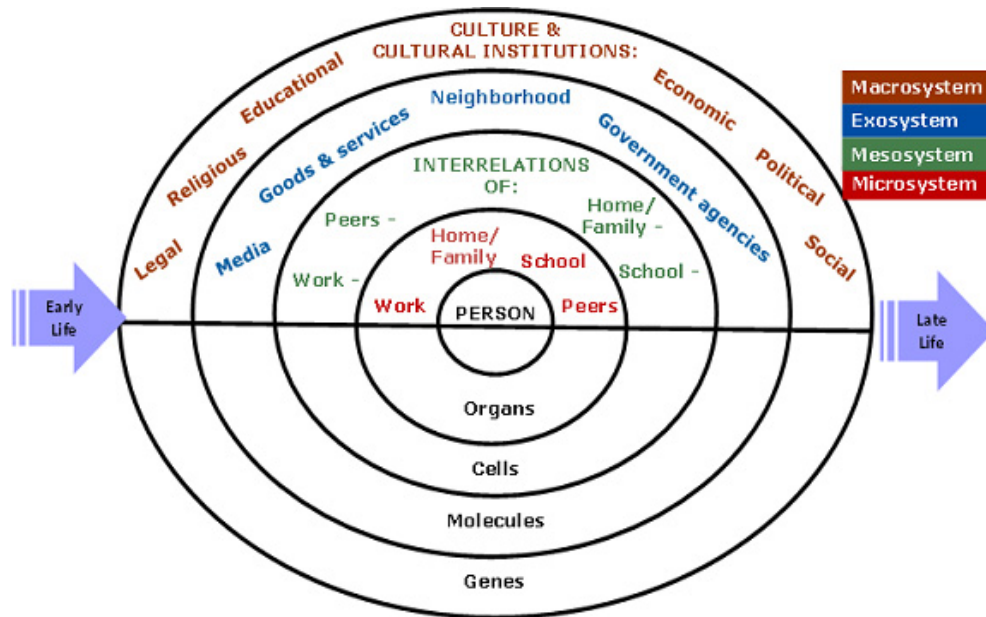
Fig. 1 An embodied social ecological model for understanding contexts for human behavior. Adapted from Glass and McAtee (2006) and Bronfenbrenner (1977) [Color figure can be viewed at wileyonlinelibrary.com]

Samantha Matlin and I have been doing, along with other colleagues at Yale and the Scattergood Foundation, to help build a more trauma-informed community in Pottstown, PA, an economically depressed small town in greater Philadelphia. Our work has supported the development and evaluation of a coalition of school administrators and teachers, parents, early childhood educators, social and community service providers, law enforcement, and other community stakeholders known as the Pottstown Trauma-Informed Community Connection, or PTICC (pottstownmatters.org). PTICC is conducting trauma awareness trainings in all community sectors; establishing trauma-informed service networks; developing messaging about trauma-informed practices for community members, parents, and teachers; and infusing trauma-informed practices in the schools through implementation of a social and emotional learning program. A foundation for this work has been accepting an embodied social ecological model as a call to collective action, which is central to community psychology research and practice.

Expand Doctoral Training in Community Psychology

Another area of critical importance to our field's future is the expansion of doctoral training in community psychology. A doctoral degree is required for graduate faculty in doctoral and master's programs, and is thus essential to our field's growth and development. Although master's

training is critical to our field and vital to its continuing development, expanding doctoral training should be a priority, and is consistent with the current SCRA Strategic Plan (SCRA, 2016).

Currently, in North America, there are about 30 community psychology doctoral training programs and about 30 master's training programs; in addition, there are about another 15 each of doctoral and master's training programs world-wide (McMahon, Jimenez, Bond, Wolfe & Ratcliffe, 2015; scra27.org/what-we-do/education/academic-programs). This number includes programs in community psychology, clinical-community psychology, and interdisciplinary community psychology, such as in community research and action, prevention, applied social psychology, community health psychology, community well-being, health behavior and education, or related fields.[1] The overall number of Ph.D. doctoral programs in community psychology is relatively small when compared to other fields in psychology and to related fields that hire doctoral psychologists. For example, there are currently 58 doctoral programs in social psychology, 69 programs in developmental psychology (plus over 50 Human Development & Family Studies programs), 74 neuroscience programs, 42 industrial-organizational psychology programs (plus over 70 such programs in Management Schools; Society for Industrial and Organizational Psychology (SIOP) [my.siop.org/GTP]), and 161 clinical psychology

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[1] I use the terms "community psychology training programs" or "community programs" to refer to all these programs combined.

programs (American Psychological Association, Graduate Study in Psychology 2017 [gradstudy.apa.org]).

