ABSTRACT: Many psychologists recognize that problems and solutions in their field need redefinition, but change has been slow or nonexistent. Indeed, little is known about how to transform the practice of a profession. This article's purpose is to stimulate discussion about what we want our fields to become and how to go about realizing our visions. A professional fantasy, using school psychology as an example, is presented to demonstrate that utopian descriptions can put ideas into currency and perhaps help to reorient a field. Means to reorient fields need identification, and the author calls for a study of social change within the practice of a profession.

This article concerns change within a profession, both the process and the content of change. The new directions it proposes are for the specialty of school psychology, but many of the issues it raises should be relevant to other specialties within psychology.

The manner in which the future is conceived to some extent determines what the status of a profession will be. When professionals contemplate the future of their fields, many feel obliged to limit their thinking to predictions based on projected trends or on given political realities. There is a need for more discussion about what we want a field to become, discussion unlimited by judgments about the future world or its politics. To entertain a professional fantasy provides another way of contemplating the future of a field.

Indeed, utopian descriptions are needed because they put new ideas into currency. Much that is taken for granted today, for example, was first stated and described in the utopian literature.

The fantasy presented in this article envisions an enlarged role and function for the psychologist working in the school. It proposes that schools could operate differently than they do now. For example, they could serve and interact with the entire community. School psychologists could greatly expand the primary prevention work they already do. They could interact with the community as well as within the school and the individual classroom. The fantasy captures a vision, but its implementation is another matter. A discrepancy between professional values and professional actions already exists, and considerations of change require further study of social change within professions. Social change, within a profession or elsewhere, does not have to occur only in response to specific crises, new laws, or technological development. It can be a product of intentional planning.

I hope that this article will stimulate discussion of the future of school psychology, but its intent is broader: to stimulate consideration of the futures of our fields without basing our vision only on judgments about future realities or political constraints. I also hope to stimulate work on how to implement change within the practice of a profession.

Professionals Contemplate the Future of Their Fields

When psychologists contemplate improvements in their field, they are confronted with the complexities and difficulties of effecting change. Levine and Levine (1970) and Sarason (1970, 1981, 1982), for example, have considered how the development of a field and the definition of problems and solutions are influenced by the culture in which the field is embedded. Kuhn (1970) also considered the issues of change and distinguished between persuasion and conversion. He indicated that sometimes a person intellectually chooses to adopt a new view (persuasion) but is unable to internalize it (conversion). The terms culture, persuasion, and conversion indicate the complexity of change. Professionals have many skills, but they do not know how to change the practice of their profession.

Yet there is broad agreement that to serve its constituency more adequately professional psychology must change. For example, many clinical psychologists hold that clinical psychology should be reformulated to better serve a larger constituency. For instance, Fox (1982) questioned clinical psychology's preoccupation with mental illness and emotional disorders, suggesting that the field reorient itself toward general practice that would offer services to the many and away from specialty practice that offers services to the few. Community psychology is another example. Trickett (1984) indicated that community psychology is using an obsolete paradigm that is inconsistent with the distinctive prevention-oriented premises of the field. School psychology is also recognized as needing re-
formulation. Thus, although many professionals recognize that their specialties need to redefine problems and solutions, change is either not occurring or occurring very slowly.

Of the many ways of thinking about the future, one is the calculated approach. To conceptualize the future of a field based on the calculated approach, demographic, economic, political, social, and psychological trends are considered; a future world is described; and then a prediction of the adaptation of a field is made. The 1980 Olympia Conference on the Future of School Psychology (Alpert, 1982) and several important articles concerned with the future of school psychology (e.g., Oakland, in press) have used this approach.

