

# My Journey as a Citizen Therapist

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## Abstract

My story begins with the idealism of humanistic and family systems therapies of the 1970s, followed by disillusionment with making a difference in the larger world, and then the discovery of citizen therapist work. I describe my initial forays into direct community action and then two current projects on major social problems: police relationships with the African American community and political polarization in the Trump era. A key breakthrough along the way was coming to see my role as a citizen professional in a democracy—acting *with* community members rather than *just for* them.

## Keywords

leadership, collaboration, community

When I trained in the 1970s in humanistic and family systems therapies, I thought that therapy could lead to social change via a kind of “trickle up” psychological dynamics: therapy would make enough people healthier to tilt the whole social order toward justice and harmony. I even entertained the idea that national transformation would begin when everyone in Congress and the White House got into therapy—or at least a good personal-growth group. After coming to see this hope as wildly unrealistic, I settled into a two-decade focus on making a difference within the mental health and medical fields through writing, research, teaching, and clinical work (Doherty, 1995,

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2001; McDaniel, Doherty, & Hepworth, 2014). As energized as I was in that work, it turned out to be not enough for me. This article tells the story of my journey back to a vision of influencing the larger world, this time through direct community action (see also Doherty, 2013).

## Disillusionment and Discovery

By the mid-1990s, I had a growing sense that my professional work was not addressing important problems in the larger community and culture, problems that were driving people to medical and mental health clinics. I read Hillman's (1992) book *We've Had a Hundred Years of Psychotherapy—and the World's Getting Worse*. I looked into community psychology but did not see how I could adopt its methods unless I changed careers. As for public policy advocacy, the colleagues in that field were mostly cynical and burned out, their efforts often foundering after each new election. I did not like any of my options.

Then my colleague and co-worrier about the larger public good, Patrick Dougherty, introduced me to two political scholars and community organizers right near me in Minnesota: Harry Boyte and Nan Kari (Boyte, 2004; Boyte & Kari, 1996). I read their book *Building America* while it was still in manuscript form and knew immediately that I had found a new direction. Their public work model helped me see the limitations of the traditional professional role of expert provider to consumers or clients. Part of that critique I already knew (the limitations of traditional service providing for community change), but Boyte and Kari helped me see the problem with the professional paradigm itself: the expert detached from democratic public life. Even community health activities usually involve either professionals advocating for a community (but not engaging the community) or expert-designed community interventions (a macro form of service delivery). The public work model argues for a new role for professionals in a democracy: catalyzing the efforts of ordinary citizens, with professional expertise “on tap, not on top.” Conversations with Boyte and Kari marked the beginning of my journey to become a citizen professional (a term I will use interchangeably with “citizen therapist”).

A key next step was realizing that citizen professional work did not mean working only on problems of low-income and marginalized communities (Doherty & Carroll, 2002). This was liberating because at the time I did not have ready access to low-income communities (this later changed). There are plenty of social and community problems to work on in any community. Citizen therapists, I came to see, can start out with communities they know and have rapport with and then expand from there.

## My Launch Into Citizen Therapist Work

My initial foray into community activism emerged from a disturbing development I saw in my clinical practice and local community: We were turning middle-class childhood into a rat race of overscheduling and overachievement, with parents seeing themselves as service providers to their children. My desire to get involved began when I saw this problem not just as a particular family's issue, but as organically connected to larger social forces (the invasion of competitive, market-driven individualism) and to community institutions (the sports leagues and ballet schools that have increasingly taken over children's lives). Once we look outside our office windows, it is easy to see how the problems we treat clinically are integrally connected to broader community issues (Doherty, 2008).

An opportunity came when I was invited to give a talk on reclaiming family time to a group of parents in Wayzata, MN, a middle-class suburb of Minneapolis. Many parents spoke up about feeling out of control of their kids' schedules and helpless to restore a semblance of connected family life. Afterward, a school principal confided in me, "We school leaders are part of this problem. We offer so many activities to kids that if parents agree to even half of them, they're not going to have much of a family life left."

With my newfound insight into the public dimensions of this problem, I moved to the next essential task of the citizen-therapist: talking with people in the community about the issue. Whenever I expressed curiosity about hockey schedules and missed family dinners and traveling leagues and cut-throat competitive dance, I was flooded with stories from exhausted and discouraged parents. When I asked my clients about their daily schedules (a topic I would previously avoided as "too superficial"), they told me at length about their harried lives.

I learned to start conversations with parents in my community by passing on stories from previous conversations, which elicited vigorous nods and even more outrageous stories to pass on—like the 4-year-olds who practiced hockey at 5:00 a.m., the only time the team could get the ice rink (true story). Whenever I was invited to speak to PTA groups and church forums, I asked for more stories, while also inviting attendees to reflect together on what is happened in our culture to bring this craziness on us. Nearly every parent I talked to was eager to engage with this as a public issue, not just a private, family problem.

