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Handbook of Clinical Sociology

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Book Reviews

Handbook of Clinical Sociology, edited by Howard M. Rebach and John G. Bruhn. New York: Plenum Press, 1991. 434 pp., \$55.00, \$29.50, paper.

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This handbook is long overdue. It is a book which will assist those involved with clinical practice (read problem solving) as well as those in academia who are interested in gaining a better understanding of a rapidly emerging discipline.

The book is broken down into four major parts. Part one is entitled "The Emerging Field of Clinical Sociology," and provides a definition of the field as well as a discussion of the place of clinical sociology in America. Part two is focused on "General Practice Concerns." These include the issues of assessment, intervention, program evaluation, relationships with clients, ethics, and the effects of social change on clinical practice. Part three deals with "Clinical Sociology in Specific Settings," and gives examples by actual practitioners. Included in Part three are detailed discussions of individuals and families, public policies, medical settings, health promotion, mental health, criminal justice systems, mediation, organizational development, the workplace, and interventions in school settings. Part four is devoted to "Special Populations." These special populations include the mental health setting, empowerment of women, gerontology, and drug abuse prevention.

This large volume is well organized. It certainly meets the goals of providing the reader with an overview of the field and a detailed discussion of the hands-on work that sociologists are currently performing. It does not include the clinical sociologist in some settings, such as the military or specific work set-

tings (although there is a chapter by Arthur Shostak on issues in the work place in general).

The historical material in the beginning provides the reader with a good understanding of clinical sociology's long history in the United States. The reader clearly comes to understand that clinical sociologists are interventionists. In reading the book, one learns that sociologists are problem solvers in the true sense. One of the more positive features of the book is its attention to ethical issues.

I remember speaking with Dr. Rebach when he was in the formulation stage of the handbook. I am aware of the great difficulty that he had in wrestling with such issues as: What fields are to be included or excluded? How much descriptive text versus problem solving presentations should there be? What is the relationship between theory and practice? These and a host of other issues are always difficult for organizers of handbooks. However, it must be noted that the editors have, by and large, succeeded in a fair balance.

This is the kind of book that college professors who teach courses on clinical sociology, sociological practice, social change, social intervention strategies, sociology of work, and related themes will find extremely useful. There are areas that could be strengthened in future editions. First, the book could use a summary statement by the editors in order to bring together the diversity of settings and techniques presented by the applied sociologists, and a summary of the patterns of application, relevant theories, and future areas of sociological intervention. Secondly, the book appears to be somewhat weak in its coverage of theoretical aspects. This need not be a criticism if one understands that an initial handbook has, as its purpose, the presentation of the problems, settings, and solutions. However, clinical sociology has been criticized (usually by non-applied sociologists) as being divorced from theory.

It is my experience that this criticism is invalid because most clinical sociologists have a particular theoretical orientation or orientations. However, the book might play into the hands of some who would argue that applied sociology is non-theoretical. Most sociologists are schooled enough in mid-range theories to use them as their regular basis of expansion, understanding, prediction, and integration of diverse observations. There is some attention to this in the handbook, but probably not enough.

The book reveals a very interesting and obvious fact concerning the contemporary social sciences—that sociology, as a discipline, has effective interventions to pressing contemporary problems that are substantively different than those of other disciplines. One need only read the chapter on mental health and clinical sociology by Ferguson to understand how true this is. By employing a bio-psycho-social role theory of mental health, the authors are able to impress

us with the utility of an interdisciplinary model (especially with the clinical sociologist serving as a member of the clinical team).

There is an old saying in the field that sociology is what sociologists do. There is much truth to this, but until recently the diversity of the fields of involvement of sociologists was unknown (not only to the public, but to other sociologists) about the expanding boundaries of their own discipline. One of the major complaints that professors often hear from students (if they are open to listening) is that the professors, themselves, are not aware of the diversity of occupational/professional involvements within their discipline. The idea that sociologists can only teach or do research is a myopic view. Students are increasingly asking for more career-line opportunities. They do exist and this book reveals some of the niches. Professors who are not involved in (nor necessarily interested in) clinical sociology should read the handbook in order to enhance their role of advisor to their students about the broadening opportunities within their own discipline.

Clinical Intervention for Bereaved Children: A Hospice Model, by Elizabeth J. Clark, Grace C. Zambelli, Anne de Jong, and Karen Marse. Montclair, NJ: The Hospice, Inc, 1988. 102 pp., \$29.50

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This is a manual on bereavement intervention prepared by staff members of The Hospice, Inc. of Montclair, New Jersey for use by hospital and hospice personnel. In the authors' view, the patient and family, in the face of death, constitute a single unit of care. Effective intervention on behalf of grieving survivors, they propose, can best be realized through the social support of families after, as well as prior to, a death. In keeping with this perspective, they describe an ongoing Bereavement Intervention Program instituted at the Montclair Hospice in 1985 involving both children and parents that, they believe, can serve as a model for other practitioners. The program includes a Creative Arts Therapy Group for children and a Companion Bereavement Support Group for parents. Typically, the two groups meet weekly, for one hour, over a ten-week period. They meet separately, except for two group sessions when they are brought together to review their progress and to facilitate dialogue between parent and child. While a formal evaluation of the program is yet to be completed, the authors report that most families describe themselves as more competent to deal with the death and more understanding of their child's reaction to loss after having participated in the program.

The manual is divided into two parts. The first part discusses the issue of childhood bereavement and briefly reviews the contemporary literature on chil-