Although the calculated approach is valuable, it has three major drawbacks. First, the method is dependent on our ability to predict the future of our environment, and as futurists have indicated, (e.g., Ogilvy, 1982) this is difficult to do. Second, the method is limiting. In general, it focuses on what we think the field will become rather than on what we think it should become. It leads to a passive rather than to a proactive stance. Third, it is frequently misinterpreted. Because predictions are reasoned and data based, they are assumed to be objective, reliable, and valid. Clearly, research is not as trustworthy as is often believed. Social scientists select theories consistent with personal values and attitudes and then seek data that validate their beliefs, ignoring contradictory data (Albee, 1982). The calculated approach is similarly fallible: The futurist can attend to some trends and not to others. Although the predictions follow logically and thus are credible, had other trends been considered, other predictions would have followed.

A second conceptualization of the future is political. It involves developing a proposal for the future based on a consideration of present political concerns. Characteristic of this approach is a concern for expedience and practicality. Thus, a major difference between the two approaches is that the political approach focuses on what should be, given political realities, whereas the calculated approach focuses on what will be, given predictions based on trends. A future for doctoral-level school psychologists as applied educational psychologists has been proposed by Bardon (1982, 1983). Although Bardon’s thoughtful proposal was motivated by significantly more than an attempt to reconcile political concerns between the American Psychological Association and the National Association of School Psychologists, political concerns partially shaped his thinking. Consequently, his proposal provides insight into some of the advantages of the political approach.

The political approach does not suffer from the sometimes fallacious objectivity of the calculated approach. However, it can be limiting if the depiction of the future is derived solely from political forces.

The future of a field may also be conceptualized through fantasy. The “fantastical futurist” simply describes the field as she or he would like it to be. As a review of the literature indicates, few if any specialties within professional psychology have fantastical futurists. This is regrettable, because fantastical thinking results in “professional utopias,” and utopian descriptions introduce new and bold ideas. Much that is taken for granted today, for example, was first stated and described in the utopian literature. Because these are difficult times for school psychology, for professional psychology, for scientific psychology, and for the people we serve, vision is needed.

To entertain professional fantasies has other advantages. As in the political approach, no pretense toward objectivity is made. Thus, delusion and faulty predictions are avoided. At the same time, it is less limiting than the political approach because it is not solely determined by pragmatism. Of course, the fantastical approach is circumscribed by its own subjectivity, as well as by the personal values and beliefs and the social and cultural circumstances of the futurist. Given the advantages to this approach as well as its sparsity in the literature, a professional fantasy follows. The values and beliefs implicit in the fantasy as well as a conceptual basis will first be presented.

Foundation for Fantasy

Values and Beliefs

The following values and beliefs underlie the fantasy:

1. Schools exist to prepare children for a productive life within a community. Therefore, we should focus on the integration of school with out-of-school experience with respect to socioemotional development as well as academic growth.

2. Schools exist to serve the total community. Schools should provide adults in the community as well as children with opportunities to learn, develop, and participate in school activities. Community members should be able to gain self-esteem and to experience a sense of purpose through their interactions with the school; thus, they must have some control over its functioning.

3. Our society is composed of multiple communities, each with different needs that should be respected and cultivated. A flexible, responsive insti-
Conclusion must be developed, and judgmental labeling of people or environments should be eliminated.

4. Professionals should be more committed to serving their community than to nurturing their profession. Specifically, school psychologists should be humanists first and school psychologists second. Our attitudes and priorities should be influenced primarily by the population we serve rather than by our profession’s needs.

**Conceptual Framework: Prevention**

**Need and prevention.** Psychologists, educators, and other professionals are currently unable to deal with the vast number of mental health and education problems confronting them. In the Report to the President, the President’s Commission on Mental Health (1978) identified children, adolescents, and the aged as underserved by the mental health systems. The statistics regarding children and youth are staggering. Presently there are 63.4 million children under age 18 in the United States. Silver (1982) estimated that 3.2 million of these children will have major emotional problems indicating the need for a mental health professional, but approximately 90% will not receive any treatment. These figures are consistent with estimates derived by others (e.g., Knitzer, 1984). The symptoms of these problems include truancy, vandalism, personal violence, suicide, substance abuse, and homicide (Silver, 1982). The concomitant affective states include depression, loneliness, anger, and fear.