A few months later, the organizer of the Wayzata parent conference invited me back to give the same talk the next year. That phone call changed my career forever. I decided on the spot to make my pitch for a community action project. "I don't want to repeat the same talk," I replied. "But if you want to

take action on this problem as a community, I've been learning a way to do this, and I'd be willing to come back and work with you to figure out how to tackle this problem." She immediately agreed and subsequently sponsored my idea in the community. During the next year, we pulled together a dozen or so parent leaders to start a new community organization, "Putting Family First," the nation's first grassroots initiative to reclaim family time and restore balance to the lives of overscheduled kids. The key to launching this initiative was the public event that captured the energy of the community and got them working creatively together. That group coined the term "overscheduled kids" and launched, via intensive media attention in the year 2000 and beyond, a national conversation about whether more is always better when it comes to kids' activities and life balance (Doherty, 2003).

Once Putting Family First was launched, I decided to test my wings with citizen professional work in a second arena—chronic medical illness. This may seem far removed from a problem like overscheduled kids, but the connection for me was the potential to access the biggest untapped resource for social and personal change—the wisdom and experience of community citizens. I began by offering my services free to a local HMO. I met with a group of medical and nursing professionals in a mixed-ethnic clinic in St. Paul, MN, who were willing to experiment with a communal approach to diabetes care.

At the public-launch event in the clinic, I asked all 60 people present to introduce themselves and say how long they would been connected to diabetes. A man stood up and said that he lived with diabetes for 35 years. Next to him was a woman who announced that she diagnosed just the week before. "I know nothing about diabetes," she said, "and I'm scared to death." Seeing these two people in my line of vision, I said, "I think it's a terrible thing about our health care system that this woman could sit next to this man in a clinic waiting room with no way to learn from his vast experience with diabetes." I saw some heads bobbing. "In this project," I went on, "our aim is to change that, so that what people learn from hard experience isn't lost in the ozone, but passed on."

After the public event, we launched "Partners in Diabetes," an initiative through which people living with diabetes reached out as "support partners" to others who were newly diagnosed or struggling with the disease (Mendenhall & Doherty, 2007). The support partners were not traditional volunteers who take their orders from health professionals, but full-fledged cocreators of the project. Out of that initiative, which lasted several years until the clinic closed, came an enduring one started by two American Indian members of the group and my doctoral student (now colleague) Tai Mendenhall. The Family Education and Diabetes Series (FEDS) has for more than a decade engaged American Indians in St. Paul to support one another to manage diabetes (Mendenhall et al., 2010).

The foundational idea was that the biggest challenge with diabetes in the Native community was not access to services but fatalism, the narrative that if you are Indian you will get the disease and then be ravaged by the disease. Fatalism has to be treated in community, not just a medical clinic, and FEDS has been very successful through weekly communal meals, educational programs created by the community, and lay leaders administering blood glucose tests (the evaluation results on diabetes management have been impressive; see Mendenhall et al., 2010). As American Indian healer and therapist Sam Gurnoe (personal communication) said, “Outside of a culture, a community and a spirituality, you can treat but you cannot heal.”

These projects provided the experiential base for the Families and Democracy Model (also referred to as Citizen Health Care), which my colleagues and I began to develop conceptually and methodologically in a series of publications (Doherty & Mendenhall, 2006; Doherty, Mendenhall, & Berge, 2010). In this model of democratic engagement, the role of the citizen professional is that of catalytic leadership: locating pressure points in communities and inviting community members to engage in multiyear projects that mobilize existing community resources to address the problem. Much more than content knowledge, the citizen therapist develops process skills for facilitating meetings that engage everyone democratically, going deep before taking action, and bootstrapping existing resources before seeking outside funding. Community members come to see themselves as leaders, not consumers or advisers to professionals. The professionals see themselves as citizen professionals, with emphasis on the citizen part. And I learned that this citizen professional work requires just as much skill and work on self as any form of psychotherapy.

## **My Citizen Therapist Work Expands**

With these initial experiences under my belt, I began to look for other opportunities for democratic engagement as a therapist. I got involved with the FATHER Project in Minneapolis when its staff leaders heard about my community work. It is a program that helps low-income, mostly minority, single fathers reconnect with their children, land jobs, and get right with child support and the law. Like most human services agencies, the FATHER Project had no role for successful “graduates,” the people who were doing well now and no longer needed services. The executive director, Andrew Freeberg, asked me to coach him and his colleague, Guy Bowling, in how to involve the successful men as citizens with a larger mission. I met several times with them to develop criteria for which men we would invite to deliberate with us about whether this was an attractive and feasible project. This small group

then generated a larger list and we began to meet as the Citizen Father Project with three professionals and nine community fathers.