The small number of graduate programs in community psychology combined with the fewer number of community psychologists overall makes it increasingly difficult for community programs to compete for new faculty slots when these become available. What is needed is a concerted effort to expand doctoral community psychology training to ensure the field's future. One encouraging sign is the recent growth in community doctoral training programs,[2] which shows the field's continued relative value to universities.

The expansion of community doctoral training programs is also essential to the vitality of master's programs in the field. Although most master's students do not go on to obtain doctoral degrees, many do, and a smaller pool of available doctoral programs may lessen the potential value of a community psychology master's degree because there would be fewer opportunities available for community psychology postgraduate training.

In addition, the expansion of doctoral training in community psychology is critical to continuing advances in community psychology practice. Advanced training in community psychology practice provides a unique set of competencies that prepare professionals for work with diverse stakeholders in a variety of community settings, and using an array of skills (Scott & Wolfe, 2015; Wolff, 2014). As noted earlier, 18 practice competencies have been identified—such as prevention and health promotion, program development and implementation, consultation and organizational development, community organizing and community advocacy (SCRA, 2011), that are well-suited for application in multi-disciplinary settings to address critical social issues, such as health disparities, social determinants of health, community coalition-building, and social change (Wolff, 2014). Expanded doctoral training will enhance employment opportunities for community psychologists in community practice, government, healthcare settings, or in careers that combine research and practice, such as those found in some university departments or medical centers.

What can be done to expand doctoral community psychology doctoral training? First, we need to build on the current SCRA Strategic Plan (SCRA: Society for Community Research and Action, 2016) to establish a consensus that expanding doctoral training is a priority for our field's

growth and development. In making this commitment, we need not get bogged down in debates about whether training should focus exclusively on community psychology as opposed to clinical-community psychology or interdisciplinary community psychology. The type of doctoral programs developed need to be attuned to local contexts and to leverage local resources and capacities. Recent examples of new doctoral training programs that have been developed illustrate the need to organize programs around local conditions; thus, one program provides training in Applied Psychology and Prevention Science (UMass-Lowell), another in Community Psychology within the Health Psychology Program (UNC-Charlotte), another in Civil Society and Community Research (in Wisconsin's School of Human Ecology), and a fourth in Community Well-Being (in Miami's School of Education & Human Development).

Second, we need to begin with current master's programs to assess their interest and capacity for transitioning to doctoral program status. SCRA and other institutional partners, such as the SCRA Council on Education (formerly the Council of Education Programs), should support this effort by providing resources, if requested by programs themselves, to fund consultation from faculty of newly transitioned programs. As these examples illustrate, in leveraging local contexts to expand the field, we should not be constrained by our disciplinary home, psychology, but open to other schools and departments that may offer fertile ground for our field to flourish, such as public health, education, human development and family studies, and human ecology.

Third, we also need to strengthen existing community psychology graduate training programs at the master's and doctoral level. For master's programs, supports should be focused on enhancing capacities to promote transitioning to doctoral status; for doctoral programs, supports should ensure sustaining that status. Two recent reports by the SCRA Council on Education, one on research training (Christens, Connell, Faust, Haber, & Council of Education Programs, 2015) and the other on training in practice (Connell et al., 2012), provide guidance about how this might be achieved. One way to enhance capacity is to sponsor specialized trainings and conferences (e.g., research methods; community practice) as has been done at recent biennial pre- or post-conferences. Jimenez, Sánchez, McMahon and Viola (2016, this issue) and McMahon et al. (2015) offer other examples of how to advance education and training in community psychology.