The statistics are equally staggering in the educational realm. It has been estimated that seven million children will have major learning problems indicating a need for educational intervention, but over half of the children will not receive help (Weintraub & Abeson, 1977).

These multitudinous problems coexist with a sparsity of professionals to deal with them (Albee, 1959; Fox, 1982; President’s Commission on Mental Health, 1978). According to an estimate by Silver (1982), there are 5,500 professionals with PhDs in psychology who provide services for children (Silver, 1982). Working within the public schools are an estimated 14,000 providers of psychological services; of these 11,200 hold master’s or specialist degrees and 2,800 hold doctoral degrees. Data from other fields, such as social work, nursing, and psychiatry (Coates, 1982; Silver, 1982), have also indicated a shortage of professionals who work with children, a shortage compounded by geographic maldistribution. In sum, for a considerable period of time, this country has been unable to meet the mental health and educational needs of our children.

Given the vast number of problems and the great shortage of professionals, an imaginative approach to treatment is needed. An approach stressing remedia-

**Definition of prevention.** Prevention is frequently divided into three types: primary, secondary, and tertiary. Typically, psychologists working in the schools focus on tertiary prevention and, to a lesser extent, on secondary prevention. For the most part, secondary prevention involves early treatment of disease, and tertiary prevention involves attempts to minimize long-term effects (Caplan, 1964). Primary prevention refers to preventing dysfunction before it occurs. Primary prevention is impersonal; it is designed for a multitude of unknown people before the onset of disorder. As a form of mass education, primary prevention does not involve reparation; therefore, it would be inappropriate to think of it as “service delivery.” Thus, three factors—mass orientation, education, and preproblem state—separate primary prevention from other types of prevention.

Another comprehensive examination of primary prevention has recently been published (Felner, Jason, Moritsugu, & Farber, 1983). This volume explores the evolution and background of primary prevention as well as current conceptual, empirical, and training issues.

Support for primary prevention is widespread and varied. The public health field has had considerable success in promoting physical health through mass education. Mental disorders have been reduced by programs designed to cultivate self-esteem, social competence, and social support networks (Albee, 1982). In addition, research literature has demonstrated that poverty, meaningless work, racism, and sexism increase the likelihood of mental disorders.

The following future vision does not attempt to be encyclopedic. Although the three types of prevention are all important, primary prevention has received relatively little attention by school psychologists. In what follows, the focus is on primary prevention in mental health and education; however, its applicability to other fields should be evident.

**Professional Fantasy**

**Setting**

School psychologists can and should work in many settings, and preventive activity must be housed in many institutions. Without question, however, schools are a prime setting for preventive activity. The social
environment of the school has a powerful impact, which is often recognized as negative. Sarason and Doris (1979), for example, indicated that the hostile and insensitive climate in the public schools at the beginning of this century resulted in immigrant children's feeling scholastically inferior, personally incompetent, and ashamed of their cultural heritage. If schools have the power to negatively affect a child's self-image, they should have the potential to exert an equally positive effect as well. Hypothetically, we should be able to design schools that would enhance the psychological adjustment, intellectual development, coping skills, and happiness of children, their parents, and other community members.

Furthermore, schools are the sole compulsory public institution that reaches all children, regardless of race or class. Consequently, primary prevention programs housed within schools have access to all children, including those most likely to be at risk but least likely to have access to medical and mental health services.

Contemporary schooling differs from this vision in both function and boundaries. Presently, top priority in schools is given to the educational and intellectual development of children. Edward Zigler's experience as Director of the Office of Child Development (as reported in Sarason & Doris, 1979) exemplifies this. Before a Congressional committee, Zigler had to justify "meals" as a budgetary item for Head Start children. Zigler learned that it was inadequate to state this. Before a Congressional committee, Zigler had to justify "meals" as a budgetary item for Head Start children. Zigler learned that it was inadequate to state that children should be fed because they are hungry. He learned to say that children should be fed to facilitate learning.