These men are often scapegoated as the purveyors of social breakdown and viewed as victims of forces beyond their control. But these men see themselves as neither scapegoats nor victims. They know they once were not good fathers, but now are committed to their children and invested in improving their community through a mission “to support, educate, and develop healthy, active fathers and to rebuild family and community values.” In addition to coaching on the process, I documented the group’s work and the powerful ideas and language that come up in our conversations: “We have no ‘father backbone’ from our own fathers.” “I am tired of being a statistic; I want to be part of the solution.” “We are citizen fathers, and what we do will live after us in our community.”

These men are no strangers to the enduring legacy of racism in America, but they see no value in being angry victims. They hold themselves morally responsible for past lapses with their children. Our meetings were intense, sometimes rambling, often warm and funny, and always proud. Coached by citizen professionals, these men are doing community presentations to make a difference in a problem that they see as holding their community back. Andrew and Guy, the process leaders, learned the craft of citizen-professional work: how to guide the men as they go deeply into a personal and public issue and then develop strategic actions. The Citizen Father Project is now in its twelfth year. As men enter the FATHER Project, they are told that if they succeed in their goals in the program they will have the opportunity to give back to the community via the Citizen Father Project.

## **My Current Work on Highly Visible Social Problems**

Now late in my career, I am very choosy about citizen professional projects I take on. They have to reflect major societal pressure points. I helped start two such projects in 2016.

### ***The Police and Black Men Project***

This initiative came out of a conversation with Guy Bowling, aforementioned as a cofounder of the Citizen Father Project. Our conversation occurred in the summer of 2016 when the community was reeling from the death of Philando Castile after a traffic stop by a police officer in Falcon Heights, MN (a mile from my home). Guy said that he was reaching “outrage fatigue” and posed the question about whether the Families and Democracy model could be

applied to the problems between Minneapolis police and Black men. The basic idea we generated was that a small group of police officers and Black men from the Minneapolis community would meet frequently over at least a year to develop relationships of trust and then decide on joint action steps to enhance community safety.

A group of five police officers (three White and two Black) began biweekly meetings in January 2017, with the goal of forging connections between police officers and African American men that can lead to better partnerships for community safety and law enforcement. I facilitated personal storytelling (early experiences with police officers, Black men, and White men), then opened up challenging topics, such as local and national police shootings of unarmed Black men. We eventually decided to create a common narrative to describe who we are, how we see the problem, and the changes we envision. A remarkable level of trust and vulnerability emerged through both storytelling and hard conversations.

Police and Black Men Project ([www.policeandblackmen.org](http://www.policeandblackmen.org)) began its public action efforts in fall 2018 with community conversations, police training, and advocating for systemic changes in public safety law and in housing to promote conditions that are safe for community members and police officers. The group's written narrative articulates the sources of distrust between police and the Black community, the beliefs we hold in common, a vision for safe communities, and a paradigm of shared partnership for community safety, as opposed to the prevailing paradigms that focus on police accountability only (the liberal paradigm) or personal responsibility only (the conservative paradigm). The idea is to move beyond finger pointing to partnerships for the ultimate goal: safe communities that are good places for citizens and police officers alike.

## **Political Depolarization Work Via Better Angels**

Another major societal pressure point is the current level of political polarization that has been growing for decades but peaked following the 2016 presidential election (Hetherington & Weiler, 2018; Mason, 2018). My involvement began during a trip to Austria, which was experiencing a national atmosphere dominated by a neo-fascist presidential candidate. There, I saw brown-shirted neo-fascist youth gather in a small town. I concluded that U.S. presidential candidate Donald Trump represented a danger much larger than himself. So I decided to write a Citizen Therapists Against Trumpism manifesto, which garnered over 2,500 signatures, including many leaders in the therapy field. This led to a number of media interviews where I had the chance to articulate my concerns as a mental health professional for this threat to our democracy.

For the first time, I was able to make the connection between democracy as “collective agency” (we-the-people building a common life and solving problems together) and the work of the therapist as promoting personal agency or efficacy. Therapy can be considered a form of democratic practice (Doherty, 2017a, 2017b). There is no democracy without “agentic” individuals and families. Authoritarian, antidemocratic countries engender many constraints on personal agency.