Fourth, the success of our doctoral training programs will depend, in part, on the scholarly productivity of community psychology faculty as measured in peer-reviewed publications and the receipt of extramural grant support. To support these efforts, we need to establish SCRA

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[2] A few examples include the Ph.D. in Applied Psychology and Prevention Science at the University of Massachusetts-Lowell; the Ph.D. in Community Psychology within the Health Psychology Program at the University of North Carolina-Charlotte; the Ph.D. in Civil Society and Community Research at the University of Wisconsin-Madison; and the Ph.D. in Community Well-Being at the University of Miami.

funding mechanisms to support pilot research by early career faculty, postdoctoral fellows, and advanced graduate students (in doctoral and master's programs). Funding should support research that is aligned with community psychology principles and values, including interdisciplinary research, and seek to promote innovative, high impact scholarship. There is evidence for the benefits of pilot funding in promoting community-engaged research (Holzer & Kass, 2014) and in serving as a catalyst to a productive research career, especially for individuals from historically underrepresented groups (Zea & Bowleg, 2016). In addition, we need to provide opportunities for scholars to obtain research mentoring in areas not available locally. This will require the commitment of senior scholars to be matched with a mentee for a period of time (perhaps 1–3 years) based on the mentee's interests, and coordinated through SCRA or another institutional partner. Mentees would complete an Individual Development Plan (IDP) consistent with NIH best practices (NIH, 2013) to identify career goals and the strategies planned to achieve them. As a long-standing training director of an NIH T32 postdoctoral research training program, I have found that IDPs are quite helpful in assuring accountability and fostering productivity for both mentors and mentees; with some modification these could be useful for this purpose. By enhancing the research competencies of early career faculty and emerging scholars, either through advanced training or mentoring, we will foster their success as community psychology researchers and advance our field's longevity.

Fifth, just as we need to support advanced training in research for early career faculty and scholars, we also need to support advanced training for early career professionals in community practice. Since our field's inception at Swampscott, practice has been integral to its development (Kelly, 2015), but there are few opportunities for advanced practice training in community psychology at the postdoctoral and early career level (Connell et al., 2012; Scott & Wolfe, 2015; Wolff, 2014). We need to build on the short-term training opportunities developed for biennial pre- and post-conferences to encourage sustained commitments to mentored training in practice. Although funding for such training experiences is limited, McMahon et al. (2015) and Wolff (2014) provide numerous examples of settings well-suited to community psychology practice, and a similar mentored program of support described earlier for research would also be appropriate for early career practice professionals. When combined with participation in ongoing specialized training focused on an individualized career plan, these efforts will advance the field.

A final strategy to ensure our field's future longevity is to enhance the visibility of community psychology within psychology and with other disciplines. Specifically, we need to actively promote the work of community psychology researchers and scholars in order to enhance our field's standing in universities and with the public. Increasing the field's visibility is one of the priorities in the recent SCRA Strategic Plan (SCRA: Society for Community Research and Action, 2016), which has identified several ways to do so, with efforts managed through the office of the SCRA Administrative Director. In a recent editorial (Tebes, 2016), I identified several additional efforts underway at AJCP that are aligned with this objective, including: creating brief synopses of articles that will facilitate dissemination through electronic and social media, and publishing 3–5 bullet point "Highlights" with each article that summarize an article's impact and increase its visibility.

A Final Note

Community psychology is not only a set of principles and competencies driven by a common mission, vision, and values, it is above all a way of contributing to knowledge and taking action for human betterment. For 50 years, our field has held great promise, and at times that promise has been fulfilled, at other times we have left a promissory note (Weinstein, 2006). The *Zeigeist* surrounding Swampscott propelled the founders of the field to embrace a new vision for theory, research, and action in psychology. Although that vision was constrained by the founders' local, historical, and cultural contexts, it also set a new course for a better society. Since then, our world has been shaped by new directions in psychology as well as by interdisciplinary and global engagements that have altered our perspectives and approaches to knowledge production as well as to individual and social change. And so if the founders at Swampscott have a legacy to pass on to all subsequent generations, perhaps it comes down to this question: At this moment in time, how can we as community psychologists move humanity toward justice, liberation, well-being, and community?

Introduction to the Special Issue: Reflections on Community Psychology's Future

This special issue includes 15 commentaries from different generations of community psychologists trained after Swampscott. Although most contributors solidified their interest in community psychology through graduate training, others were introduced to the field as an undergraduate or through pre- or postdoctoral training; some also identify early career influences that shaped their abiding commitment to the field. Each contributor used their commentary as an opportunity for critical evaluation about a

particular aspect of the field. What emerges across commentaries is a shared commitment to the field's future development, poignant reflective comments that reveal a passion and affection for the field, and inspiring future pathways to consider for community psychology.