Within the fantasy, the function of the school is to prepare its inhabitants for all facets of life. The concept that schools should exist to prepare children to live within and contribute to a community is not new. (For example, see Mayhew & Edwards, 1966; Sarason & Doris, 1979; and Zigler, Kagan, & Muenchow, 1982.) In general, however, the practice is rare.

In fantastical vision, the boundaries between the school and the community are fluid. Children, parents, and community members move easily among rooms and floors as well as in and out of buildings. The school is the center of activity for the entire community. Thus, the school fulfills its purpose—to prepare the young for all facets of life—in the midst of life, not at an institutional remove.

**Characters**

The characters include children, parents, and other community members, school psychologists, and other school staff.

*Children, parents, and other community members.* Although the fantasy is about school psychology, the major roles belong to children, parents, and other community members whose roles are highly active. Two concepts would govern how they act: empowerment and contribution.

Empowerment means that people are enabled to control their own lives. This process would involve the restructuring of the relationship between professionals and those they serve so that the values of community members rather than those of professionals would dictate services. A large body of research based on nonclinical populations has supported the postulate that psychological benefits accrue to individuals when they have more rather than less control over their lives and resources (Rappaport, 1981). This research concerns alienation (Phares, 1973; Rotter, 1975; Seemann, 1972); learned helplessness (Seligman, 1975; Seligman & Maier, 1967; Sue & Zane, 1980); expectancy for success (Gurin & Gurin, 1970; Seidman & Rappaport, 1974); attributions (Strickland & Janoff-Bulman, 1980); the impact of perceived labels (Rappaport & Cleary, 1980); and the beliefs of powerful others (Snyder & Swann, 1978; Swann & Snyder, 1980). Studies of group cohesiveness (Guttentag, 1970) and self-help groups, labor unions, community organizations, and community development projects (National Commission on Neighborhoods, 1979), also revealed, the benefits of empowerment (Rappaport, 1981).

Contribution means that people serve as well as are served. Here, too, a growing body of literature indicates the beneficial effects of assuming a helping role. On the basis of incidental outcomes, Riessman and Hallowitz (1967) formulated the helper-therapy principle, which postulates that being genuinely helpful to others in distress can be beneficial for the helper. Subsequently, primary prevention programs were designed to mutually benefit helpers and helpees. Many programs based on the helper-therapy principle report success. For example, help for behaviorally maladjusted primary graders was provided by retirees, to the benefit of both groups (Cowen, Leibowitz, & Leibowitz, 1968). Results from several peer tutoring relationships indicate that children benefit from assuming educational and supportive roles with other children (Allen, 1976; Gartner, Kohler, & Riessman, 1971).

Contributions by community members to the school should be encouraged not only because the act of helping benefits the helper but also because there is a shortage of professional personpower. Furthermore, evidence suggests that nonprofessionals can be effective—in fact more effective at certain tasks than professionals (Durlak, 1979; Rappaport, 1977).

*School psychologists and other school staff.* School psychologists are the supporting cast in this fantasy. As consultants, they perform many roles. Trained in social systems analysis, they can help parents, school staff, and community members determine community and school needs, and they are skilled in...
the development and implementation of appropriate interventions; they can develop mental health education programs and provide consultations for schools as well as across institutions; they can help establish positive environments for both cognitive and effective learning; they can develop networks; and they can serve as a resource on issues of school-community interaction, school and classroom life, and individual development.

Other school staff includes teachers, administrators, other pupil personnel specialists, paraprofessionals, and volunteers who work within an interdisciplinary orientation. In general, school staff members function in a philosophically broad way and will have the opportunity to develop new competencies in order to assume new functions as they become desirable in the visionary school.

Activities

Only a glimpse of the visionary school and the school psychologist's role within it can be presented here. An account of some of the possible preventive activities will throw more light on the fantastical future.