After the election, I discovered a new professional mission—to work on healing the divide among ordinary Americans. In couples therapy terms, this was similar to preventing a civic divorce. I was still as opposed to Trumpism as ever, but I knew this battle would be well staffed, while the struggle to bridge the bitter divide among our fellow citizens could easily fall to the wayside. We still have to live together as Americans. We tried divorce once (see *The Civil War*) and we are still fighting a custody battle for the American soul. So I decided to start a membership organization called Citizen Therapists for Democracy, with the goal of energizing therapists in promoting democracy in our offices and communities.

Then an unexpected event led me in a different direction. During a phone call right after that extraordinarily contentious election, two colleagues (David Blankenhorn, a self-described liberal Democrat, and David Lapp, a self-described conservative Republican) spontaneously decided to invite 10 Hillary Clinton voters and 10 Donald Trump voters to meet for a weekend in Southwest Ohio with the goal of getting past the toxic polarization. They called to ask my help in planning and facilitating the gathering.

Daunted (actually, frightened) by the challenge, I used every group design and facilitation skill at my disposal (Doherty, 2017c). There were many dramatic moments that weekend. It turned out to be a powerful experience of people coming to understand each other beyond stereotypes and finding common ground of concern for their community. My final words in the workshop were “this weekend, I’ve felt the pain of our nation, and now I feel hope for our nation.” Although there were very strong pro- and anti-Trump people in the workshop, I left believing that my fellow citizens do not really want a civic divorce and, if offered the right container for conversation, will choose to listen and find common ground.

Out of that weekend in December 2016 came the national nonprofit Better Angels ([www.better-angels.org](http://www.better-angels.org); the name is from the Abraham Lincoln phrase “the better angels of our nature”). The mission is to depolarize America by bringing “reds” (Conservatives, Republicans) and “blues” (Liberals, Democrats) into the same spaces for conversations. The workshops promote moving beyond stereotypes and finding common ground, rather than trying to change anyone’s mind. Better Angels also offers skills workshops where



people learn how to communicate across political differences, a Depolarizing Within workshop where people learn to change their own hearts and minds and to serve as agents of depolarization within their own political communities, a workshop on how to talk to family members who differ politically, and a special debate process that encourages collective search for understanding rather than winning or losing. My role has been the developer of the workshops and the trainer of the moderators.

A key decision we made in the formation of Better Angels was that the leadership be half red and half blue. This has given the organization credibility with conservatives who tend to be skeptical of the liberal bent of members of the psychological professions.

As a couples therapist whose work depends on successfully connecting with both partners, I know that I cannot be helpful as a citizen therapist unless I can empathically understand both sides of the political divide. This is more challenging in politics than with couples because when it comes to politics, I do have a personal stake: I have a dog in this race. But I see this work on depolarization not as emergency work to influence the next election but as a long game—how we can come together and solve our country's problems in a multipartisan and multiracial democracy. (Toxic polarization preceded Donald Trump and will remain after him.)

Unlike my other citizen therapist project which has functioned mainly at the local level, Better Angels is moving to scale, with several hundred workshop moderators (including many therapists) offering workshops in 36 states (as of August 2019). There are local Better Angels Alliances groups (with half reds and half blues) forming around the country, and local and national public officials are now reaching out to work with Better Angels.

Along with the Police and Black Men Project, I consider Better Angels as a culmination of my career as a citizen therapist. Like all committed therapists, I believe deeply in the human capacity for self-healing and constructive change. The world needs this faith and set of skills to bring renewed life into the public sphere, not just the private sphere. The renewal of our commonwealth will not come from supporting the right candidate and waiting for that person to do miracles. We have to invent a new breed of public actor with great catalytic skills, someone who resists objectifying the political "other."

Some years ago, I heard a presentation by four senior family therapy scholars who regretted that they had not made a larger impact in their careers, having been buried in day-to-day teaching and clinical administration and worrying that their research had not made a difference for practitioners. I was sitting in the same room feeling fired up about my work, partly because I see myself as a catalyst and not as a lone ranger. Some of the difference is inborn temperament (I got the optimistic Irish genes, not the depressive ones), but

some of it is working with a different paradigm. Citizen professional work has transformed my career and renewed the sense of idealism that brought me to this field.

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**William J. Doherty, PhD**, is a professor in the Department of Family Social Science at the University of Minnesota where he directs two centers relevant to today's presentation: The Minnesota Couples on the Brink Project, which develops ways to work with divorce ambivalence among couples considering divorce, and The Citizen Professional Center, which does community projects on divisive issues such as the relationship between Police and the Black Community. Following the 2016 U.S. Presidential election, he cofounded Better Angels, a citizen initiative to counteract political polarization and restore the fraying social fabric in American society. Among his awards is the Lifetime Achievement Award from the American Family Therapy Academy. He has authored 17 books, including *Soul Searching* and *Helping Couples on the Brink of Divorce*.