Shinn (2016), whose graduate training in community psychology took place in the mid-1970s, makes a forceful argument "that rigorous social experiments have a place among the multiplicity of methods that can promote community psychology values in the next half century." Shinn is a critic of the acontextualized research that is common in translational science and evidenced-based practice research, but believes that experiments that take into account local contexts are particularly useful for informing policy. She briefly describes two experiments seeking to end homelessness that illustrate how community psychology principles and values can be infused in rigorous social experiments.

Milburn (2016) describes her excitement at the many new opportunities available for training in community psychology in the late 1970s when she obtained her training in the field. She focuses her comments on the extensive work done by community psychologists in homelessness, and identifies several future arenas well-suited for community psychology, including: community-based participatory research, the use of mobile phone technology, and implementation science.

With a background in community activism from their native Bogota, Columbia, Balcazar and Suarez-Balcazar (2016) describe their training in community psychology in the 1980s as each obtained their doctoral degree in developmental and child psychology. They also describe their introduction to research and practice on individuals with disabilities, which eventually became their life's work. Their commentary shows the many ways that community psychology informs work with individuals with disabilities, particularly in the areas of community living and participation, employment and economic development, and high school transitions.

Trained in community psychology in the early 1980s, Bond (2016) builds on her earlier theoretical work on diversity and its relevance to understanding people in context. After summarizing community psychology work on diversity, she drills down on three key issues for future work in the field: (a) the need to recognize the fluidity of social identities as discrete categories of difference within individuals, across contexts, and over time; (b) the importance of highlighting how system dynamics influence social identities; and, (c) identification and articulation of practices that take place within settings that shape the meaning of diversity. Although these represent significant challenges for the field, she remains optimistic that community psychology is well-equipped to meet them.

Jenkins (2016) describes some of the political, economic, and structural forces that began to divide clinical and community psychology programs shortly after his community training in the 1980s. In part due to these forces, he describes the "migration" of community and clinical-community psychologists like himself to "nonacademic applied settings," particularly in government and in settings not primarily focused on mental health issues. He cautions against an overly optimistic movement in community psychology to "interdisciplinary-ism" which he argues will be difficult to sustain without the support of home institutions for the disciplines that come together. Jenkins also distinguishes between Swampscott as an "origin story" that continues to be broadly relevant to the field's future as opposed to a vision that is threatened because its members are "distributed over many settings and nested among different disciplines and topical concerns."

Trained in the late 1980s/early 1990s, Birman (2016) describes how the field shifted over the course of her career toward incorporating greater diversity in its membership while also increasing its focus on culture and diversity in its scholarship and action. She argues that these changes made the field open to her program of research on migration, refugee studies, and acculturation. Birman uses the concept of acculturation as a metaphor for understanding how community psychology needs to wrestle with its own future; whether to seek greater validation of its contributions through further integration into mainstream psychology or to remain on the margins as a distinctive, authentic, and increasingly interdisciplinary force.

For Brodsky (2016), the occasion of the field's 50th anniversary prompts her to consider three continuing challenges for the field: defining community psychology, doing community psychology, and perfecting community psychology. Trained in the early 1990s, Brodsky uses the work of the founders as a compass, and similar to Birman (2016), advocates that we "take a stand" by remaining true to the values and principles of our field, rather than risk "identity diffusion" by loose definitional boundaries. In doing so, we must embrace "the swamp" of entropy and qualitative approaches as well as the challenges of diversity and greater inclusion so that we can continue "doing good science and doing good."

Campbell (2016) points out that, over the past 50 years, community psychology has done well in defining "a distinctive conceptual framework of ecologically informed community interventions in pursuit of social justice" but less well in articulating an ethical framework to guide the inevitable value conflicts that result from this work. Trained in the 1990s, she builds on Kelly (1979) to specify an ethical framework—"the way that you do it"— for community psychology. Campbell identifies the

components of an ethical framework, considers the field's progress in establishing one for its work, and proposes steps to do so to ensure that training and mentoring in ethics is central to community psychology's future development.

Kloos (2016) uses the metaphor of cultivating a garden in proposing a framework for building symbiotic and synergistic collaborations to advance a future community psychology. For Kloos, who trained in the 1990s, collaboration is a foundation for the future of the field. However, just as pruning is essential in cultivating a garden, Kloos also recommends employing a strategy of separation from disciplines when their values, assumptions, and priorities conflict with those central to the field, and thus threaten the field's integrity. He argues that balancing these two types of cultivation is critical to future generations of community psychologists.