These activities would be planned and executed by individuals but would be based on theory and empirical findings. There would be three models of primary prevention: community, environmental, and individual. Community primary prevention occurs in the interaction between school and community, whereas environmental primary prevention takes place within the school and involves social systems analysis and modification as well as person–environment fit; individual primary prevention focuses on the fostering of individuals' skill and competence within the classroom.

Community primary prevention. Although there has been a historic estrangement between school and community (Lightfoot, 1978), in the visionary school parents and school are brought together. The school is concentrically expanded to serve the child, the family, and the community. Two questions may be raised here: First, why should the school respond to the entire community? And second, why is the school the appropriate institution for a massive primary prevention system?

The school should respond to the entire community as well as to children because everybody's well-being in society is important in and of itself; moreover, to enhance the well-being of parents and neighbors should enhance the children's well-being.

At present, no agency is responsible for providing primary prevention activity. The school is the appropriate institution for such a massive program because it is physically and psychologically accessible to children and their families. The school has a tradition of local control that could be extended to family and community involvement in primary prevention. It has professional staffing for program development and connections to others agencies that could be expanded. As a physical plant, it is underutilized during the week and weekends. For these reasons, the exemplary programs described below emanate from the school. Whether on school grounds or off, the programs would be connected to the school. Given the education and training of the school psychologist, she or he would assume the major role as consultant, developer, and coordinator of the programs. The school psychologist would be the prime communicator within the school and between the school and community. Thus, the school would initiate a variety of programs new to it that might previously have been offered by other individuals and diverse institutions.

Following are three different types of primary prevention programs that could become part of a massive preventive intervention system. Although one or another program may not be appropriate or desirable for all communities, each one exemplifies preventive activity that could be offered in schools. It must always be kept in mind that local autonomy is to be respected: The community should be involved in identifying appropriate and relevant programs.

1. A decision-about-parenting program could be offered. Before having their first child, most couples know little about what parenting involves (Alpert, 1981; Alpert & Richardson, 1980; Alpert & Richardson, 1983; Gerson, Alpert, & Richardson, 1984). Although professional literature exists that considers the experience of parenting and its impact on adult development, no such literature is available for the layperson. The popular literature focuses more on the “how to” than on the experience of parenting. Even books titled Preparation for Parenthood focus on parentcraft, not on parenting (Rapoport, Rapoport, & Strelitz, 1977). Nor do the media contribute to an accurate portrayal of this role (Rapoport et al., 1977). Individuals have little opportunity to explore what parenthood entails when they are contemplating whether to have children. Education prior to decision making would be desirable and is often needed. Schools could be a prime setting for such education, because they have the staff and resources already in place, and they have the ability to coordinate such a program with other agencies. Moreover, on the high-school level, such education might address this country's severe problems with teenage pregnancy. A program for parents would promote more realistic understandings of parenting and more informed family planning decisions. Such a primary prevention program could greatly benefit children and families.

2. Schools could provide an information and referral registry. Such a registry has been proposed by Zigler et al. (1982), who suggested that even before the birth of their child, parents could register with the local school and obtain information on prenatal health
services, parent education, child care, and other relevant community services. As Zigler et al. pointed out, many locales do offer appropriate health and child care services but do not have a coordinated system for parents to learn about them. A helpful service such as this would establish a positive relationship between parents and the school.

3. Schools could also offer preparent and parent intervention programs. Moving from a childless to a parental state is a major life change that necessitates many adjustments not only internally but also in one's ongoing personal relationships and other more impersonal social roles. The degree of change is so great that it has the potential for enhancing psychological development or for precipitating psychopathological functioning. A transition-to-parenthood program would be useful, and recent results of research (e.g., Alpert, Goldklang, & Vecsi, 1984; Alpert, Richardson, & Fodaski, 1983) could guide the development of such programs. Another difficult stage of parenthood is dealing with adult children. Active parenting often continues after the late adolescent leaves home, and programs could be developed for the late parenthood stage.

