Perspectives on Community as a Social System

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This paper seeks to analyze processes and roles within the community as a setting for mental health work. The author contends that social workers can utilize linkages and resources more effectively by treating community as a social system. Furthermore, the community approach to mental health problems appears to be a logical framework to organize and harmonize different subsystems. A two-dimensional, conceptual model brings into focus two mutually supportive considerations within this framework: community and mental health. Systemic linkages between the mental health group and the welfare community are further conceptualized to signify their importance in the MR programs. A critique is presented of the changing professional roles of the community organizer in a society where welfare services are organized for the less competent individuals within a complex web of values and antivalues. Social workers' dynamism in self-shaping their professional roles toward improving the quality of life is highlighted.

This paper seeks to discuss important processes and roles within the community as a setting for mental health work. Community linkages, resources, and professional roles of social service workers have been systematically analyzed to highlight, particularly, the social worker's significant role as an agent of change. The entire theoretical framework is created within the tenets of social systems theory and the main intent of this presentation is to benefit social workers working with and through the mentally retarded individuals, their families, and communities.

In view of the specific objective and scope of this paper, the following underlying assumptions merit consideration:

1. To understand the dynamics of community linkages, it is significant to treat the community as a social system.
2. As professional roles are defined and performed within a given sociocultural context, the dual relationship of roles and linkages seems to determine the patterns and structure of communications between and among two or more subsystems of a community.

3. Since the overall goal of this presentation is to signify linkages and roles within a community that is conscious of its sociomoral responsibility toward the mentally retarded persons and their families, it seems worthwhile to follow the basic principles of comprehensive community psychiatry.

THE "COMMUNITY" AS A SOCIAL SYSTEM

The dynamics of community life have assumed paramount significance ever since we realized the interrelatedness of community and mental health issues. Donald Klein¹ has attempted a mental health definition of community:

In the community one finds all the manifold challenges that confront each one of us as he lives out his life in the company of others who are important to him. The community is the means whereby society imposes its expectations on the person.

An analysis of community functions appears worthwhile to appreciate the relationship of linkages, roles, and resources. Sanders' sociological analysis² is considered relevant in this context. There are nine functions of a community: (1) recruitment of new members; (2) communication; (3) differentiation and status allocation; (4) allocation of goods and services; (5) socialization; (6) social control (allocation of power); (7) allocation of prestige; (8) social mobility; and (9) integration through adjustment (internal accommodation and adjustment to forces outside the system.) It may be noted that the mentally retarded and their families, who have special needs and problems due to the retardates' difficulties in adjustment and living, constitute a kind of group that merits special consideration in regard to different functions of a community system. It is in this approach that the importance of social worker's role in utilizing the community linkages and community resources is conceptualized.

Though the distinction between mental illness and mental retardation is well-defined and clear, the two human conditions are similar insofar as they refer to dysfunctional aspects of personality. It is, therefore, contended that most of the principles of comprehensive psychiatry,⁴ an approach to community mental health, can fruitfully direct the community organizers who seek to train and help the retarded persons and their families. It must be appreciated that the basic concepts of community psychiatry are opposed to the traditional psychiatric practice which tends to be custodial, repressive, and disabling. I am hypothesizing a conceptual framework with regard to the positive relationship of community and men-