Sonn (2016), whose training in community psychology took place in the 1990s in the Global South, critiques the "Swampscott discourse" as not taking into account the "community psychologies" across the world that emerged independently in response to local historical and cultural conditions. Using Fryer and Fox (2014) as a point of departure, Sonn describes the intellectual colonialization that is emblematic of the Swampscott hagiography, while also acknowledging the important contributions made to the field during that period. Sonn concludes by arguing for an expansion in the "ecology of knowledge" in community psychology through the use of decolonizing methodologies that draw on the paradigm of human liberation.

Gone (2016), who trained in the late 1990s/early 2000s, envisions a future community psychology that embraces indigenous knowledge and traditions that challenge current, received epistemologies. He shares several stories that illustrate the epistemological quandary that results from engaging an American Indian knowledge tradition for healing alongside one centered on psychology and biomedicine. In doing so, Gone frames the future choice for our field: Do we align with "science," "credentialed knowledge," and "professional practice" and thus run the risk of "hegemonic marginalization of long-subjugated knowledge," or do "we align with our disenfranchised and dismissed community partners in advancing local forms of knowledge, extending our admiration, acceptance, and endorsement of their claims, and protecting their beleaguered practices from skepticism and dismissal by authoritative outsiders?"

Langhout (2016) uses watchwords and headlines to illustrate key social and political moments from the 1960s to the present in order to illustrate the value of agitation as a path to social change. Trained in the late 1990s/early 2000s, she argues for the use of diffraction—the study of entanglements that result from differences—as an alternative to reflection as a particularly useful strategy to promote change. Just as Swampscott represented diffraction that ignited critical changes in psychology, Langhout argues for its use now in community psychology in order to "disrupt the structures of whiteness, patriarchy, class privilege, heteronormativity, cissexism, and other dominant US cultural norms that are foundational building blocks of our social science." To the extent that our field is successful in this regard, we will advance a future community psychology of "liberation and social transformation."

Dutta (2016), trained in the late 2000s, draws on a contemporary globalized landscape characterized by "transnational migrations," "border crossings," "trade," and "global media" to argue for a decentering of community psychology. She addresses two issues critical to decentering: determining what constitutes inquiry and identifying who has the authority to construct knowledge. Consistent with the spirit of the Swampscott founders and drawing on the field's principles, she calls for a future community psychology that challenges the hegemonic influences of U.S. community psychology, including what qualifies as suitable for study and how research is done. Dutta also proposes a future for the field that embodies the knowledge of "scholar-activists from low status and marginalized groups" alongside that produced in the academy.

Jimenez et al. (2016) offer an impassioned argument for community psychology education and training that is attuned to cultural and community values and relevant to pressing community and social problems. As a group, they represent different eras of training: Jimenez in the early 2010s, Sanchez in the early 2000s, McMahon in the mid-1990s, and Viola in the 2000s. The authors make a number-specific recommendation for enhancing community psychology training and education, and being more intentional in aligning it with the mission and values of the field.

Kaufman et al. (2016) describe the importance of settings as a means to advance the field, and illustrate this with a description of The Consultation Center at Yale. Her co-authors, all faculty in that setting, received their training in the field through graduate and postdoctoral programs or through involvement in the setting itself, but over a period of more than 30 years – from the early 1980s (Tebes), through the 1990s (Crusto, Connell, Gordon, Kaufman, Ward), the 2000s (Strambler, Sullivan), and the recent decade (Simon, Sartor, Weiss). Drawing on Sarason's book, The Creation of Settings and the Future Societies (1972), Kaufman et al. (2016) argue for the need to create settings where community psychology can flourish, particularly those that integrate research, practice, and education. She describes how her own setting, with its incentives and constraints, was created as a

response to the 1963 Community Mental Health Act and the 1965 Swampscott Conference, and calls for the creation of new settings for the field that are responsive to the current moment. It is those settings that capture the current *Zeitgeist* that will provide new possibilities for the community psychology of the future.

Conflict of Interest

The author of this commentary does not have any conflicts of interest.

Ethical Approval

This commentary does not include any data that involves human subjects and therefore there is no IRB oversight. The development of this commentary complied with all ethical standards.

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