Environmental primary prevention. Much study of environmental primary prevention is currently underway. The following brief discussion seeks to develop a context for consideration of a few primary prevention programs in the visionary school. Felner et al. (1983) provide a fuller consideration of environmental influences on an individual's adjustment.

Pioneering work was done by Moos and his coworkers at the Social Ecology Laboratory at the Stanford University Medical School (Moos, 1974; Moos & Lemke, 1983). They analyzed, labeled, and quantified environmental factors and then were able to identify consequent effects when environmental variables were manipulated. Specifically, Moos had developed a series of parallel social climate scales, each with 6 to 10 dimensions and 84 to 100 items, in order to assess nine different types of social environments such as high school classrooms, homes, and hospital-based treatment programs. The scales can be used to distinguish environments that lead to adaptive or nonadaptive behavior. This research has brought us closer to being able to identify the factors within specific environments that will achieve intended outcomes for different individuals. Moos, for example, indicated that there is some evidence that the system-maintenance dimension of control is growth inhibiting. Other research (Hunt, 1975; Reiss & Dyhadalo, 1975) made it clear that environmental effects cannot be considered independently of people and that sensitivity to the person-environment fit is important.

Some of the environmental work has been conducted on children and schools. For example, Bronfenbrenner (1979) reviewed the effects of environment, including planned alterations on children's development. The research indicated that various learning environments can affect student satisfaction, interest level, morale, creativity, and achievement. Moos (1979) provided a concise summary of this research.

The visionary school could develop programs based on our rapidly developing knowledge of the effects of environment and person-environment congruence. Such programs would help the school and its students cope with existing environments and alter other environments when possible. The three programs described below call for individuals to serve as environmental educators. Because no one in schools is now trained for this primary prevention activity, the training and functions of the school psychologist make him or her most suitable for this role.

1. Schools could offer environmental education programs to aid parents in school selection. Information about the social-environmental characteristics of schools and classrooms could enable parents to make more informed choices for their children's schooling, and psychologists could better assist parents in furthering person-environment congruence. Programs using environmental assessment measures to specify the perceived climate characteristics of various educational settings would help students and parents to select appropriate schools.

This sort of environmental assessment measure has already been used for selection purposes. The Classroom Environment Scale (Trickett & Moos, 1974) was used in a voucher program to assist parents in school selection. According to Moos (1979), the voucher program offered a choice of 10 educational programs, including basic skills, open programs, and individualized learning. Parents were given a directory of voucher choices and a comprehensive evaluation report summarizing data on characteristics and performance of each program, including student's feelings about it.

2. Schools could provide programs to aid children in coping with different environments. As a more complete understanding of environments—whether classroom, school, or family—is attained, the choice will be between altering the environment or enhancing the individual's ability to deal with that environment. This program would address the latter. Programs could be developed to train children to cope with different types of environments. For example, a child who needs minimal stimulation could be taught techniques to "tune out" excess stimulation.

3. Schools could offer programs designed to the educational environment for more effective learning. The large body of research on the effects of various learning environments has produced certain findings: (a) Relationship- and innovation-oriented classes can create student satisfaction and interest in subject matter; (b) great gains in achievement can occur in
classes that emphasize goals and maintenance, although such classes are less successful in facilitating interest, morale, and creativity; (c) control-oriented classes are associated with dissatisfaction and alienation and do not facilitate personal, social, or academic growth; and (d) gains on traditional achievement measures are most likely to occur in a well-structured setting that is warm and supportive and that emphasizes specific academic tasks and accomplishments. In general, research on student-environment congruence (Cronbach & Snow, 1977; Moos, 1979) has indicated that structured classes work better for underachieving students and for those from disadvantaged socioeconomic backgrounds; some students simply have a high need for structure. Those who adjust and learn more in less structured learning environments include students high in internal control and exploration orientation and students who exhibit a need for achievement via independence.

These and similar findings (as reported in Moos, 1979) will help in the design of effective learning environments. Programs could be developed to assist teachers and other school staff to alter environments to achieve the outcomes valued by a given community.

**Individual primary prevention.** Underlying individual primary prevention is the belief that individuals are vulnerable to maladjustment when they lack skills to solve personal problems and that the best defense is to help them build competencies and adaptive strengths. Thus, individual primary prevention involves the teaching of skills to individuals, usually in groups, to facilitate adjustment. Individual primary prevention has existed since the 1960s, although it is usually identified by other terms. In general, the results of educational programs in which analytic, problem-engaging skills are taught have shown positive effects on adjustment.

Ojemann’s (1961, 1969; Ojemann, Levitt, Lyle, & Whitesie, 1955) program on casual teaching curriculum was one of the earliest individual primary prevention programs. Children in his program came to be able to understand factors underlying behavior. Other investigators using Ojemann’s approach found such outcomes as greater adjustment (Muus, 1960), lower anxiety, and higher security (Bruce, 1958; Muus, 1960).

One of the newer individual primary prevention programs involves a skill-building approach in which children are taught interpersonal problem-solving skills such as developing alternative solutions and thinking of consequences. These two skills are believed to mediate behavioral adjustment, and a large body of research indicates that deficiencies in these skills are related to maladaptation in individuals varying in age and social class (e.g., Spivack, Platt, & Shure, 1976). Spivack and Shure’s social problem-solving curriculum (1974) was developed for four-year-old Head Start children. Programs based on Spivack and Shure’s work exist for lower and upper elementary grades also (e.g., Allen, Chinsky, Larcen, Lochman, & Selinger, 1976; Gesten & Weissberg, 1982; McClure, 1975), and for mother–child dyads (Spivack, Platt, & Shure, 1976). The results from these programs are generally promising.

Enrichment programs for the disadvantaged are other examples of individual primary prevention. Basic to these programs is the belief that experience and the learning of skills will affect cognitive development and competence acquisition. There are several excellent reviews of these programs (e.g., see Gottfried, 1973; Horowitz & Paden, 1973; Jason, 1980; Stanley, 1972; Stendler-Lavatelli, 1968), as well as of primary prevention programs that focus on skill and competence fostering (Cowen, 1980; Felner et al., 1983; Kent & Rolf, 1979; Murphy & Frank, 1979; Zigler et al., 1982).

Given the many excellent reviews and the prevalence of individual primary prevention programs in schools, examples of such programs will not be offered here. It should be understood, however, that the visionary school will emphasize skill- and competence-fostering programs.

**Discussion: Toward a Better Future**

The fantastical school presented here, as well as the psychologist’s role within it, appears unrealistic; nevertheless, some of the programs described are already operative in some schools. The question then arises: Is this a fantasy or not?

Although some primary prevention programs exist in some schools, few, if any, house massive primary prevention efforts. Thus, the school described here is a fantasy. Furthermore, although the concepts and programs described here may sound familiar, the primary prevention role, in general, occurs only in our discussion of roles and in our value system, not in the real world. Professionals discuss paradigm shifts toward prevention and praise efforts in this direction, but only minimal prevention activity exists. Thus, values and actions are discrepant.

If primary prevention activity in schools is valued, why is it not more prevalent? School psychologists offer several explanations. Some claim that political considerations require a more restrictive role: School psychologists guard their territory, maintaining a primarily diagnostic role to prevent other professionals from taking over this role. Although this concern has some legitimacy, it should not prevent the field from developing and meeting the need for primary prevention activity. Currently, no professional group is charged with undertaking massive primary prevention activity.

In considering the discrepancy between our actions and our values, some people point to the limi-
tations imposed by rules and laws. Clearly, rules and laws must change before any profession can change appreciably, and efforts to change these laws must be ongoing. In the meantime, however, professional practice can change. That is, existing rules and laws should not be used as an excuse for passivity. Preventive activity, for example, can be defended and supported as consistent with the intent of the Education for All Handicapped Children Act of 1975 (P. L. 94-142). As Alpert and Trachtman (1980) indicated, psychoeducational assessment, traditional consultation, and environmental primary prevention are legitimate activities under this law. Our professional judgment should determine how time is balanced among these various activities.

Other people question the efficacy of primary prevention programs or point to the difficulty in implementing massive primary prevention efforts. Those who state that little support for primary prevention programs exists are unfamiliar with the research literature. For example, the numerous volumes on prevention, which began in 1977 (Albee & Joffe, 1977) and are based on the annual Vermont Conference on the Prevention of Psychopathology, document the efficacy of various primary prevention efforts. By contrast, those who argue that there is a dearth of extensive, consistent, systematic theory as to how change occurs are correct. Nevertheless, we have acquired some knowledge of the process of change and some skills with which to implement programs. Although it is true that much remains to be learned about implementing change, the knowledge and skills that have been acquired are not sufficiently used. Thus, we know how to help parents, school staff, and community members determine community and school needs; we know how to plan interventions based on those needs; we are able to develop and coordinate programs for schools and across institutions; we know how to establish positive learning and affective environments; we can enlighten others on issues of school–community interaction, school and classroom life, and individual development. However, our knowledge is not fully used, because little is known about how to change the practice of a profession. Stated differently, we do not know how to make these preventive activities a major part of our role. Carner (1982), a school psychologist, has written an excellent narrative of how she altered her role, but systematic methods and concepts of professional role change have not been developed. How social change occurs within the practice of a profession needs greater study.

Let us be clear. Many psychologists would like to engage in more prevention-oriented activity, but they do not know how to convince colleagues, community members, or legislators that it is appropriate for psychologists to increase their involvement in such activity. The discrepancy between values and actions is greater in some parts of the country than in others, but everywhere it could be addressed by our learning how to change the practice of a profession.

The specialty of school psychology has been used as an example in this fantasy, but discrepancy between professional values and actions is widespread in other specialties of psychology as well as in other professions. To begin addressing the problem of how to facilitate change within professional practice, we might examine various modes of contemplating the future. The professional fantasy presented in this article, it is hoped, demonstrates that utopian descriptions can introduce new ideas and perhaps help to reorient professional practice. Clearly, other strategies must be explored, and significant consideration must be given to the means of changing professional practice.

One such means to begin learning about professional social change involves using the university setting as a laboratory. As Sarason (1982) argued, all problems of change inherent in working in any setting can be found in a university. Within the university, for example, faculty could attempt to change how they relate to the community. Although they were changing their roles, they could study the process of change. Although the university is not responsive to the Education for All Handicapped Children Act, other "laws," norms, and role definitions determine the professor's role. As professors and students in the university seek to become more responsive to the schools and the local community, they could be studying and learning how social change occurs within the practice of a profession. Such a "laboratory study" is currently ongoing at the School of Education, Health, Nursing, and Arts Professions at New York University.

Entertaining professional fantasies or using the university as a laboratory are but two ways of learning how to make some changes in the way our field is practiced. We need to identify other ways as well.

It is to be hoped that the focus for the next decade will be on social change that leads to greater congruence between values and actions. Social change, within a profession or elsewhere, need not occur only in response to specific crises, new laws, or technological development. It can be a product of planned change. If the desire is for professional fantasies to become reality, then investigation must begin on the process of social change within the practice of a profession.

REFERENCES
Albee, G. W. (1983). *Testimony before the United States Senate Committee on Labor and Human Resources on the subject of*


prevention and promotion in mental health. Washington, DC: U.S. Senate, Committee on Labor and Human Resources.


Seidman, E., & Rappaport, J. (1974). You have got to have a dream, but it's not enough. *American Psychologist, 29*, 569–570.


